



Outlook

Office of Special Counsel Filing Details

From Filing NoReply <filing-noreply@osc.gov>**Date** Wed 12/11/2024 8:35 AM**To** aabiwr@live.com <aabiwr@live.com> 1 attachment (440 KB)

OSCFiling-MedeirosDavid-DI-12112024134.pdf;

Please find attached a PDF documenting the details of your filing with the Office of Special Counsel. Please review and make sure your information is correct. Changes cannot be made using the Online Filing Portal. If you need to amend or add information regarding your complaint, please contact the attorney/investigator assigned or email info@osc.gov.



REPORT GOVERNMENT WRONGDOING (DISCLOSURE)

Do not use this form to submit classified information.

For instructions or questions, call the Case Review Division at (202) 804-7000.

*Denotes required fields.

IMPORTANT INFORMATION ABOUT FILING A DISCLOSURE

OSC WHISTLEBLOWER DISCLOSURE CHANNEL

Under 5 U.S.C. § 1213 and related provisions, the Office of Special Counsel (OSC) serves as a secure channel for federal employees, former federal employees, and applicants for federal employment with reliable knowledge of the wrongdoing to disclose:

- a violation of law, rule or regulation;
- gross mismanagement;
- gross waste of funds;
- an abuse of authority;
- a substantial and specific danger to public health or safety; and/or
- censorship related to scientific research.

OSC JURISDICTION

OSC has no jurisdiction over disclosures filed by:

- employees of the U.S. Postal Service and the Postal Regulatory Commission;
- members of the armed forces of the United States (*i.e.*, non-civilian military employees);
- state employees operating under federal grants;
- employees of federal contractors;
- other employees or federal agencies that are exempt under federal law; and
- Congressional or judicial branch employees.

ANONYMOUS SOURCES

While OSC will protect the identity of persons who make disclosures, it will not consider anonymous disclosures. If a disclosure is filed by an anonymous source, the disclosure will be referred to the Office of Inspector General in the appropriate agency. OSC will take no further action.

RETALIATION

Do you believe you suffered retaliation by your agency for disclosing wrongdoing? If yes, you may file a complaint of retaliation by navigating back to "My Cases" and selecting "New Complaint." Select Option 1 to complete and submit a Complaint of Prohibited Personnel Practice or other Prohibited Activity (PPPs). *If you have already completed the Complaint of Prohibited Personnel Practice or other Prohibited Activity above, please continue with this Disclosure.* PPPs are employment-related activities that are banned in the federal workforce.



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PPPs generally involve some type of personnel decision or action and may result in personal relief for people who have been subject to a PPP. For example, if we find that you were removed from federal service in retaliation for whistleblowing, OSC may act to get your job back. PPPs can also include allegations of harassment, failure to issue appraisals, and improper hiring. Do not file a disclosure to report retaliation or other PPPs.

CONTACT INFORMATION

Title:

First Name:* David

Middle Initial:

Last Name:* Medeiros

International Address?: No

Address:*

215 Mountain St
Willimantic, CT 06226

Cell Phone Number:

Home Phone Number:

Office Phone Number:

Ext.

Email Address:* aabiwr@live.com

Preferred means of contact:

Email: Yes

Cell phone: No

Home phone: No

Office phone: No

REPRESENTATIVE INFORMATION

Do you have representation? No

Information about representative, if applicable.

First Name:*

Middle Initial:

Last Name:*

International Address?:

Address: *



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Office Phone Number:

Ext.

Cell Phone Number:

Home Phone Number:

Email Address:

EMPLOYMENT INFORMATION

Name of Department/Agency about which you are making a disclosure.

Department:* Health and Human Services

Agency:* Centers For Medicare & Medicaid Services

Agency subcomponent: Medicaid Oversight for the Connecticut Acquired Brain Injury (ABI) Waiver

Street Address: 7500 Security Boulevard City: Baltimore State: Maryland Zip Code: 21244

City: Baltimore

State: MD

Zip Code: 21244

Employment Status:* Non-Federal Employee (please specify)

Title	Series	Grade

Please provide your dates of employment in this position.

Employment Service Type	Employment Service Subtype	If Other (specify)
Excepted Service	Other	Private Citizen, Advocate, and Whistleblower
Other	Other	Private Citizen, Advocate, and Whistleblower

Are you covered by a collective bargaining agreement?

I don't know



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DETAILS OF YOUR DISCLOSURES

Please identify the type of wrongdoing that you are alleging. You can make multiple disclosures, but you **MUST** choose one option. If you check "violation of law, rule, or regulation," specify, if you can, the particular law, rule or regulation violated (by name, subject, and/or legal citation). For each allegation, please answer the following questions (be as specific as possible). Please keep in mind that you will have an opportunity to provide more information and someone from OSC will contact you.

If OSC determines there is a substantial likelihood of wrongdoing, OSC will refer your disclosures to the involved agency for an investigation and report. To meet the substantial likelihood standard, there must be a significant probability that the information reveals wrongdoing that falls within one or more of the categories above. In its evaluation, OSC considers the strength, reliability, and credibility of the disclosures. If the substantial likelihood determination cannot be made, OSC will determine whether there is sufficient information to exercise its discretion to refer the allegations.

DISCLOSURES

Allegation	Violation of Law, Rule or Regulation
What action did they take?	Enabled systemic mismanagement of Medicaid funds, refused ADA accommodations, and obstructed FOIA requests.
When did this occur?	on going
How did you discover this action?	Advocating for medicaid consumers.
What additional facts support your allegation?	Delayed or denied FOIA responses, failed to provide requested accommodations for accessible formats.

DISCLOSURE SUBJECTS

Name of individual you believe is responsible for the wrongdoing disclosed.

First Name	Last Name	Title	Chain of Command
Andrea	Barton Reeves	Commissioner	Head of DSS, oversees Medicaid programs,



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			including the ABI Waiver Program.

REQUESTED OSC ACTION

What action would you like OSC to take?

1. What type of wrongdoing are you reporting?

(Check all that apply):

Gross Mismanagement

Violation of Law, Rule, or Regulation

Abuse of Authority

Danger to Public Health or Safety

2. Describe the wrongdoing.

Connecticut's Department of Social Services (DSS) and associated agencies have engaged in systemic misconduct involving gross mismanagement, violations of federal law, and abuse of authority. These actions harm vulnerable populations reliant on Medicaid and suppress transparency and accountability.

Key Wrongdoing Includes:

Gross Mismanagement of Medicaid Funds:

DSS operates a monopolistic referral system within the Acquired Brain Injury (ABI) Waiver Program, restricting consumer access to diverse providers and prioritizing financial gain over care quality.

Federal Medicaid funds are funneled to select providers without accountability, raising concerns about misuse of taxpayer dollars.

ADA and FOIA Violations:

DSS systematically denies or delays reasonable accommodations under the Americans with Disabilities Act (ADA), creating barriers for individuals with disabilities.

Freedom of Information Act (FOIA) requests for critical Medicaid provider data are ignored, delayed, or denied without valid exemptions, obstructing transparency.

Retaliation Against Whistleblowers:



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DSS and other entities retaliated against me for reporting systemic issues by excluding me from discussions, delaying complaint resolutions, and discrediting my advocacy.

Danger to Public Health and Safety:

By limiting consumer access to diverse providers and neglecting ADA compliance, DSS endangers the health and well-being of Medicaid recipients, particularly those with disabilities or acquired brain injuries.

3. Who committed the wrongdoing?

Connecticut Department of Social Services (DSS):

Key Individuals:

Andrea Barton Reeves (Commissioner, DSS)

DSS FOIA Officers

DSS Medicaid Program Administrators

Role: Mismanaged Medicaid programs, denied ADA accommodations, and obstructed FOIA compliance.

Connecticut Commission on Human Rights and Opportunities (CHRO):

Key Individuals:

Tanya Hughes (Executive Director, CHRO)

Cheryl Sharp (Deputy Director, CHRO)

Role: Mishandled ADA complaints and failed to address whistleblower retaliation.

Federal Oversight Agencies:

Chiquita Brooks-LaSure (Administrator, CMS)

Role: Failed to enforce federal Medicaid and ADA compliance standards in Connecticut.

4. When did this occur?

Misconduct began escalating in 2013-2014 following systemic changes to Connecticut Medicaid administration and continues to the present.

Specific incidents include:

ADA accommodation denials from 2021-2024.

FOIA delays and denials from 2020-2024.

Retaliatory actions increasing since 2022.

5. How did you learn about the wrongdoing?

Personal Experience: I directly experienced ADA accommodation denials, FOIA obstructions,



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and retaliatory actions as a whistleblower advocating for systemic reform.

Reports from Medicaid Consumers: Multiple individuals reported restricted access to diverse providers under DSS's monopolistic referral system.

FOIA Requests: Delayed and incomplete responses revealed DSS's lack of transparency and non-compliance with federal standards.

6. What evidence supports your claim?

FOIA Documentation:

Copies of delayed, denied, or incomplete FOIA responses from DSS and federal agencies.

ADA Accommodation Requests:

Written requests for cognitive support and accessible communication formats, alongside DSS's failure to act.

Grievance Records:

Complaints filed with CHRO and DSS regarding ADA non-compliance, FOIA delays, and retaliation.

Consumer Reports:

Statements from Medicaid recipients detailing restricted provider access and neglect of care quality.

7. Why is this important?

This misconduct violates federal laws, undermines public trust, and disproportionately harms vulnerable populations, including individuals with disabilities. Without intervention, these actions will continue to waste taxpayer dollars, endanger public health, and suppress advocacy for systemic reform.

WHERE ELSE DID YOU REPORT THIS MATTER?

I have also disclosed this information to:

Other Action Type	Action Taken Date
Department of Justice	
Congress or congressional committee	
Inspector General of department / agency involved	
Other office of department / agency involved	



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Additional information about reports to Inspectors General, if applicable.

First Name: **Last Name:**

Title:

Address:

Email Address:

Telephone Number:

Case ID #:

a. **What is the status of the matter?**

NOTE: MATTERS INVESTIGATED BY AN OFFICE OF INSPECTOR GENERAL

It is the general policy of OSC not to transmit allegations of wrongdoing to the head of the agency involved if the agency's Office of Inspector General has fully investigated, or is currently investigating, the same allegations.

ATTACHMENTS

Please note that the space available for attachments is limited. Therefore, DO NOT attach every document and email that may be relevant to your claim. You will have an opportunity to make additional submissions at a later date. We recommend limiting attachments to official forms and correspondence that document the action(s) at issue in your disclosure if these documents are relevant to your allegations.

I have attached the following documents to my filing:

File Name
09.24.2024 Federal_Intervention_HHS_OIG_CMS_GAO_DOJ_OCR_Whistleblower_Report_2024.pdf
Comprehensive Grievance Report and Request for Clarity Whistleblower Report Mediciad ABI Waiver Programs.pdf
01.12.2024 Notice Regarding HHS CMS Medicaid Administration in Connecticut FOIA Non Compliance ADA Concerns and Whistleblower Retaliations Complaint Appeals and Request for Transparency.pdf
DOJ 11.23.2024 Binder2.docx
requests (3).csv



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CONSENT

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I consent to disclosure of my identity.

Yes

I do not consent to disclosure of my identity. (Even if you do not consent, OSC may disclose your identity if necessary due to an imminent danger to public health or safety or imminent violation of any criminal law. See 5 U.S.C. § 1213(h).)

No

CERTIFICATION

I certify that all of the statements made in this complaint are true, complete, and correct to the best of my knowledge and belief. I understand that a false statement or concealment of a material fact is a criminal offense punishable by a fine, imprisonment, or both. 18 U.S.C. § 1001.*

Yes

BURDEN: The burden for this collection of information (including the time for reviewing instructions, searching existing data sources, gathering the data needed, and completing and reviewing the form) is estimated to be an average of one hour to submit a disclosure of information alleging agency wrongdoing, one hour and fifteen minutes to submit a complaint alleging a prohibited personnel practice or other prohibited activity, or 30 minutes to submit a complaint alleging prohibited political activity. Please send any comments about this burden estimate, and suggestions for reducing the burden, to the U.S. Office of Special Counsel, General Counsel's Office, 1730 M Street, NW, Suite 218, Washington, DC 20036-4505.

This Disclosure of Information was Received by OSC on: 11/25/2024



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First Name:* David

Middle Initial:

Last Name:* Medeiros

International Address?: No

Address:*

215 Mountain St
Willimantic, CT 06226

Cell Phone Number:

Home Phone Number:

Office Phone Number:

Ext.

Email Address:* aabiwr@live.com

Preferred means of contact:

Email: Yes

Cell phone: No

Home phone: No

Office phone: No

REPRESENTATIVE INFORMATION

Do you have representation? No

Information about representative, if applicable.

First Name:*

Middle Initial:

Last Name:*

International Address?:

Address: *



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EMPLOYMENT INFORMATION

Name of Department/Agency about which you are making a disclosure.

Department:* Health and Human Services

Agency:* Centers For Medicare & Medicaid Services

Agency subcomponent: Medicaid Oversight for the Connecticut Acquired Brain Injury (ABI) Waiver

Street Address: 7500 Security Boulevard City: Baltimore State: Maryland Zip Code: 21244

City: Baltimore

State: MD

Zip Code: 21244

Employment Status:* Non-Federal Employee (please specify)

Title	Series	Grade

Please provide your dates of employment in this position.

Employment Service Type	Employment Service Subtype	If Other (specify)
Excepted Service	Other	Private Citizen, Advocate, and Whistleblower
Other	Other	Private Citizen, Advocate, and Whistleblower

Are you covered by a collective bargaining agreement?

I don't know



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DISCLOSURES

Allegation	Violation of Law, Rule or Regulation
What action did they take?	Enabled systemic mismanagement of Medicaid funds, refused ADA accommodations, and obstructed FOIA requests.
When did this occur?	on going
How did you discover this action?	Advocating for medicaid consumers.
What additional facts support your allegation?	Delayed or denied FOIA responses, failed to provide requested accommodations for accessible formats.

DISCLOSURE SUBJECTS

Name of individual you believe is responsible for the wrongdoing disclosed.

First Name	Last Name	Title	Chain of Command
Andrea	Barton Reeves	Commissioner	Head of DSS, oversees Medicaid programs,



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			including the ABI Waiver Program.

REQUESTED OSC ACTION

What action would you like OSC to take?

1. What type of wrongdoing are you reporting?

(Check all that apply):

Gross Mismanagement

Violation of Law, Rule, or Regulation

Abuse of Authority

Danger to Public Health or Safety

2. Describe the wrongdoing.

Connecticut's Department of Social Services (DSS) and associated agencies have engaged in systemic misconduct involving gross mismanagement, violations of federal law, and abuse of authority. These actions harm vulnerable populations reliant on Medicaid and suppress transparency and accountability.

Key Wrongdoing Includes:

Gross Mismanagement of Medicaid Funds:

DSS operates a monopolistic referral system within the Acquired Brain Injury (ABI) Waiver Program, restricting consumer access to diverse providers and prioritizing financial gain over care quality.

Federal Medicaid funds are funneled to select providers without accountability, raising concerns about misuse of taxpayer dollars.

ADA and FOIA Violations:

DSS systematically denies or delays reasonable accommodations under the Americans with Disabilities Act (ADA), creating barriers for individuals with disabilities.

Freedom of Information Act (FOIA) requests for critical Medicaid provider data are ignored, delayed, or denied without valid exemptions, obstructing transparency.

Retaliation Against Whistleblowers:



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DSS and other entities retaliated against me for reporting systemic issues by excluding me from discussions, delaying complaint resolutions, and discrediting my advocacy.

Danger to Public Health and Safety:

By limiting consumer access to diverse providers and neglecting ADA compliance, DSS endangers the health and well-being of Medicaid recipients, particularly those with disabilities or acquired brain injuries.

3. Who committed the wrongdoing?

Connecticut Department of Social Services (DSS):

Key Individuals:

Andrea Barton Reeves (Commissioner, DSS)

DSS FOIA Officers

DSS Medicaid Program Administrators

Role: Mismanaged Medicaid programs, denied ADA accommodations, and obstructed FOIA compliance.

Connecticut Commission on Human Rights and Opportunities (CHRO):

Key Individuals:

Tanya Hughes (Executive Director, CHRO)

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Role: Mishandled ADA complaints and failed to address whistleblower retaliation.

Federal Oversight Agencies:

Chiquita Brooks-LaSure (Administrator, CMS)

Role: Failed to enforce federal Medicaid and ADA compliance standards in Connecticut.

4. When did this occur?

Misconduct began escalating in 2013-2014 following systemic changes to Connecticut Medicaid administration and continues to the present.

Specific incidents include:

ADA accommodation denials from 2021-2024.

FOIA delays and denials from 2020-2024.

Retaliatory actions increasing since 2022.

5. How did you learn about the wrongdoing?

Personal Experience: I directly experienced ADA accommodation denials, FOIA obstructions,



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Copies of delayed, denied, or incomplete FOIA responses from DSS and federal agencies.

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Grievance Records:

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Consumer Reports:

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7. Why is this important?

This misconduct violates federal laws, undermines public trust, and disproportionately harms vulnerable populations, including individuals with disabilities. Without intervention, these actions will continue to waste taxpayer dollars, endanger public health, and suppress advocacy for systemic reform.

WHERE ELSE DID YOU REPORT THIS MATTER?

I have also disclosed this information to:

Other Action Type	Action Taken Date
Department of Justice	
Congress or congressional committee	
Inspector General of department / agency involved	
Other office of department / agency involved	



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First Name: **Last Name:**

Title:

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Email Address:

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I have attached the following documents to my filing:

File Name
09.24.2024 Federal_Intervention_HHS_OIG_CMS_GAO_DOJ_OCR_Whistleblower_Report_2024.pdf
Comprehensive Grievance Report and Request for Clarity Whistleblower Report Mediciad ABI Waiver Programs.pdf
01.12.2024 Notice Regarding HHS CMS Medicaid Administration in Connecticut FOIA Non Compliance ADA Concerns and Whistleblower Retaliations Complaint Appeals and Request for Transparency.pdf
DOJ 11.23.2024 Binder2.docx
requests (3).csv



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I consent to disclosure of my identity.

Yes

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No

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BURDEN: The burden for this collection of information (including the time for reviewing instructions, searching existing data sources, gathering the data needed, and completing and reviewing the form) is estimated to be an average of one hour to submit a disclosure of information alleging agency wrongdoing, one hour and fifteen minutes to submit a complaint alleging a prohibited personnel practice or other prohibited activity, or 30 minutes to submit a complaint alleging prohibited political activity. Please send any comments about this burden estimate, and suggestions for reducing the burden, to the U.S. Office of Special Counsel, General Counsel's Office, 1730 M Street, NW, Suite 218, Washington, DC 20036-4505.

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- state employees operating under federal grants;
- employees of federal contractors;
- other employees or federal agencies that are exempt under federal law; and
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PPPs generally involve some type of personnel decision or action and may result in personal relief for people who have been subject to a PPP. For example, if we find that you were removed from federal service in retaliation for whistleblowing, OSC may act to get your job back. PPPs can also include allegations of harassment, failure to issue appraisals, and improper hiring. Do not file a disclosure to report retaliation or other PPPs.

CONTACT INFORMATION

Title:

First Name:* David

Middle Initial:

Last Name:* Medeiros

International Address?: No

Address:*

215 Mountain St
Willimantic, CT 06226

Cell Phone Number:

Home Phone Number:

Office Phone Number:

Ext.

Email Address:* aabiwr@live.com

Preferred means of contact:

Email: Yes

Cell phone: No

Home phone: No

Office phone: No

REPRESENTATIVE INFORMATION

Do you have representation? No

Information about representative, if applicable.

First Name:*

Middle Initial:

Last Name:*

International Address?:

Address: *



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*Denotes required fields.

Office Phone Number:

Ext.

Cell Phone Number:

Home Phone Number:

Email Address:

EMPLOYMENT INFORMATION

Name of Department/Agency about which you are making a disclosure.

Department:* Health and Human Services

Agency:* Centers For Medicare & Medicaid Services

Agency subcomponent: Medicaid Oversight for the Connecticut Acquired Brain Injury (ABI) Waiver

Street Address: 7500 Security Boulevard City: Baltimore State: Maryland Zip Code: 21244

City: Baltimore

State: MD

Zip Code: 21244

Employment Status:* Non-Federal Employee (please specify)

Title	Series	Grade

Please provide your dates of employment in this position.

Employment Service Type	Employment Service Subtype	If Other (specify)
Excepted Service	Other	Private Citizen, Advocate, and Whistleblower
Other	Other	Private Citizen, Advocate, and Whistleblower

Are you covered by a collective bargaining agreement?

I don't know



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DETAILS OF YOUR DISCLOSURES

Please identify the type of wrongdoing that you are alleging. You can make multiple disclosures, but you **MUST** choose one option. If you check "violation of law, rule, or regulation," specify, if you can, the particular law, rule or regulation violated (by name, subject, and/or legal citation). For each allegation, please answer the following questions (be as specific as possible). Please keep in mind that you will have an opportunity to provide more information and someone from OSC will contact you.

If OSC determines there is a substantial likelihood of wrongdoing, OSC will refer your disclosures to the involved agency for an investigation and report. To meet the substantial likelihood standard, there must be a significant probability that the information reveals wrongdoing that falls within one or more of the categories above. In its evaluation, OSC considers the strength, reliability, and credibility of the disclosures. If the substantial likelihood determination cannot be made, OSC will determine whether there is sufficient information to exercise its discretion to refer the allegations.

DISCLOSURES

Allegation	Violation of Law, Rule or Regulation
What action did they take?	Enabled systemic mismanagement of Medicaid funds, refused ADA accommodations, and obstructed FOIA requests.
When did this occur?	on going
How did you discover this action?	Advocating for medicaid consumers.
What additional facts support your allegation?	Delayed or denied FOIA responses, failed to provide requested accommodations for accessible formats.

DISCLOSURE SUBJECTS

Name of individual you believe is responsible for the wrongdoing disclosed.

First Name	Last Name	Title	Chain of Command
Andrea	Barton Reeves	Commissioner	Head of DSS, oversees Medicaid programs,



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			including the ABI Waiver Program.

REQUESTED OSC ACTION

What action would you like OSC to take?

1. What type of wrongdoing are you reporting?

(Check all that apply):

Gross Mismanagement

Violation of Law, Rule, or Regulation

Abuse of Authority

Danger to Public Health or Safety

2. Describe the wrongdoing.

Connecticut's Department of Social Services (DSS) and associated agencies have engaged in systemic misconduct involving gross mismanagement, violations of federal law, and abuse of authority. These actions harm vulnerable populations reliant on Medicaid and suppress transparency and accountability.

Key Wrongdoing Includes:

Gross Mismanagement of Medicaid Funds:

DSS operates a monopolistic referral system within the Acquired Brain Injury (ABI) Waiver Program, restricting consumer access to diverse providers and prioritizing financial gain over care quality.

Federal Medicaid funds are funneled to select providers without accountability, raising concerns about misuse of taxpayer dollars.

ADA and FOIA Violations:

DSS systematically denies or delays reasonable accommodations under the Americans with Disabilities Act (ADA), creating barriers for individuals with disabilities.

Freedom of Information Act (FOIA) requests for critical Medicaid provider data are ignored, delayed, or denied without valid exemptions, obstructing transparency.

Retaliation Against Whistleblowers:



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DSS and other entities retaliated against me for reporting systemic issues by excluding me from discussions, delaying complaint resolutions, and discrediting my advocacy.

Danger to Public Health and Safety:

By limiting consumer access to diverse providers and neglecting ADA compliance, DSS endangers the health and well-being of Medicaid recipients, particularly those with disabilities or acquired brain injuries.

3. Who committed the wrongdoing?

Connecticut Department of Social Services (DSS):

Key Individuals:

Andrea Barton Reeves (Commissioner, DSS)

DSS FOIA Officers

DSS Medicaid Program Administrators

Role: Mismanaged Medicaid programs, denied ADA accommodations, and obstructed FOIA compliance.

Connecticut Commission on Human Rights and Opportunities (CHRO):

Key Individuals:

Tanya Hughes (Executive Director, CHRO)

Cheryl Sharp (Deputy Director, CHRO)

Role: Mishandled ADA complaints and failed to address whistleblower retaliation.

Federal Oversight Agencies:

Chiquita Brooks-LaSure (Administrator, CMS)

Role: Failed to enforce federal Medicaid and ADA compliance standards in Connecticut.

4. When did this occur?

Misconduct began escalating in 2013-2014 following systemic changes to Connecticut Medicaid administration and continues to the present.

Specific incidents include:

ADA accommodation denials from 2021-2024.

FOIA delays and denials from 2020-2024.

Retaliatory actions increasing since 2022.

5. How did you learn about the wrongdoing?

Personal Experience: I directly experienced ADA accommodation denials, FOIA obstructions,



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and retaliatory actions as a whistleblower advocating for systemic reform.

Reports from Medicaid Consumers: Multiple individuals reported restricted access to diverse providers under DSS's monopolistic referral system.

FOIA Requests: Delayed and incomplete responses revealed DSS's lack of transparency and non-compliance with federal standards.

6. What evidence supports your claim?

FOIA Documentation:

Copies of delayed, denied, or incomplete FOIA responses from DSS and federal agencies.

ADA Accommodation Requests:

Written requests for cognitive support and accessible communication formats, alongside DSS's failure to act.

Grievance Records:

Complaints filed with CHRO and DSS regarding ADA non-compliance, FOIA delays, and retaliation.

Consumer Reports:

Statements from Medicaid recipients detailing restricted provider access and neglect of care quality.

7. Why is this important?

This misconduct violates federal laws, undermines public trust, and disproportionately harms vulnerable populations, including individuals with disabilities. Without intervention, these actions will continue to waste taxpayer dollars, endanger public health, and suppress advocacy for systemic reform.

WHERE ELSE DID YOU REPORT THIS MATTER?

I have also disclosed this information to:

Other Action Type	Action Taken Date
Department of Justice	
Congress or congressional committee	
Inspector General of department / agency involved	
Other office of department / agency involved	



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Additional information about reports to Inspectors General, if applicable.

First Name: **Last Name:**

Title:

Address:

Email Address:

Telephone Number:

Case ID #:

a. **What is the status of the matter?**

NOTE: MATTERS INVESTIGATED BY AN OFFICE OF INSPECTOR GENERAL

It is the general policy of OSC not to transmit allegations of wrongdoing to the head of the agency involved if the agency's Office of Inspector General has fully investigated, or is currently investigating, the same allegations.

ATTACHMENTS

Please note that the space available for attachments is limited. Therefore, DO NOT attach every document and email that may be relevant to your claim. You will have an opportunity to make additional submissions at a later date. We recommend limiting attachments to official forms and correspondence that document the action(s) at issue in your disclosure if these documents are relevant to your allegations.

I have attached the following documents to my filing:

File Name
09.24.2024 Federal_Intervention_HHS_OIG_CMS_GAO_DOJ_OCR_Whistleblower_Report_2024.pdf
Comprehensive Grievance Report and Request for Clarity Whistleblower Report Mediciad ABI Waiver Programs.pdf
01.12.2024 Notice Regarding HHS CMS Medicaid Administration in Connecticut FOIA Non Compliance ADA Concerns and Whistleblower Retaliations Complaint Appeals and Request for Transparency.pdf
DOJ 11.23.2024 Binder2.docx
requests (3).csv



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CONSENT

Do you consent to the disclosure of your identity to others outside OSC if it becomes necessary in taking further action on this matter?*

I consent to disclosure of my identity.

Yes

I do not consent to disclosure of my identity. (Even if you do not consent, OSC may disclose your identity if necessary due to an imminent danger to public health or safety or imminent violation of any criminal law. See 5 U.S.C. § 1213(h).)

No

CERTIFICATION

I certify that all of the statements made in this complaint are true, complete, and correct to the best of my knowledge and belief. I understand that a false statement or concealment of a material fact is a criminal offense punishable by a fine, imprisonment, or both. 18 U.S.C. § 1001.*

Yes

BURDEN: The burden for this collection of information (including the time for reviewing instructions, searching existing data sources, gathering the data needed, and completing and reviewing the form) is estimated to be an average of one hour to submit a disclosure of information alleging agency wrongdoing, one hour and fifteen minutes to submit a complaint alleging a prohibited personnel practice or other prohibited activity, or 30 minutes to submit a complaint alleging prohibited political activity. Please send any comments about this burden estimate, and suggestions for reducing the burden, to the U.S. Office of Special Counsel, General Counsel's Office, 1730 M Street, NW, Suite 218, Washington, DC 20036-4505.

This Disclosure of Information was Received by OSC on: 11/25/2024



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PLEASE KEEP A COPY OF YOUR COMPLAINT, ANY SUPPORTING DOCUMENTATION, AND ANY ADDITIONAL ALLEGATIONS THAT YOU SEND TO OSC NOW OR AT ANY TIME WHILE YOUR COMPLAINT IS PENDING. REPRODUCTION CHARGES UNDER THE FREEDOM OF INFORMATION ACT MAY APPLY TO ANY REQUEST YOU MAKE FOR COPIES OF MATERIALS THAT YOU PROVIDED TO OSC.



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IMPORTANT INFORMATION ABOUT FILING A DISCLOSURE

OSC WHISTLEBLOWER DISCLOSURE CHANNEL

Under 5 U.S.C. § 1213 and related provisions, the Office of Special Counsel (OSC) serves as a secure channel for federal employees, former federal employees, and applicants for federal employment with reliable knowledge of the wrongdoing to disclose:

- a violation of law, rule or regulation;
- gross mismanagement;
- gross waste of funds;
- an abuse of authority;
- a substantial and specific danger to public health or safety; and/or
- censorship related to scientific research.

OSC JURISDICTION

OSC has no jurisdiction over disclosures filed by:

- employees of the U.S. Postal Service and the Postal Regulatory Commission;
- members of the armed forces of the United States (*i.e.*, non-civilian military employees);
- state employees operating under federal grants;
- employees of federal contractors;
- other employees or federal agencies that are exempt under federal law; and
- Congressional or judicial branch employees.

ANONYMOUS SOURCES

While OSC will protect the identity of persons who make disclosures, it will not consider anonymous disclosures. If a disclosure is filed by an anonymous source, the disclosure will be referred to the Office of Inspector General in the appropriate agency. OSC will take no further action.

RETALIATION

Do you believe you suffered retaliation by your agency for disclosing wrongdoing? If yes, you may file a complaint of retaliation by navigating back to "My Cases" and selecting "New Complaint." Select Option 1 to complete and submit a Complaint of Prohibited Personnel Practice or other Prohibited Activity (PPPs). *If you have already completed the Complaint of Prohibited Personnel Practice or other Prohibited Activity above, please continue with this Disclosure.* PPPs are employment-related activities that are banned in the federal workforce.



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CONTACT INFORMATION

Title:

First Name:* David

Middle Initial:

Last Name:* Medeiros

International Address?: No

Address:*

215 Mountain St
Willimantic, CT 06226

Cell Phone Number:

Home Phone Number:

Office Phone Number:

Ext.

Email Address:* aabiwr@live.com

Preferred means of contact:

Email: Yes

Cell phone: No

Home phone: No

Office phone: No

REPRESENTATIVE INFORMATION

Do you have representation? No

Information about representative, if applicable.

First Name:*

Middle Initial:

Last Name:*

International Address?:

Address: *



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*Denotes required fields.

Office Phone Number:

Ext.

Cell Phone Number:

Home Phone Number:

Email Address:

EMPLOYMENT INFORMATION

Name of Department/Agency about which you are making a disclosure.

Department:* Health and Human Services

Agency:* Centers For Medicare & Medicaid Services

Agency subcomponent: Office of the Inspector General (OIG)

Street Address: 200 Independence Avenue, SW

City: Washington

State: DC

Zip Code: 20201

Employment Status:* Non-Federal Employee (please specify)

Title	Series	Grade

Please provide your dates of employment in this position.

Employment Service Type	Employment Service Subtype	If Other (specify)
Excepted Service	Other	Private Citizen, Advocate, and Whistleblower
Other	Other	Private Citizen, Advocate, and Whistleblower

Are you covered by a collective bargaining agreement?

DETAILS OF YOUR DISCLOSURES



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DISCLOSURES

Allegation	Gross Waste of Funds
What action did they take?	
When did this occur?	
How did you discover this action?	
What additional facts support your allegation?	
Allegation	Violation of Law, Rule or Regulation
What action did they take?	The Connecticut Office of the State Comptroller, led by General Counsel Yamuna (Yam) Menon, failed to comply with state and federal Freedom of Information Act (FOIA) requirements by: Failing to conduct adequate records searches. Failing to redirect or identify responsible agencies holding requested records. Failing to provide legally required Vaughn Indexes or explanations for withheld information. Additionally, the Connecticut Department of Social Services (DSS), in collaboration with contractors such as Accenture and Manatt, contributed to potential violations by failing to ensure public



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	transparency and compliance with Medicaid oversight regulations under 42 CFR § 430.35.
When did this occur?	Timeframe: The violations began on or around October 29, 2024, when I submitted a Freedom of Information Act (FOIA) request to the Connecticut Office of the State Comptroller and other agencies. These violations are ongoing as the agencies have failed to provide adequate responses, conduct sufficient records searches, or adhere to federal and state transparency laws.
How did you discover this action?	I discovered these actions through my direct engagement with the Freedom of Information Act (FOIA) process and my involvement as an advocate for Medicaid recipients, particularly individuals relying on the Acquired Brain Injury (ABI) Waiver. The following key events revealed the systemic issues: 1. FOIA Requests and Responses On October 29, 2024, I submitted a FOIA request to the Connecticut Office of the State Comptroller, Connecticut Department of Social Services (DSS), and other agencies for records related to Medicaid programs, ABI Waiver amendments, and contractor activities involving Accenture and Manatt. Agencies failed to conduct adequate searches, provide redirections, or adhere to legal timelines, as evidenced by their incomplete responses and appeals communications between October 30 and November 12, 2024. 2. ADA Accommodation Requests I submitted ADA accommodation requests alongside my FOIA filings, as required by my traumatic brain injury (TBI)-related needs. The agencies failed to implement these accommodations, creating procedural barriers and violating federal law. This became evident during their responses to my FOIA requests and appeals in October and November 2024. 3. Medicaid Program Advocacy Through my advocacy work as the founder of ABI Resources, I identified long-standing concerns with Medicaid program transparency and contractor influence. Patterns of mismanagement emerged during reviews of Medicaid amendment processes and stakeholder communications dating back to 2012. The lack of publicly available documentation



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	regarding ABI Waiver amendments and related policies further highlighted systemic failures. 4. Contractor Influence Concerns regarding contractor influence (Accenture and Manatt) were raised by stakeholders and whistleblowers in my network. Their activities, including policy advising without adequate oversight, were identified as contributing to a lack of transparency and potential fiscal waste.
What additional facts support your allegation?	The following facts and documentation substantiate my allegations regarding violations of law, gross mismanagement, abuse of authority, and systemic accountability failures: 1. FOIA Non-Compliance Failure to Conduct Adequate Searches: The Connecticut Office of the State Comptroller failed to certify search methodologies or consult appropriate personnel, violating 5 U.S.C. § 552(a)(3) and Conn. Gen. Stat. § 1-211. No redirections to responsible agencies were made, despite clear indications that records related to Medicaid amendments and contractors (Accenture and Manatt) exist elsewhere. The absence of a Vaughn Index or justification for withheld records violates transparency standards upheld in <i>NARA v. Favish</i> (2004). Documentation: FOIA requests and appeals filed between October 29, 2024, and November 12, 2024, show consistent procedural failures. Agency responses, including a lack of clarity from the Office of the State Comptroller, confirm incomplete searches and non-compliance with FOIA laws. 2. ADA Violations Failure to Provide Accommodations: Requests for email-only communication, embedded text in email bodies, and screen-reader-compatible PDFs were ignored. This violates 42 U.S.C. § 12132 and Section 504 of the Rehabilitation Act, which mandate equal access for individuals with disabilities. The procedural barriers created by these failures disproportionately impacted my ability to process records effectively, constituting discrimination under <i>Tennessee v. Lane</i> (2004). Documentation: ADA accommodation requests submitted alongside FOIA filings show non-compliance



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	with reasonable accommodation standards. Agency correspondence from November 2024 fails to address accommodation needs explicitly, despite repeated reminders. 3. Gross Mismanagement of Medicaid Programs Lack of Oversight in ABI Waiver Amendments: Connecticut Department of Social Services (DSS) engaged contractors (Accenture and Manatt) to advise on Medicaid amendments and managed care models without adequate public transparency or oversight. Failure to comply with federal Medicaid regulations (42 CFR § 430.35) raises concerns about state accountability for program administration. Documentation: No records have been provided to substantiate claims of federal or state review of ABI Waiver amendments or contractor activities. Whistleblower insights suggest contractors influenced policy decisions without addressing stakeholder concerns about accessibility and equity. 4. Abuse of Authority Suppression of Whistleblowers: Whistleblowers reporting systemic Medicaid mismanagement and potential conflicts of interest involving contractors have faced barriers to disclosure, violating the Whistleblower Protection Act (5 U.S.C. § 2302). Agency responses demonstrate a lack of clear mechanisms for reporting or addressing whistleblower concerns. Documentation: Reports from stakeholders highlight systemic suppression of dissent and insufficient safeguards for whistleblower anonymity. Corresp
Allegation	Gross Mismanagement
What action did they take?	The following individuals and contractors, under the leadership of the Connecticut Department of Social Services (DSS), engaged in actions and inactions that violated constitutional law rights, the Americans with Disabilities Act (ADA), Medicaid regulations, taxpayer accountability standards, and whistleblower protections. Their combined failures perpetuated systemic inequities, regulatory non-compliance, and a lack of transparency and accountability in Medicaid program administration, particularly the Acquired Brain Injury (ABI) Waiver. Key Individuals and Their Actions 1. Andrea Barton Reeves



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	Role: Commissioner of the Connecticut Department of Social Services (DSS) (Appointed 2023) Actions and Violations: Failure to Uphold Constitutional Rights: Obstructed transparency guaranteed under the First Amendment, infringing on the public's right to access government information and participate in policymaking. Ignored due process and equal protection obligations under the Fifth and Fourteenth Amendments by failing to implement ADA accommodations and equitable Medicaid policies. Violation of Federal Medicaid Standards: Allowed DSS to proceed with Medicaid amendments, including ABI Waiver updates, without ensuring compliance with 42 U.S.C. § 1396 et seq. and 42 CFR § 430.35, which mandate equity, accessibility, and accountability in Medicaid-funded programs. Failed to address systemic inequities that disproportionately impact individuals with brain injuries and disabilities. Transparency Failures: Ignored state and federal Freedom of Information Act (FOIA) requests, obstructing access to public records related to Medicaid funding, contractor agreements, and policy development. Repeatedly denied ADA accommodation requests, violating 42 U.S.C. § 12132, and creating procedural barriers for individuals with disabilities seeking access to public information. Fiscal Mismanagement: Oversaw contracts with Accenture and Manatt, Phelps & Phillips, LLP, resulting in potential misuse of taxpayer dollars without measurable deliverables or fiscal transparency. 2. Dr. Mehul Dalal Role: Chief Policy Advisor, DSS (Appointed July 2023) Actions and Violations: Policy Decisions Without Public Accountability: Directed Medicaid policies, including ABI Waiver amendments, without adequately consulting Medicaid recipients, providers, or advocacy groups. Ignored federal accessibility requirements under the ADA (42 U.S.C. § 12132) and related Medicaid statutes. Failure to Monitor Contractor Activities: Neglected to establish oversight mechanisms for contractors influencing key Medicaid decisions, allowing Accenture and Manatt to operate



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	without transparency or accountability. Constitutional and Regulatory Breaches: Violated the Fourteenth Amendment's Equal Protection Clause and Medicaid accessibility regulations under 42 CFR § 440.180 by failing to protect Medicaid recipients' rights to equitable services. 3. Joel Norwood Role: Deputy Chief Policy Advisor, DSS (Appointe
When did this occur?	The systemic mismanagement and failures in the administration of the Medicaid program, particularly the Acquired Brain Injury (ABI) Waiver, have occurred over an extended period. Key timeframes illustrate how these issues evolved and were perpetuated under the leadership of Andrea Barton Reeves, Dr. Mehul Dalal, and Joel Norwood, and through contractor influence from Accenture and Manatt, Phelps & Phillips, LLP. These actions and inactions span from 2012 to the present, with specific incidents detailed below: Key Timeframes and Incidents 1. Initial Contractor Engagement and Longstanding Issues (2012–2022) 2012: DSS engaged Accenture and Manatt, Phelps & Phillips, LLP as contractors to advise on Medicaid program development and amendments. During this period, systemic issues in transparency and accountability began to emerge as contractors influenced Medicaid policy without adequate oversight mechanisms. Federal and state accessibility requirements were often overlooked in policy deci
How did you discover this action?	How Did You Discover This Action? The actions and systemic failures in the administration of Medicaid programs, particularly the Acquired Brain Injury (ABI) Waiver, were uncovered through a comprehensive approach combining advocacy efforts, FOIA engagement, stakeholder testimonies, procedural analysis, and legal research. Each method revealed patterns of mismanagement, non-compliance with federal and state laws, and significant gaps in transparency and accountability. 1. Direct Advocacy Efforts As the founder of ABI Resources, I have worked extensively with Medicaid recipients, healthcare providers, and advocacy organizations. My work uncovered: Systemic Barriers to



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	Services: Medicaid recipients reported consistent difficulties accessing equitable care, particularly under the ABI Waiver. These included: Delayed access to providers and services. Inadequate outreach and support for individuals with brain injuries. Confusion about eligibility changes and amendments to Medicaid programs. Stakeholder Concerns: Providers raised alarms about delays in reimbursements and unclear guidance from DSS, pointing to inefficiencies in Medicaid administration. Advocacy groups expressed frustration over the lack of meaningful consultation during key policy changes, indicating that Medicaid recipients and stakeholders were often excluded from the decision-making process. 2. FOIA Requests and Engagement Initial FOIA Requests (October 29, 2024): I filed FOIA requests with DSS, the Connecticut Office of the State Comptroller, and related agencies to obtain records detailing: Medicaid program management. ABI Waiver amendments and updates. Contractor involvement with Accenture and Manatt. Responses revealed: Incomplete or obstructed records searches. Lack of compliance with FOIA transparency standards under 5 U.S.C. § 552 and Conn. Gen. Stat. § 1-211. No justification for withheld documents, violating transparency precedents such as NARA v. Favish (2004). FOIA Appeals (October 30–November 12, 2024): Appeals to FOIA denials further highlighted systemic barriers, including: Procedural delays and inadequate records searches. Refusal to implement ADA accommodations, such as email-only communication and simplified summaries for complex records, violating 42 U.S.C. § 12132 (ADA). 3. Stakeholder Reports and Testimonies Medicaid Recipients: Individuals relying on ABI Waiver services reported barriers such as: Inequitable access to healthcare providers. Delays in receiving services critical to their health and quality of life. Difficulty navigating program changes due to lack of clear communication from DSS. Healthcare Providers and Advocacy Groups: Providers cited inefficiencies in DSS policies that created financial strain and administrative delays. Advocacy



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	groups expressed concerns about DSS's reliance on contractors like Accenture and Manatt, highlighting the lack of public consultation or oversight in Medicaid policy decisions. 4. Procedural and Regulatory Analysis
What additional facts support your allegation?	What Additional Facts Support Your Allegation of a Violation of Law, Rule, or Regulation? The Connecticut Department of Social Services (DSS), under Andrea Barton Reeves' leadership, along with Dr. Mehul Dalal, Joel Norwood, and contractors Accenture and Manatt, Phelps & Phillips, LLP, engaged in actions and inactions that violated multiple federal and state laws, regulations, and constitutional protections. The following detailed facts substantiate the allegations of these violations: 1. Violations of the Freedom of Information Act (FOIA) Failure to Conduct Adequate Records Searches DSS failed to conduct reasonable and thorough searches for FOIA-requested records concerning Medicaid program amendments, ABI Waiver updates, and contractor agreements, violating 5 U.S.C. § 552(a)(3) and Conn. Gen. Stat. § 1-211. No certification of search methodology or systems consulted was provided, leaving the scope and integrity of the search unclear. Failure to Provide Justifications for Withholding Records DSS did not provide legally required Vaughn Indexes or other detailed explanations for records that were withheld or redacted, violating transparency standards established in <i>NARA v. Favish</i> (2004). The refusal to disclose contracts and communications with Accenture and Manatt raises concerns about deliberate obstruction. Evidence of FOIA Non-Compliance FOIA requests submitted on October 29, 2024, and appeals filed between October 30 and November 12, 2024, demonstrate: Incomplete searches and refusals to produce responsive documents. Persistent delays and procedural barriers. 2. Violations of the Americans with Disabilities Act (ADA) Denial of ADA Accommodations DSS failed to provide legally mandated accommodations requested alongside FOIA filings, including: Email-only communication for accessibility. Screen-reader-compatible PDF formats. Simplified



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	summaries for complex documents. These failures violated 42 U.S.C. § 12132 and Section 504 of the Rehabilitation Act, which mandate equal access for individuals with disabilities. Procedural Barriers The lack of accommodations created additional barriers for individuals with disabilities, depriving them of their constitutional right to equal protection under the Fourteenth Amendment. 3. Non-Compliance with Federal Medicaid Regulations Failure to Meet Federal Accessibility and Equity Standards DSS neglected to ensure that amendments to the ABI Waiver complied with 42 CFR § 430.35, which mandates equity, accessibility, and proper federal oversight in Medicaid-funded programs. Medicaid recipients, particularly those with brain injuries, reported delays and inequities in accessing services, demonstrating DSS's failure to implement accessible and equitable care under 42 U.S.C. § 12132. Inadequate Oversight of Contractor Activities Contractors Accenture and Manatt played significant roles in advising on Medicaid amendments and managed care models, but DSS failed to establish: Transparency mechanisms for their recommen
Allegation	Abuse of Authority
What action did they take?	2. What Action Did They Take? The individuals responsible for the Connecticut Department of Social Services (DSS) and related entities engaged in actions and inactions that violated constitutional rights, ADA requirements, state and federal Medicaid laws, taxpayer accountability standards, FOIA transparency obligations, and whistleblower protections. These actions collectively contributed to systemic failures, mismanagement, and inequities in Medicaid program administration, particularly the Acquired Brain Injury (ABI) Waiver. Key Individuals and Their Actions 1. Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS) Actions and Violations: Constitutional Violations: Denied access to public records, violating the First Amendment guarantee of transparency and public participation in government accountability. Failed to



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	uphold due process and equal protection rights under the Fifth and Fourteenth Amendments by neglecting to implement ADA accommodations and equitable Medicaid policies. Non-Compliance with Medicaid Standards: Allowed DSS to implement Medicaid amendments, including ABI Waiver updates, without ensuring compliance with 42 U.S.C. § 1396 et seq. and 42 CFR § 430.35, which mandate equity, accessibility, and federal oversight. Ignored systemic barriers that disproportionately affect Medicaid recipients with disabilities, violating federal accessibility requirements under 42 U.S.C. § 12132. FOIA and Transparency Failures: Repeatedly obstructed public access to Medicaid program records by failing to respond adequately to FOIA requests, violating 5 U.S.C. § 552 and Conn. Gen. Stat. § 1-211. Ignored FOIA appeals and refused to provide Vaughn Indexes or certifications of record searches, demonstrating a deliberate obstruction of transparency laws. Mismanagement of Medicaid Funds: Authorized contracts with Accenture and Manatt, Phelps & Phillips, LLP, without adequate oversight or accountability mechanisms, raising concerns about potential misuse of taxpayer dollars. 2. Dr. Mehul Dalal Title: Chief Policy Advisor, DSS Actions and Violations: Policy Development Without Oversight: Played a leading role in shaping Medicaid policies, including amendments to the ABI Waiver, without ensuring alignment with federal regulations or addressing stakeholder concerns about inequities. ADA and Medicaid Violations: Failed to implement policies that met federal accessibility standards under 42 U.S.C. § 12132 and 42 CFR § 440.180, leaving individuals with disabilities underserved. Transparency Failures: Did not address procedural barriers in FOIA responses, obstructing public accountability and violating transparency laws. 3. Joel Norwood Title: Deputy Chief Policy Advisor, DSS Actions and Violations: Neglect of Oversight Responsibilities: Shared responsibility for inadequate monitoring of ABI Waiver amendments, resulting in gaps in equity and



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	accessibility for Medicaid recipients. Procedural and Accountability Failu
When did this occur?	When Did This Occur? The systemic violations and abuses of authority in the administration of Medicaid programs, particularly the Acquired Brain Injury (ABI) Waiver, span over a decade, beginning in 2012 with contractor engagements and escalating in 2023 under the leadership of Andrea Barton Reeves. These failures continued through November 2024, with key incidents highlighting worsening transparency violations, non-compliance with federal laws, and inequities in Medicaid services. Below is a comprehensive timeline with specific legal references and examples of harm: _____ 1. Initial Contractor Engagements and Policy Decisions (2012–2022) • 2012: • DSS engaged Accenture and Manatt, Phelps & Phillips, LLP to provide consulting services for Medicaid program development, including amendments to the ABI Waiver and managed care models. • Contractor influence occurred without adequate oversight or accountability mechanisms, violating transparency standards
How did you discover this action?	The systemic abuses of authority, transparency failures, and regulatory violations within the Connecticut Department of Social Services (DSS) were uncovered through a multi-pronged approach, including direct advocacy efforts, FOIA requests and appeals, stakeholder testimonies, procedural analysis, and legal research. Each method revealed evidence of persistent mismanagement, non-compliance with state and federal laws, and systemic inequities affecting Medicaid recipients.
What additional facts support your allegation?	The systemic abuses of authority, transparency failures, and regulatory violations within the Connecticut Department of Social Services (DSS) were uncovered through a multi-pronged approach, including direct advocacy efforts, FOIA requests and appeals, stakeholder testimonies, procedural analysis, and legal research. Each method revealed evidence of persistent mismanagement, non-compliance with state and federal laws, and systemic



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	inequities affecting Medicaid recipients. 1. Direct Advocacy Efforts As the founder of ABI Resources, I have worked directly with Medicaid recipients, healthcare providers, and advocacy groups. These experiences revealed systemic barriers, inequities, and procedural failures within DSS: Barriers for ABI Waiver Recipients: Recipients consistently reported: Delays in Service Delivery: Long wait times for approvals and services under the ABI Waiver. Provider Network Issues: Limited provider access and a lack of clarity on eligibility criteria. Communication Failures: Inadequate outreach and guidance on Medicaid program changes. These barriers disproportionately impacted individuals with disabilities, violating federal Medicaid accessibility requirements under 42 CFR § 440.180 and ADA protections under 42 U.S.C. § 12132.

DISCLOSURE SUBJECTS

Name of individual you believe is responsible for the wrongdoing disclosed.

First Name	Last Name	Title	Chain of Command
Yamuna	Menon	The Connecticut Office of the State Comptroller, led by General Counsel Yamuna (Yam) Menon	The Connecticut Office of the State Comptroller, led by General Counsel Yamuna (Yam) Menon
Andrea	Barton Reeves	Appointed as Commissioner of DSS in early 2023, she oversees the department's	Andrea Barton Reeves: Appointed as Commissioner of DSS in early 2023, she oversees the department's
Dr. Mehul	Dalal	has been serving as the Chief	Dr. Mehul Dalal has been serving as the Chief Policy



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		Policy Advisor for the Connecticut Department of Social Services	Advisor for the Connecticut Department of Social Services
Joel	Norwood	Deputy Chief Policy Advisor	Deputy Chief Policy Advisor
Chiquita	Brooks-LaSure	Administrator of CMS	Administrator of CMS
Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS)	Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS)	Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS)	Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS)
Dr. Mehul Dalal Title: Chief Policy Advisor, DSS	Dr. Mehul Dalal Title: Chief Policy Advisor, DSS	Dr. Mehul Dalal Title: Chief Policy Advisor, DSS	Dr. Mehul Dalal Title: Chief Policy Advisor, DSS
Joel Norwood Title: Deputy Chief Policy Advisor, DSS	Joel Norwood Title: Deputy Chief Policy Advisor, DSS	Joel Norwood Title: Deputy Chief Policy Advisor, DSS	Joel Norwood Title: Deputy Chief Policy Advisor, DSS
Yamuna (Yam) Menon Title: General Counsel/Assistant State Comptroller, Connecticut Office of the State Comptroller	Yamuna (Yam) Menon Title: General Counsel/Assistant State Comptroller, Connecticut Office of the State Comptroller	Yamuna (Yam) Menon Title: General Counsel/Assistant State Comptroller, Connecticut Office of the State Comptroller	Yamuna (Yam) Menon Title: General Counsel/Assistant State Comptroller, Connecticut Office of the State Comptroller
Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS)



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REQUESTED OSC ACTION

What action would you like OSC to take?

Summary of Actions Needed (Ranked by Priority)

1. Federal Investigation (Highest Priority)

Purpose: Address systemic violations of constitutional law, ADA compliance, FOIA transparency, Medicaid regulations, and taxpayer accountability.

Key Objectives:

Investigate DSS for First, Fifth, and Fourteenth Amendment violations.

Enforce compliance with 42 U.S.C. § 12132 (ADA), 5 U.S.C. § 552 (FOIA), 42 CFR § 430.35, and federal taxpayer protection laws.

Hold individuals and entities accountable for mismanagement and legal violations.

2. Audit of Contracts and Expenditures

Purpose: Ensure fiscal accountability and detect potential misuse of taxpayer funds.

Key Objectives:

Audit all contracts with Accenture and Manatt, Phelps & Phillips, LLP.

Identify conflicts of interest, improper influence, and unfulfilled deliverables.

Safeguard federal and state Medicaid funds.

3. Implementation of Corrective Measures

Purpose: Eliminate procedural barriers and ensure equity and accessibility in Medicaid administration.

Key Objectives:

Enforce FOIA compliance, including timely responses and accessible records.

Mandate ADA-compliant communication practices (e.g., screen-reader-compatible documents, simplified summaries).

Align DSS policies with federal equity standards under 42 CFR § 440.180.

4. Strengthening Whistleblower Protections

Purpose: Empower employees and stakeholders to expose misconduct without fear of retaliation.

Key Objectives:

Establish anonymous reporting mechanisms for systemic failures. Monitor and enforce whistleblower protections under the Whistleblower Protection Act (5 U.S.C. § 2302).

Penalize retaliatory actions to maintain transparency and accountability.

5. Mandate Transparency Reforms

Purpose: Restore public trust and ensure transparency in DSS operations and contractor engagements.



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Key Objectives:

Require DSS to publish contracts, expenditures, and Medicaid decisions.

Enforce public access to records through strict FOIA and ADA compliance.

Increase oversight of contractor influence and deliverables.

6. Expanded Oversight of Medicaid Administration

Purpose: Prevent further systemic failures and protect vulnerable populations reliant on Medicaid.

Key Objectives:

Ensure ABI Waiver amendments meet equity and accessibility standards.

Limit undue influence of contractors in policy decisions.

Mandate stakeholder consultation in Medicaid policymaking.

Conclusion

These actions are ranked by their importance to address systemic failures, protect constitutional and ADA rights, ensure equitable Medicaid services, and restore transparency and accountability in DSS operations. Immediate intervention is critical to safeguard public trust, taxpayer funds, and the well-being of Medicaid recipients.

WHERE ELSE DID YOU REPORT THIS MATTER?

I have also disclosed this information to:

Other Action Type	Action Taken Date

Additional information about reports to Inspectors General, if applicable.

First Name:

Last Name:

Title:

Address:

Email Address:

Telephone Number:

Case ID #:

a. **What is the status of the matter?**

NOTE: MATTERS INVESTIGATED BY AN OFFICE OF INSPECTOR GENERAL



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It is the general policy of OSC not to transmit allegations of wrongdoing to the head of the agency involved if the agency's Office of Inspector General has fully investigated, or is currently investigating, the same allegations.

ATTACHMENTS

Please note that the space available for attachments is limited. Therefore, DO NOT attach every document and email that may be relevant to your claim. You will have an opportunity to make additional submissions at a later date. We recommend limiting attachments to official forms and correspondence that document the action(s) at issue in your disclosure if these documents are relevant to your allegations.

I have attached the following documents to my filing:

File Name
Records Regarding Connecticut Medicaid Programs, ABI Waiver, Amendments, and Federal Agency Oversight and Communications with Accenture and Manatt (2012–Present) (Office of the State Comptroller) (1).zip
requests (4).csv
requests (5).csv
requests (6).csv
11.27.2024 What Actions Did They Take.pdf
09.24.2024 Federal_Intervention_HHS_OIG_CMS_GAO_DOJ_OCR_Whistleblower_Report_2024.pdf
Comprehensive Grievance Report and Request for Clarity Whistleblower Report Medicaid ABI Waiver Programs.pdf

CONSENT

Do you consent to the disclosure of your identity to others outside OSC if it becomes necessary in taking further action on this matter?*

I consent to disclosure of my identity.

Yes



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I do not consent to disclosure of my identity. (Even if you do not consent, OSC may disclose your identity if necessary due to an imminent danger to public health or safety or imminent violation of any criminal law. See 5 U.S.C. § 1213(h).)

No

CERTIFICATION

I certify that all of the statements made in this complaint are true, complete, and correct to the best of my knowledge and belief. I understand that a false statement or concealment of a material fact is a criminal offense punishable by a fine, imprisonment, or both. 18 U.S.C. § 1001.*

Yes

BURDEN: The burden for this collection of information (including the time for reviewing instructions, searching existing data sources, gathering the data needed, and completing and reviewing the form) is estimated to be an average of one hour to submit a disclosure of information alleging agency wrongdoing, one hour and fifteen minutes to submit a complaint alleging a prohibited personnel practice or other prohibited activity, or 30 minutes to submit a complaint alleging prohibited political activity. Please send any comments about this burden estimate, and suggestions for reducing the burden, to the U.S. Office of Special Counsel, General Counsel's Office, 1730 M Street, NW, Suite 218, Washington, DC 20036-4505.

This Disclosure of Information was Received by OSC on: 11/27/2024

PLEASE KEEP A COPY OF YOUR COMPLAINT, ANY SUPPORTING DOCUMENTATION, AND ANY ADDITIONAL ALLEGATIONS THAT YOU SEND TO OSC NOW OR AT ANY TIME WHILE YOUR COMPLAINT IS PENDING. REPRODUCTION CHARGES UNDER THE FREEDOM OF INFORMATION ACT MAY APPLY TO ANY REQUEST YOU MAKE FOR COPIES OF MATERIALS THAT YOU PROVIDED TO OSC.



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IMPORTANT INFORMATION ABOUT FILING A DISCLOSURE

OSC WHISTLEBLOWER DISCLOSURE CHANNEL

Under 5 U.S.C. § 1213 and related provisions, the Office of Special Counsel (OSC) serves as a secure channel for federal employees, former federal employees, and applicants for federal employment with reliable knowledge of the wrongdoing to disclose:

- a violation of law, rule or regulation;
- gross mismanagement;
- gross waste of funds;
- an abuse of authority;
- a substantial and specific danger to public health or safety; and/or
- censorship related to scientific research.

OSC JURISDICTION

OSC has no jurisdiction over disclosures filed by:

- employees of the U.S. Postal Service and the Postal Regulatory Commission;
- members of the armed forces of the United States (*i.e.*, non-civilian military employees);
- state employees operating under federal grants;
- employees of federal contractors;
- other employees or federal agencies that are exempt under federal law; and
- Congressional or judicial branch employees.

ANONYMOUS SOURCES

While OSC will protect the identity of persons who make disclosures, it will not consider anonymous disclosures. If a disclosure is filed by an anonymous source, the disclosure will be referred to the Office of Inspector General in the appropriate agency. OSC will take no further action.

RETALIATION

Do you believe you suffered retaliation by your agency for disclosing wrongdoing? If yes, you may file a complaint of retaliation by navigating back to "My Cases" and selecting "New Complaint." Select Option 1 to complete and submit a Complaint of Prohibited Personnel Practice or other Prohibited Activity (PPPs). *If you have already completed the Complaint of Prohibited Personnel Practice or other Prohibited Activity above, please continue with this Disclosure.* PPPs are employment-related activities that are banned in the federal workforce.



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PPPs generally involve some type of personnel decision or action and may result in personal relief for people who have been subject to a PPP. For example, if we find that you were removed from federal service in retaliation for whistleblowing, OSC may act to get your job back. PPPs can also include allegations of harassment, failure to issue appraisals, and improper hiring. Do not file a disclosure to report retaliation or other PPPs.

CONTACT INFORMATION

Title:

First Name:* David

Middle Initial:

Last Name:* Medeiros

International Address?: No

Address:*

215 Mountain St
Willimantic, CT 06226

Cell Phone Number:

Home Phone Number:

Office Phone Number:

Ext.

Email Address:* aabiwr@live.com

Preferred means of contact:

Email: Yes

Cell phone: No

Home phone: No

Office phone: No

REPRESENTATIVE INFORMATION

Do you have representation? No

Information about representative, if applicable.

First Name:*

Middle Initial:

Last Name:*

International Address?:

Address: *



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Office Phone Number:

Ext.

Cell Phone Number:

Home Phone Number:

Email Address:

EMPLOYMENT INFORMATION

Name of Department/Agency about which you are making a disclosure.

Department:* Health and Human Services

Agency:* Centers For Medicare & Medicaid Services

Agency subcomponent: Office of the Inspector General (OIG)

Street Address: 200 Independence Avenue, SW

City: Washington

State: DC

Zip Code: 20201

Employment Status:* Non-Federal Employee (please specify)

Title	Series	Grade

Please provide your dates of employment in this position.

Employment Service Type	Employment Service Subtype	If Other (specify)
Excepted Service	Other	Private Citizen, Advocate, and Whistleblower
Other	Other	Private Citizen, Advocate, and Whistleblower

Are you covered by a collective bargaining agreement?

DETAILS OF YOUR DISCLOSURES



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Please identify the type of wrongdoing that you are alleging. You can make multiple disclosures, but you **MUST** choose one option. If you check "violation of law, rule, or regulation," specify, if you can, the particular law, rule or regulation violated (by name, subject, and/or legal citation). For each allegation, please answer the following questions (be as specific as possible). Please keep in mind that you will have an opportunity to provide more information and someone from OSC will contact you.

If OSC determines there is a substantial likelihood of wrongdoing, OSC will refer your disclosures to the involved agency for an investigation and report. To meet the substantial likelihood standard, there must be a significant probability that the information reveals wrongdoing that falls within one or more of the categories above. In its evaluation, OSC considers the strength, reliability, and credibility of the disclosures. If the substantial likelihood determination cannot be made, OSC will determine whether there is sufficient information to exercise its discretion to refer the allegations.

DISCLOSURES

Allegation	Gross Waste of Funds
What action did they take?	
When did this occur?	
How did you discover this action?	
What additional facts support your allegation?	
Allegation	Violation of Law, Rule or Regulation
What action did they take?	The Connecticut Office of the State Comptroller, led by General Counsel Yamuna (Yam) Menon, failed to comply with state and federal Freedom of Information Act (FOIA) requirements by: Failing to conduct adequate records searches. Failing to redirect or identify responsible agencies holding requested records. Failing to provide legally required Vaughn Indexes or explanations for withheld information. Additionally, the Connecticut Department of Social Services (DSS), in collaboration with contractors such as Accenture and Manatt, contributed to potential violations by failing to ensure public



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	transparency and compliance with Medicaid oversight regulations under 42 CFR § 430.35.
When did this occur?	Timeframe: The violations began on or around October 29, 2024, when I submitted a Freedom of Information Act (FOIA) request to the Connecticut Office of the State Comptroller and other agencies. These violations are ongoing as the agencies have failed to provide adequate responses, conduct sufficient records searches, or adhere to federal and state transparency laws.
How did you discover this action?	I discovered these actions through my direct engagement with the Freedom of Information Act (FOIA) process and my involvement as an advocate for Medicaid recipients, particularly individuals relying on the Acquired Brain Injury (ABI) Waiver. The following key events revealed the systemic issues: 1. FOIA Requests and Responses On October 29, 2024, I submitted a FOIA request to the Connecticut Office of the State Comptroller, Connecticut Department of Social Services (DSS), and other agencies for records related to Medicaid programs, ABI Waiver amendments, and contractor activities involving Accenture and Manatt. Agencies failed to conduct adequate searches, provide redirections, or adhere to legal timelines, as evidenced by their incomplete responses and appeals communications between October 30 and November 12, 2024. 2. ADA Accommodation Requests I submitted ADA accommodation requests alongside my FOIA filings, as required by my traumatic brain injury (TBI)-related needs. The agencies failed to implement these accommodations, creating procedural barriers and violating federal law. This became evident during their responses to my FOIA requests and appeals in October and November 2024. 3. Medicaid Program Advocacy Through my advocacy work as the founder of ABI Resources, I identified long-standing concerns with Medicaid program transparency and contractor influence. Patterns of mismanagement emerged during reviews of Medicaid amendment processes and stakeholder communications dating back to 2012. The lack of publicly available documentation



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	regarding ABI Waiver amendments and related policies further highlighted systemic failures. 4. Contractor Influence Concerns regarding contractor influence (Accenture and Manatt) were raised by stakeholders and whistleblowers in my network. Their activities, including policy advising without adequate oversight, were identified as contributing to a lack of transparency and potential fiscal waste.
What additional facts support your allegation?	The following facts and documentation substantiate my allegations regarding violations of law, gross mismanagement, abuse of authority, and systemic accountability failures: 1. FOIA Non-Compliance Failure to Conduct Adequate Searches: The Connecticut Office of the State Comptroller failed to certify search methodologies or consult appropriate personnel, violating 5 U.S.C. § 552(a)(3) and Conn. Gen. Stat. § 1-211. No redirections to responsible agencies were made, despite clear indications that records related to Medicaid amendments and contractors (Accenture and Manatt) exist elsewhere. The absence of a Vaughn Index or justification for withheld records violates transparency standards upheld in <i>NARA v. Favish</i> (2004). Documentation: FOIA requests and appeals filed between October 29, 2024, and November 12, 2024, show consistent procedural failures. Agency responses, including a lack of clarity from the Office of the State Comptroller, confirm incomplete searches and non-compliance with FOIA laws. 2. ADA Violations Failure to Provide Accommodations: Requests for email-only communication, embedded text in email bodies, and screen-reader-compatible PDFs were ignored. This violates 42 U.S.C. § 12132 and Section 504 of the Rehabilitation Act, which mandate equal access for individuals with disabilities. The procedural barriers created by these failures disproportionately impacted my ability to process records effectively, constituting discrimination under <i>Tennessee v. Lane</i> (2004). Documentation: ADA accommodation requests submitted alongside FOIA filings show non-compliance



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	with reasonable accommodation standards. Agency correspondence from November 2024 fails to address accommodation needs explicitly, despite repeated reminders. 3. Gross Mismanagement of Medicaid Programs Lack of Oversight in ABI Waiver Amendments: Connecticut Department of Social Services (DSS) engaged contractors (Accenture and Manatt) to advise on Medicaid amendments and managed care models without adequate public transparency or oversight. Failure to comply with federal Medicaid regulations (42 CFR § 430.35) raises concerns about state accountability for program administration. Documentation: No records have been provided to substantiate claims of federal or state review of ABI Waiver amendments or contractor activities. Whistleblower insights suggest contractors influenced policy decisions without addressing stakeholder concerns about accessibility and equity. 4. Abuse of Authority Suppression of Whistleblowers: Whistleblowers reporting systemic Medicaid mismanagement and potential conflicts of interest involving contractors have faced barriers to disclosure, violating the Whistleblower Protection Act (5 U.S.C. § 2302). Agency responses demonstrate a lack of clear mechanisms for reporting or addressing whistleblower concerns. Documentation: Reports from stakeholders highlight systemic suppression of dissent and insufficient safeguards for whistleblower anonymity. Corresp
Allegation	Gross Mismanagement
What action did they take?	The following individuals and contractors, under the leadership of the Connecticut Department of Social Services (DSS), engaged in actions and inactions that violated constitutional law rights, the Americans with Disabilities Act (ADA), Medicaid regulations, taxpayer accountability standards, and whistleblower protections. Their combined failures perpetuated systemic inequities, regulatory non-compliance, and a lack of transparency and accountability in Medicaid program administration, particularly the Acquired Brain Injury (ABI) Waiver. Key Individuals and Their Actions 1. Andrea Barton Reeves



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	Role: Commissioner of the Connecticut Department of Social Services (DSS) (Appointed 2023) Actions and Violations: Failure to Uphold Constitutional Rights: Obstructed transparency guaranteed under the First Amendment, infringing on the public's right to access government information and participate in policymaking. Ignored due process and equal protection obligations under the Fifth and Fourteenth Amendments by failing to implement ADA accommodations and equitable Medicaid policies. Violation of Federal Medicaid Standards: Allowed DSS to proceed with Medicaid amendments, including ABI Waiver updates, without ensuring compliance with 42 U.S.C. § 1396 et seq. and 42 CFR § 430.35, which mandate equity, accessibility, and accountability in Medicaid-funded programs. Failed to address systemic inequities that disproportionately impact individuals with brain injuries and disabilities. Transparency Failures: Ignored state and federal Freedom of Information Act (FOIA) requests, obstructing access to public records related to Medicaid funding, contractor agreements, and policy development. Repeatedly denied ADA accommodation requests, violating 42 U.S.C. § 12132, and creating procedural barriers for individuals with disabilities seeking access to public information. Fiscal Mismanagement: Oversaw contracts with Accenture and Manatt, Phelps & Phillips, LLP, resulting in potential misuse of taxpayer dollars without measurable deliverables or fiscal transparency. 2. Dr. Mehul Dalal Role: Chief Policy Advisor, DSS (Appointed July 2023) Actions and Violations: Policy Decisions Without Public Accountability: Directed Medicaid policies, including ABI Waiver amendments, without adequately consulting Medicaid recipients, providers, or advocacy groups. Ignored federal accessibility requirements under the ADA (42 U.S.C. § 12132) and related Medicaid statutes. Failure to Monitor Contractor Activities: Neglected to establish oversight mechanisms for contractors influencing key Medicaid decisions, allowing Accenture and Manatt to operate



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	without transparency or accountability. Constitutional and Regulatory Breaches: Violated the Fourteenth Amendment's Equal Protection Clause and Medicaid accessibility regulations under 42 CFR § 440.180 by failing to protect Medicaid recipients' rights to equitable services. 3. Joel Norwood Role: Deputy Chief Policy Advisor, DSS (Appointe
When did this occur?	The systemic mismanagement and failures in the administration of the Medicaid program, particularly the Acquired Brain Injury (ABI) Waiver, have occurred over an extended period. Key timeframes illustrate how these issues evolved and were perpetuated under the leadership of Andrea Barton Reeves, Dr. Mehul Dalal, and Joel Norwood, and through contractor influence from Accenture and Manatt, Phelps & Phillips, LLP. These actions and inactions span from 2012 to the present, with specific incidents detailed below: Key Timeframes and Incidents 1. Initial Contractor Engagement and Longstanding Issues (2012–2022) 2012: DSS engaged Accenture and Manatt, Phelps & Phillips, LLP as contractors to advise on Medicaid program development and amendments. During this period, systemic issues in transparency and accountability began to emerge as contractors influenced Medicaid policy without adequate oversight mechanisms. Federal and state accessibility requirements were often overlooked in policy deci
How did you discover this action?	How Did You Discover This Action? The actions and systemic failures in the administration of Medicaid programs, particularly the Acquired Brain Injury (ABI) Waiver, were uncovered through a comprehensive approach combining advocacy efforts, FOIA engagement, stakeholder testimonies, procedural analysis, and legal research. Each method revealed patterns of mismanagement, non-compliance with federal and state laws, and significant gaps in transparency and accountability. 1. Direct Advocacy Efforts As the founder of ABI Resources, I have worked extensively with Medicaid recipients, healthcare providers, and advocacy organizations. My work uncovered: Systemic Barriers to



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	Services: Medicaid recipients reported consistent difficulties accessing equitable care, particularly under the ABI Waiver. These included: Delayed access to providers and services. Inadequate outreach and support for individuals with brain injuries. Confusion about eligibility changes and amendments to Medicaid programs. Stakeholder Concerns: Providers raised alarms about delays in reimbursements and unclear guidance from DSS, pointing to inefficiencies in Medicaid administration. Advocacy groups expressed frustration over the lack of meaningful consultation during key policy changes, indicating that Medicaid recipients and stakeholders were often excluded from the decision-making process. 2. FOIA Requests and Engagement Initial FOIA Requests (October 29, 2024): I filed FOIA requests with DSS, the Connecticut Office of the State Comptroller, and related agencies to obtain records detailing: Medicaid program management. ABI Waiver amendments and updates. Contractor involvement with Accenture and Manatt. Responses revealed: Incomplete or obstructed records searches. Lack of compliance with FOIA transparency standards under 5 U.S.C. § 552 and Conn. Gen. Stat. § 1-211. No justification for withheld documents, violating transparency precedents such as <i>NARA v. Favish</i> (2004). FOIA Appeals (October 30–November 12, 2024): Appeals to FOIA denials further highlighted systemic barriers, including: Procedural delays and inadequate records searches. Refusal to implement ADA accommodations, such as email-only communication and simplified summaries for complex records, violating 42 U.S.C. § 12132 (ADA). 3. Stakeholder Reports and Testimonies Medicaid Recipients: Individuals relying on ABI Waiver services reported barriers such as: Inequitable access to healthcare providers. Delays in receiving services critical to their health and quality of life. Difficulty navigating program changes due to lack of clear communication from DSS. Healthcare Providers and Advocacy Groups: Providers cited inefficiencies in DSS policies that created financial strain and administrative delays. Advocacy



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	groups expressed concerns about DSS's reliance on contractors like Accenture and Manatt, highlighting the lack of public consultation or oversight in Medicaid policy decisions. 4. Procedural and Regulatory Analysis
What additional facts support your allegation?	What Additional Facts Support Your Allegation of a Violation of Law, Rule, or Regulation? The Connecticut Department of Social Services (DSS), under Andrea Barton Reeves' leadership, along with Dr. Mehul Dalal, Joel Norwood, and contractors Accenture and Manatt, Phelps & Phillips, LLP, engaged in actions and inactions that violated multiple federal and state laws, regulations, and constitutional protections. The following detailed facts substantiate the allegations of these violations: 1. Violations of the Freedom of Information Act (FOIA) Failure to Conduct Adequate Records Searches DSS failed to conduct reasonable and thorough searches for FOIA-requested records concerning Medicaid program amendments, ABI Waiver updates, and contractor agreements, violating 5 U.S.C. § 552(a)(3) and Conn. Gen. Stat. § 1-211. No certification of search methodology or systems consulted was provided, leaving the scope and integrity of the search unclear. Failure to Provide Justifications for Withholding Records DSS did not provide legally required Vaughn Indexes or other detailed explanations for records that were withheld or redacted, violating transparency standards established in <i>NARA v. Favish</i> (2004). The refusal to disclose contracts and communications with Accenture and Manatt raises concerns about deliberate obstruction. Evidence of FOIA Non-Compliance FOIA requests submitted on October 29, 2024, and appeals filed between October 30 and November 12, 2024, demonstrate: Incomplete searches and refusals to produce responsive documents. Persistent delays and procedural barriers. 2. Violations of the Americans with Disabilities Act (ADA) Denial of ADA Accommodations DSS failed to provide legally mandated accommodations requested alongside FOIA filings, including: Email-only communication for accessibility. Screen-reader-compatible PDF formats. Simplified



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	summaries for complex documents. These failures violated 42 U.S.C. § 12132 and Section 504 of the Rehabilitation Act, which mandate equal access for individuals with disabilities. Procedural Barriers The lack of accommodations created additional barriers for individuals with disabilities, depriving them of their constitutional right to equal protection under the Fourteenth Amendment. 3. Non-Compliance with Federal Medicaid Regulations Failure to Meet Federal Accessibility and Equity Standards DSS neglected to ensure that amendments to the ABI Waiver complied with 42 CFR § 430.35, which mandates equity, accessibility, and proper federal oversight in Medicaid-funded programs. Medicaid recipients, particularly those with brain injuries, reported delays and inequities in accessing services, demonstrating DSS's failure to implement accessible and equitable care under 42 U.S.C. § 12132. Inadequate Oversight of Contractor Activities Contractors Accenture and Manatt played significant roles in advising on Medicaid amendments and managed care models, but DSS failed to establish: Transparency mechanisms for their recommen
Allegation	Abuse of Authority
What action did they take?	2. What Action Did They Take? The individuals responsible for the Connecticut Department of Social Services (DSS) and related entities engaged in actions and inactions that violated constitutional rights, ADA requirements, state and federal Medicaid laws, taxpayer accountability standards, FOIA transparency obligations, and whistleblower protections. These actions collectively contributed to systemic failures, mismanagement, and inequities in Medicaid program administration, particularly the Acquired Brain Injury (ABI) Waiver. Key Individuals and Their Actions 1. Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS) Actions and Violations: Constitutional Violations: Denied access to public records, violating the First Amendment guarantee of transparency and public participation in government accountability. Failed to



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	uphold due process and equal protection rights under the Fifth and Fourteenth Amendments by neglecting to implement ADA accommodations and equitable Medicaid policies. Non-Compliance with Medicaid Standards: Allowed DSS to implement Medicaid amendments, including ABI Waiver updates, without ensuring compliance with 42 U.S.C. § 1396 et seq. and 42 CFR § 430.35, which mandate equity, accessibility, and federal oversight. Ignored systemic barriers that disproportionately affect Medicaid recipients with disabilities, violating federal accessibility requirements under 42 U.S.C. § 12132. FOIA and Transparency Failures: Repeatedly obstructed public access to Medicaid program records by failing to respond adequately to FOIA requests, violating 5 U.S.C. § 552 and Conn. Gen. Stat. § 1-211. Ignored FOIA appeals and refused to provide Vaughn Indexes or certifications of record searches, demonstrating a deliberate obstruction of transparency laws. Mismanagement of Medicaid Funds: Authorized contracts with Accenture and Manatt, Phelps & Phillips, LLP, without adequate oversight or accountability mechanisms, raising concerns about potential misuse of taxpayer dollars. 2. Dr. Mehul Dalal Title: Chief Policy Advisor, DSS Actions and Violations: Policy Development Without Oversight: Played a leading role in shaping Medicaid policies, including amendments to the ABI Waiver, without ensuring alignment with federal regulations or addressing stakeholder concerns about inequities. ADA and Medicaid Violations: Failed to implement policies that met federal accessibility standards under 42 U.S.C. § 12132 and 42 CFR § 440.180, leaving individuals with disabilities underserved. Transparency Failures: Did not address procedural barriers in FOIA responses, obstructing public accountability and violating transparency laws. 3. Joel Norwood Title: Deputy Chief Policy Advisor, DSS Actions and Violations: Neglect of Oversight Responsibilities: Shared responsibility for inadequate monitoring of ABI Waiver amendments, resulting in gaps in equity and



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	accessibility for Medicaid recipients. Procedural and Accountability Failu
When did this occur?	When Did This Occur? The systemic violations and abuses of authority in the administration of Medicaid programs, particularly the Acquired Brain Injury (ABI) Waiver, span over a decade, beginning in 2012 with contractor engagements and escalating in 2023 under the leadership of Andrea Barton Reeves. These failures continued through November 2024, with key incidents highlighting worsening transparency violations, non-compliance with federal laws, and inequities in Medicaid services. Below is a comprehensive timeline with specific legal references and examples of harm: _____ 1. Initial Contractor Engagements and Policy Decisions (2012–2022) • 2012: • DSS engaged Accenture and Manatt, Phelps & Phillips, LLP to provide consulting services for Medicaid program development, including amendments to the ABI Waiver and managed care models. • Contractor influence occurred without adequate oversight or accountability mechanisms, violating transparency standards
How did you discover this action?	The systemic abuses of authority, transparency failures, and regulatory violations within the Connecticut Department of Social Services (DSS) were uncovered through a multi-pronged approach, including direct advocacy efforts, FOIA requests and appeals, stakeholder testimonies, procedural analysis, and legal research. Each method revealed evidence of persistent mismanagement, non-compliance with state and federal laws, and systemic inequities affecting Medicaid recipients.
What additional facts support your allegation?	The systemic abuses of authority, transparency failures, and regulatory violations within the Connecticut Department of Social Services (DSS) were uncovered through a multi-pronged approach, including direct advocacy efforts, FOIA requests and appeals, stakeholder testimonies, procedural analysis, and legal research. Each method revealed evidence of persistent mismanagement, non-compliance with state and federal laws, and systemic



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	inequities affecting Medicaid recipients. 1. Direct Advocacy Efforts As the founder of ABI Resources, I have worked directly with Medicaid recipients, healthcare providers, and advocacy groups. These experiences revealed systemic barriers, inequities, and procedural failures within DSS: Barriers for ABI Waiver Recipients: Recipients consistently reported: Delays in Service Delivery: Long wait times for approvals and services under the ABI Waiver. Provider Network Issues: Limited provider access and a lack of clarity on eligibility criteria. Communication Failures: Inadequate outreach and guidance on Medicaid program changes. These barriers disproportionately impacted individuals with disabilities, violating federal Medicaid accessibility requirements under 42 CFR § 440.180 and ADA protections under 42 U.S.C. § 12132.

DISCLOSURE SUBJECTS

Name of individual you believe is responsible for the wrongdoing disclosed.

First Name	Last Name	Title	Chain of Command
Yamuna	Menon	The Connecticut Office of the State Comptroller, led by General Counsel Yamuna (Yam) Menon	The Connecticut Office of the State Comptroller, led by General Counsel Yamuna (Yam) Menon
Andrea	Barton Reeves	Appointed as Commissioner of DSS in early 2023, she oversees the department's	Andrea Barton Reeves: Appointed as Commissioner of DSS in early 2023, she oversees the department's
Dr. Mehul	Dalal	has been serving as the Chief	Dr. Mehul Dalal has been serving as the Chief Policy



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		Policy Advisor for the Connecticut Department of Social Services	Advisor for the Connecticut Department of Social Services
Joel	Norwood	Deputy Chief Policy Advisor	Deputy Chief Policy Advisor
Chiquita	Brooks-LaSure	Administrator of CMS	Administrator of CMS
Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS)	Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS)	Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS)	Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS)
Dr. Mehul Dalal Title: Chief Policy Advisor, DSS	Dr. Mehul Dalal Title: Chief Policy Advisor, DSS	Dr. Mehul Dalal Title: Chief Policy Advisor, DSS	Dr. Mehul Dalal Title: Chief Policy Advisor, DSS
Joel Norwood Title: Deputy Chief Policy Advisor, DSS	Joel Norwood Title: Deputy Chief Policy Advisor, DSS	Joel Norwood Title: Deputy Chief Policy Advisor, DSS	Joel Norwood Title: Deputy Chief Policy Advisor, DSS
Yamuna (Yam) Menon Title: General Counsel/Assistant State Comptroller, Connecticut Office of the State Comptroller	Yamuna (Yam) Menon Title: General Counsel/Assistant State Comptroller, Connecticut Office of the State Comptroller	Yamuna (Yam) Menon Title: General Counsel/Assistant State Comptroller, Connecticut Office of the State Comptroller	Yamuna (Yam) Menon Title: General Counsel/Assistant State Comptroller, Connecticut Office of the State Comptroller
Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS)



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REQUESTED OSC ACTION

What action would you like OSC to take?

Summary of Actions Needed (Ranked by Priority)

1. Federal Investigation (Highest Priority)

Purpose: Address systemic violations of constitutional law, ADA compliance, FOIA transparency, Medicaid regulations, and taxpayer accountability.

Key Objectives:

Investigate DSS for First, Fifth, and Fourteenth Amendment violations.

Enforce compliance with 42 U.S.C. § 12132 (ADA), 5 U.S.C. § 552 (FOIA), 42 CFR § 430.35, and federal taxpayer protection laws.

Hold individuals and entities accountable for mismanagement and legal violations.

2. Audit of Contracts and Expenditures

Purpose: Ensure fiscal accountability and detect potential misuse of taxpayer funds.

Key Objectives:

Audit all contracts with Accenture and Manatt, Phelps & Phillips, LLP.

Identify conflicts of interest, improper influence, and unfulfilled deliverables.

Safeguard federal and state Medicaid funds.

3. Implementation of Corrective Measures

Purpose: Eliminate procedural barriers and ensure equity and accessibility in Medicaid administration.

Key Objectives:

Enforce FOIA compliance, including timely responses and accessible records.

Mandate ADA-compliant communication practices (e.g., screen-reader-compatible documents, simplified summaries).

Align DSS policies with federal equity standards under 42 CFR § 440.180.

4. Strengthening Whistleblower Protections

Purpose: Empower employees and stakeholders to expose misconduct without fear of retaliation.

Key Objectives:

Establish anonymous reporting mechanisms for systemic failures. Monitor and enforce whistleblower protections under the Whistleblower Protection Act (5 U.S.C. § 2302).

Penalize retaliatory actions to maintain transparency and accountability.

5. Mandate Transparency Reforms

Purpose: Restore public trust and ensure transparency in DSS operations and contractor engagements.



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Key Objectives:

Require DSS to publish contracts, expenditures, and Medicaid decisions.

Enforce public access to records through strict FOIA and ADA compliance.

Increase oversight of contractor influence and deliverables.

6. Expanded Oversight of Medicaid Administration

Purpose: Prevent further systemic failures and protect vulnerable populations reliant on Medicaid.

Key Objectives:

Ensure ABI Waiver amendments meet equity and accessibility standards.

Limit undue influence of contractors in policy decisions.

Mandate stakeholder consultation in Medicaid policymaking.

Conclusion

These actions are ranked by their importance to address systemic failures, protect constitutional and ADA rights, ensure equitable Medicaid services, and restore transparency and accountability in DSS operations. Immediate intervention is critical to safeguard public trust, taxpayer funds, and the well-being of Medicaid recipients.

WHERE ELSE DID YOU REPORT THIS MATTER?

I have also disclosed this information to:

Other Action Type	Action Taken Date

Additional information about reports to Inspectors General, if applicable.

First Name:

Last Name:

Title:

Address:

Email Address:

Telephone Number:

Case ID #:

a. **What is the status of the matter?**

NOTE: MATTERS INVESTIGATED BY AN OFFICE OF INSPECTOR GENERAL



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It is the general policy of OSC not to transmit allegations of wrongdoing to the head of the agency involved if the agency's Office of Inspector General has fully investigated, or is currently investigating, the same allegations.

ATTACHMENTS

Please note that the space available for attachments is limited. Therefore, DO NOT attach every document and email that may be relevant to your claim. You will have an opportunity to make additional submissions at a later date. We recommend limiting attachments to official forms and correspondence that document the action(s) at issue in your disclosure if these documents are relevant to your allegations.

I have attached the following documents to my filing:

File Name
Records Regarding Connecticut Medicaid Programs, ABI Waiver, Amendments, and Federal Agency Oversight and Communications with Accenture and Manatt (2012–Present) (Office of the State Comptroller) (1).zip
requests (4).csv
requests (5).csv
requests (6).csv
11.27.2024 What Actions Did They Take.pdf
09.24.2024 Federal_Intervention_HHS_OIG_CMS_GAO_DOJ_OCR_Whistleblower_Report_2024.pdf
Comprehensive Grievance Report and Request for Clarity Whistleblower Report Medicaid ABI Waiver Programs.pdf

CONSENT

Do you consent to the disclosure of your identity to others outside OSC if it becomes necessary in taking further action on this matter?*

I consent to disclosure of my identity.

Yes



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I do not consent to disclosure of my identity. (Even if you do not consent, OSC may disclose your identity if necessary due to an imminent danger to public health or safety or imminent violation of any criminal law. See 5 U.S.C. § 1213(h).)

No

CERTIFICATION

I certify that all of the statements made in this complaint are true, complete, and correct to the best of my knowledge and belief. I understand that a false statement or concealment of a material fact is a criminal offense punishable by a fine, imprisonment, or both. 18 U.S.C. § 1001.*

Yes

BURDEN: The burden for this collection of information (including the time for reviewing instructions, searching existing data sources, gathering the data needed, and completing and reviewing the form) is estimated to be an average of one hour to submit a disclosure of information alleging agency wrongdoing, one hour and fifteen minutes to submit a complaint alleging a prohibited personnel practice or other prohibited activity, or 30 minutes to submit a complaint alleging prohibited political activity. Please send any comments about this burden estimate, and suggestions for reducing the burden, to the U.S. Office of Special Counsel, General Counsel's Office, 1730 M Street, NW, Suite 218, Washington, DC 20036-4505.

This Disclosure of Information was Received by OSC on: 11/27/2024

PLEASE KEEP A COPY OF YOUR COMPLAINT, ANY SUPPORTING DOCUMENTATION, AND ANY ADDITIONAL ALLEGATIONS THAT YOU SEND TO OSC NOW OR AT ANY TIME WHILE YOUR COMPLAINT IS PENDING. REPRODUCTION CHARGES UNDER THE FREEDOM OF INFORMATION ACT MAY APPLY TO ANY REQUEST YOU MAKE FOR COPIES OF MATERIALS THAT YOU PROVIDED TO OSC.



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IMPORTANT INFORMATION ABOUT FILING A DISCLOSURE

OSC WHISTLEBLOWER DISCLOSURE CHANNEL

Under 5 U.S.C. § 1213 and related provisions, the Office of Special Counsel (OSC) serves as a secure channel for federal employees, former federal employees, and applicants for federal employment with reliable knowledge of the wrongdoing to disclose:

- a violation of law, rule or regulation;
- gross mismanagement;
- gross waste of funds;
- an abuse of authority;
- a substantial and specific danger to public health or safety; and/or
- censorship related to scientific research.

OSC JURISDICTION

OSC has no jurisdiction over disclosures filed by:

- employees of the U.S. Postal Service and the Postal Regulatory Commission;
- members of the armed forces of the United States (*i.e.*, non-civilian military employees);
- state employees operating under federal grants;
- employees of federal contractors;
- other employees or federal agencies that are exempt under federal law; and
- Congressional or judicial branch employees.

ANONYMOUS SOURCES

While OSC will protect the identity of persons who make disclosures, it will not consider anonymous disclosures. If a disclosure is filed by an anonymous source, the disclosure will be referred to the Office of Inspector General in the appropriate agency. OSC will take no further action.

RETALIATION

Do you believe you suffered retaliation by your agency for disclosing wrongdoing? If yes, you may file a complaint of retaliation by navigating back to "My Cases" and selecting "New Complaint." Select Option 1 to complete and submit a Complaint of Prohibited Personnel Practice or other Prohibited Activity (PPPs). *If you have already completed the Complaint of Prohibited Personnel Practice or other Prohibited Activity above, please continue with this Disclosure.* PPPs are employment-related activities that are banned in the federal workforce.



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PPPs generally involve some type of personnel decision or action and may result in personal relief for people who have been subject to a PPP. For example, if we find that you were removed from federal service in retaliation for whistleblowing, OSC may act to get your job back. PPPs can also include allegations of harassment, failure to issue appraisals, and improper hiring. Do not file a disclosure to report retaliation or other PPPs.

CONTACT INFORMATION

Title:

First Name:* David

Middle Initial:

Last Name:* Medeiros

International Address?: No

Address:*

215 Mountain St
Willimantic, CT 06226

Cell Phone Number:

Home Phone Number:

Office Phone Number:

Ext.

Email Address:* aabiwr@live.com

Preferred means of contact:

Email: Yes

Cell phone: No

Home phone: No

Office phone: No

REPRESENTATIVE INFORMATION

Do you have representation? No

Information about representative, if applicable.

First Name:*

Middle Initial:

Last Name:*

International Address?:

Address: *



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Office Phone Number:

Ext.

Cell Phone Number:

Home Phone Number:

Email Address:

EMPLOYMENT INFORMATION

Name of Department/Agency about which you are making a disclosure.

Department:* Justice

Agency:* Office Of The Inspector General

Agency subcomponent: Office of the Inspector General (OIG) For DOJ: Disability Rights
Section For HHS: Office for Civil R

Street Address: 950 Pennsylvania Avenue NW

City: Washington

State: DC

Zip Code: 20201

Employment Status:* Non-Federal Employee (please specify)

Title	Series	Grade

Please provide your dates of employment in this position.

Employment Service Type	Employment Service Subtype	If Other (specify)
Excepted Service	Other	Private Citizen, Advocate, and Whistleblower
Other	Other	Private Citizen, Advocate, and Whistleblower

Are you covered by a collective bargaining agreement?



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DETAILS OF YOUR DISCLOSURES

Please identify the type of wrongdoing that you are alleging. You can make multiple disclosures, but you **MUST** choose one option. If you check "violation of law, rule, or regulation," specify, if you can, the particular law, rule or regulation violated (by name, subject, and/or legal citation). For each allegation, please answer the following questions (be as specific as possible). Please keep in mind that you will have an opportunity to provide more information and someone from OSC will contact you.

If OSC determines there is a substantial likelihood of wrongdoing, OSC will refer your disclosures to the involved agency for an investigation and report. To meet the substantial likelihood standard, there must be a significant probability that the information reveals wrongdoing that falls within one or more of the categories above. In its evaluation, OSC considers the strength, reliability, and credibility of the disclosures. If the substantial likelihood determination cannot be made, OSC will determine whether there is sufficient information to exercise its discretion to refer the allegations.

DISCLOSURES

Allegation	Violation of Law, Rule or Regulation
What action did they take?	Actions Taken by the Involved Parties 1. Connecticut Department of Social Services (DSS): - Publicly ridiculed and excluded David Medeiros during ABI Waiver forums, violating ADA and First Amendment protections. - Refused to provide ADA-mandated accommodations, including accessible communication formats and simplified processes. - Obstructed access to critical information about Medicaid programs, including ABI Waiver policies, in violation of FOIA. - Retaliated against David Medeiros for whistleblowing on systemic Medicaid mismanagement. 2. Connecticut Commission on Human Rights and Opportunities (CHRO): - Refused to assign a case number or investigate David's notarized complaint alleging ADA violations and discrimination by DSS. - Ignored follow-up inquiries regarding the status of the complaint, denying due process and perpetuating



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	discrimination. 3. Connecticut Attorney General's Office: • Failed to act on evidence submitted by David Medeiros regarding DSS misconduct and CHRO's inaction. • Neglected its statutory duty to uphold constitutional and civil rights protections in Connecticut, effectively enabling systemic violations. 4. U.S. Department of Justice (DOJ), Civil Rights Division: • Ignored David's formal complaints regarding ADA violations, whistleblower retaliation, and systemic corruption within Connecticut's Medicaid program. • Failed to investigate or enforce federal protections, allowing violations to persist unchecked. 5. U.S. Department of Health and Human Services (HHS), Office for Civil Rights (OCR): • Did not investigate systemic ADA violations in Connecticut's Medicaid program, despite clear evidence of non-compliance and harm to individuals with disabilities. 6. Connecticut Governor's Office: • Failed to intervene or provide oversight of DSS and CHRO despite being alerted to systemic violations and retaliation against David Medeiros. 7. Centers for Medicare & Medicaid Services (CMS): • Did not enforce federal Medicaid oversight to ensure that Connecticut DSS complies with federal regulations and ADA mandates. Summary of Actions: • Exclusion: Agencies excluded David from forums and processes critical to his advocacy and whistleblower activities. • Retaliation: State and federal actors retaliated against David for exposing Medicaid mismanagement, violating whistleblower protections. • Non-Compliance: Agencies failed to uphold ADA requirements and constitutional rights, creating systemic barriers and procedural delays. • Neglect: Federal oversight bodies deferred action, enabling Connecticut agencies to act with impunity. Constitutional Violations and Crimes Committed 12. First Amendment Violations • Suppression of Petition Rights: By ignoring David Medeiros' complaints and failing to investigate or act on his claims, Connecticut state agencies and federal oversight bodies have



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	suppressed his constitutional right to petition the government for redress of grievances. • Retaliation Against Free Speech: Retaliatory actions, such a
When did this occur?	Timeline of Events October 24, 2024 – Filing of CHRO Complaint David Medeiros submitted a notarized complaint to the Connecticut Commission on Human Rights and Opportunities (CHRO), detailing ADA violations, systemic discrimination, and retaliation by the Connecticut Department of Social Services (DSS). October 30, 2024 – Follow-Up with CHRO David requested a status update and assignment of a case number for his complaint. CHRO failed to respond, creating procedural barriers to justice. November 1, 2024 – Appeal to Connecticut Attorney General David escalated his complaints to the Connecticut Attorney General's Office, providing evidence of systemic violations and requesting oversight of DSS and CHRO. The Attorney General's Office did not respond or take any action. November 10, 2024 – Submission to DOJ David submitted a comprehensive complaint to the U.S. Department of Justice (DOJ), detailing ADA violations, constitutional breaches, whistleblower retaliation, and systemic mismana
How did you discover this action?	3. When did this occur? ChatGPT said: Timeline of Events October 24, 2024 – Filing of CHRO Complaint David Medeiros submitted a notarized complaint to the Connecticut Commission on Human Rights and Opportunities (CHRO), detailing ADA violations, systemic discrimination, and retaliation by the Connecticut Department of Social Services (DSS). October 30, 2024 – Follow-Up with CHRO David requested a status update and assignment of a case number for his complaint. CHRO failed to respond, creating procedural barriers to justice. November 1, 2024 – Appeal to Connecticut Attorney General David escalated his complaints to the Connecticut Attorney General's Office, providing evidence of systemic violations and requesting oversight of DSS and CHRO. The Attorney General's Office did not respond or take any action. November 10, 2024 –



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	Submission to DOJ David submitted a comprehensive complaint to the U.S. Department of Justice (DOJ), detailing ADA violations, constitutional breaches, whistleblower retaliation, and systemic mismanagement by Connecticut agencies. Despite the urgency, the DOJ failed to initiate an investigation or enforce compliance. November 28, 2024 – Current Status CHRO: Refuses to assign a case number or act on David’s complaint, obstructing due process. Connecticut Attorney General: Has ignored all communications, abdicating responsibility for overseeing state agency compliance. DOJ: Has not taken substantive action to investigate federal violations or ensure ADA compliance. HHS OCR: Remains unresponsive despite its mandate to enforce ADA compliance and Medicaid program integrity. These violations and inactions have created a continuous pattern of systemic neglect and retaliation against David Medeiros, with no resolution or accountability to date. You said: 4. How did you discover this action? ChatGPT said: How the Action Was Discovered David Medeiros, as a whistleblower and disability advocate, discovered the actions through direct personal experience and documentation, which include: Personal Experience with Discrimination and Retaliation David experienced firsthand acts of exclusion, public ridicule, and procedural barriers during interactions with Connecticut Department of Social Services (DSS) officials. For example: He was excluded from critical discussions related to the ABI Waiver Program. He was subjected to public ridicule during forums, despite being a known advocate for individuals with disabilities and a whistleblower exposing Medicaid mismanagement. Documented Failures of State Agencies David submitted a notarized complaint to the Connecticut Commission on Human Rights and Opportunities (CHRO) detailing ADA violations and retaliation. However, CHRO failed to acknowledge the complaint, assign a case number, or investigate the allegations, creating procedural obstacles. Evidence of Inaction by the Connecticut Attorney General Despite



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	escalating the matter and providing comprehensive evidence of systemic failure
What additional facts support your allegation?	Additional Facts Supporting the Allegation Documented Failures by State Agencies Connecticut Commission on Human Rights and Opportunities (CHRO): David Medeiros submitted a notarized complaint to CHRO on October 24, 2024, detailing ADA violations and systemic retaliation by DSS. CHRO failed to: Assign a case number. Investigate the allegations. Provide any substantive acknowledgment or response, violating its statutory mandate to investigate discrimination complaints. This procedural inaction obstructs justice and denies David's right to due process. Connecticut Department of Social Services (DSS) Retaliation: DSS officials publicly ridiculed David during ABI Waiver forums and excluded him from critical discussions, despite his role as a whistleblower and disability advocate. DSS has refused to provide reasonable ADA accommodations, including accessible communication formats (e.g., email-only correspondence), in direct violation of the ADA and Section 504 of the Rehabilitation Act. Inaction by the Connecticut Attorney General's Office: Despite receiving evidence of systemic ADA violations, whistleblower retaliation, and Medicaid mismanagement, the Attorney General's Office failed to investigate or respond, abdicating its responsibility to enforce state and federal laws. Federal Oversight Failures: The U.S. Department of Justice (DOJ) and the Department of Health and Human Services Office for Civil Rights (HHS OCR) were notified of systemic ADA violations, whistleblower retaliation, and constitutional breaches in November 2024. Despite this, no federal investigations or enforcement actions have been initiated, perpetuating state agency misconduct. Evidence of ADA Non-Compliance: DSS repeatedly refused David's requests for ADA-compliant communication, such as screen-reader-compatible documents and simplified processes, exacerbating the challenges he faces as a traumatic brain injury (TBI) survivor. Mismanagement of Public Funds: DSS has



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	obstructed transparency regarding Medicaid fund usage, particularly funds allocated to the ABI Waiver Program. This raises significant concerns about potential misuse or mismanagement of taxpayer dollars. Exploitation of Disability: State and federal officials are aware of David's brain injury and cognitive challenges, yet they have exploited his disability by creating procedural barriers and denying accommodations, effectively excluding him from advocacy and justice processes. Pattern of Systemic Corruption and Retaliation: Agencies at both the state and federal levels have demonstrated a clear pattern of protecting their leadership and shielding systemic inefficiencies, corruption, and discrimination, rather than addressing legitimate complaints. By refusing to act on whistleblower disclosures, these agencies have enabled misconduct, eroded public trust, and fostered an environment where accountability is absent. Violation of Transparency Laws: DSS and CHRO have failed to comply with Freedom of Information
Allegation	Gross Mismanagement
What action did they take?	The listed individuals and entities engaged in or facilitated actions that collectively constitute systemic violations of constitutional rights, ADA non-compliance, whistleblower retaliation, and mismanagement of public funds. These actions include: 1. Suppression of Whistleblower Rights and Retaliation DSS (Connecticut Department of Social Services): Publicly ridiculed and excluded David Medeiros from critical forums related to Medicaid and the ABI Waiver Program. Obstructed David's advocacy efforts by withholding ADA-mandated accommodations, such as accessible communication formats and email-only correspondence. Refused to provide requested records or updates, effectively silencing his whistleblowing efforts and suppressing public accountability. CHRO (Commission on Human Rights and Opportunities): Refused to assign a case number to David's notarized complaint, delaying and obstructing justice. Failed to investigate claims of systemic discrimination and retaliation, despite statutory



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	mandates. Connecticut Attorney General's Office: Ignored multiple submissions of evidence regarding DSS misconduct and CHRO's failure to act. Failed to intervene or provide oversight to enforce transparency, ADA compliance, and whistleblower protections. 2. Violations of ADA Protections and Disability Rights DSS: Denied reasonable accommodations to David Medeiros, a traumatic brain injury (TBI) survivor, making it impossible for him to meaningfully participate in public processes. Weaponized David's disability by exploiting his cognitive challenges to create procedural delays, obstruct communication, and undermine his advocacy. CHRO: Failed to enforce ADA and anti-discrimination statutes by not investigating documented violations or taking any corrective actions. Federal Agencies (DOJ, HHS OCR, CMS): Neglected oversight responsibilities to ensure ADA compliance and accessibility in Connecticut's Medicaid program, enabling DSS to continue discriminatory practices unchecked. 3. Mismanagement of Public Funds and Lack of Transparency DSS: Withheld public records related to Medicaid fund allocations, including the ABI Waiver Program, violating FOIA and state transparency laws. Mismanaged Medicaid resources by failing to meet federal ADA standards while continuing to receive federal funding. Federal Agencies (CMS, HHS OCR): Failed to audit or investigate the misuse of Medicaid funds in Connecticut, despite whistleblower complaints highlighting systemic issues. 4. Abuse of Authority and Gross Mismanagement Connecticut Leadership (OPM, Governor's Office): Allowed systemic failures in oversight and enforcement by not addressing persistent complaints of corruption, discrimination, and retaliation. Enabled DSS and CHRO's non-compliance with state and federal laws by failing to enact structural reforms. Federal Agencies (DOJ, OSC): Ignored whistleblower reports and failed to initiate investigations into Connecticut's systemic mismanagement of Medicaid and ADA violat



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When did this occur?	Timeline of Events October 24, 2024 – Filing of CHRO Complaint David Medeiros submitted a notarized complaint to the Connecticut Commission on Human Rights and Opportunities (CHRO), detailing ADA violations, systemic discrimination, and retaliation by the Connecticut Department of Social Services (DSS). October 30, 2024 – Follow-Up with CHRO David requested a case number and an update on the status of his complaint. CHRO failed to respond or assign a case number, effectively obstructing the complaint process. November 1, 2024 – Appeal to Connecticut Attorney General David submitted evidence and documentation to the Connecticut Attorney General's Office, requesting oversight and intervention to address systemic misconduct by DSS and CHRO. The Attorney General's Office ignored the submission and failed to act. November 10, 2024 – Escalation to DOJ David submitted a detailed whistleblower complaint to the U.S. Department of Justice (DOJ), highlighting ADA violations, FOIA non-compliance
How did you discover this action?	Discovery of Actions David Medeiros discovered these actions through firsthand experience and documented interactions with the involved parties. The following key events and observations provided evidence of the actions taken against him: Refusal to Assign a Case Number by CHRO After submitting a notarized complaint to CHRO on October 24, 2024, David received no acknowledgment or case number, despite following up multiple times. The lack of response signaled procedural obstruction and a failure to fulfill CHRO's statutory obligations. Exclusion and Ridicule by DSS During public forums related to the ABI Waiver Program, DSS officials publicly ridiculed and excluded David, creating a hostile environment for his advocacy. Witnesses corroborated these incidents, providing evidence of discriminatory practices. Ignored Submissions to the Attorney General's Office Despite submitting detailed evidence of DSS and CHRO misconduct to the Attorney General on November 1, 2024, no acknowledgment or action was taken. This



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	inaction became apparent when repeated attempts to follow up were ignored. Federal Oversight Failures Complaints to the DOJ and HHS OCR, submitted on November 10, 2024, included comprehensive documentation of ADA violations, whistleblower retaliation, and systemic mismanagement. The absence of substantive action or follow-up from these federal agencies revealed a broader pattern of neglect and inaction. FOIA and ADA Compliance Failures Requests for ADA-compliant communication and public records related to Medicaid funds and the ABI Waiver Program were either ignored or obstructed. These failures were documented through email exchanges, unanswered requests, and a lack of transparent processes. Each discovery is supported by correspondence records, witness testimony, and David's detailed documentation of the systemic barriers and retaliatory practices he encountered. These actions collectively indicate deliberate neglect and systemic discrimination.
What additional facts support your allegation?	Additional Facts Supporting the Allegations Documented Retaliation and Exclusion by DSS: DSS officials publicly ridiculed David Medeiros during ABI Waiver forums, as corroborated by witnesses and documented in communications. These actions created a hostile environment, directly impeding his ability to advocate for Medicaid beneficiaries and individuals with disabilities. DSS failed to provide reasonable accommodations under the ADA, including email-only correspondence and simplified processes, despite David's documented cognitive challenges as a brain injury survivor. CHRO's Failure to Investigate: Despite submitting a notarized complaint on October 24, 2024, and multiple follow-up communications, CHRO refused to assign a case number or initiate an investigation, violating its statutory obligation to investigate discrimination complaints. CHRO's inaction effectively denied David due process and equal protection under the law, prolonging systemic discrimination and retaliation. Attorney General's Office Inaction: Submissions to the Connecticut Attorney



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	General included detailed evidence of DSS's ADA violations and whistleblower retaliation. Despite the compelling nature of the evidence, the office failed to respond, investigate, or intervene. This neglect demonstrates a disregard for its duty to ensure state agency compliance with federal and state laws. Federal Oversight Failures (DOJ and HHS OCR): The Department of Justice and the Office for Civil Rights at HHS were notified of systemic ADA violations, misuse of Medicaid funds, and whistleblower retaliation. Despite comprehensive documentation, neither agency initiated a substantive investigation or provided updates. Federal inaction perpetuates the culture of impunity within Connecticut's state agencies. FOIA and Transparency Failures: DSS obstructed transparency by refusing to provide records related to Medicaid fund usage and ABI Waiver operations, despite FOIA and state FOIA laws mandating timely responses. Requests for ADA-compliant documents and communication were ignored, compounding David's inability to access critical information. Pattern of Systemic Neglect and Corruption: Connecticut's financial reliance on Medicaid creates an incentive to suppress transparency and accountability. The refusal to investigate whistleblower complaints, accommodate disabilities, or ensure compliance highlights a coordinated effort to shield systemic mismanagement. David Medeiros' Vulnerability as a Brain Injury Survivor: Agencies weaponized David's cognitive challenges to create procedural barriers, delay responses, and obstruct justice, further exacerbating the discrimination and retaliation he faced. The refusal to accommodate his needs constitutes a violation of the ADA and Rehabilitation Act, underscoring the systemic failure to protect vulnerable individuals. Summary of Supporting Evidence: Witness testimony from public forums and interactions with DSS officials. Documentation of corresponden
Allegation	Abuse of Authority



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What action did they take?	Actions Taken: Abuse of Authority State-Level Actions Connecticut Department of Social Services (DSS): Public Ridicule and Exclusion: DSS officials publicly ridiculed David Medeiros during ABI Waiver Program forums, excluding him from discussions critical to Medicaid policy and decision-making. Denial of ADA Accommodations: Refused to provide accessible communication methods, such as email-only correspondence and simplified procedural guidelines, despite documented cognitive challenges from a brain injury. Obstruction of Records Requests: Failed to respond to Freedom of Information Act (FOIA) requests, withheld critical Medicaid documentation, and ignored whistleblower complaints. Retaliation for Whistleblowing: Took retaliatory actions, such as exclusion from forums and non-response to inquiries, after David exposed Medicaid mismanagement and systemic corruption. Connecticut Commission on Human Rights and Opportunities (CHRO): Failure to Investigate: Refused to assign a case number to David's notarized ADA complaint, preventing any investigation into DSS's discriminatory practices. Neglect of Statutory Duties: Ignored repeated follow-up requests for updates on the complaint, effectively obstructing access to justice. Complicity in Discrimination: Enabled DSS's retaliatory actions by failing to act on clear evidence of discrimination and ADA non-compliance. Connecticut Attorney General's Office: Neglect of Oversight Responsibilities: Failed to address or intervene in systemic violations by DSS and CHRO, despite receiving substantial evidence of ADA violations, whistleblower retaliation, and constitutional rights breaches. Shielding State Agencies: Refused to investigate or hold state officials accountable for their misconduct. Federal-Level Actions Department of Justice (DOJ): Failure to Act: Ignored complaints highlighting systemic ADA violations, retaliation against a whistleblower, and constitutional breaches in state-run programs. Deferred Oversight: Allowed Connecticut agencies to operate with impunity by deferring accountability to state authorities.



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	Department of Health and Human Services (HHS): Neglect of ADA Oversight: Failed to enforce ADA compliance within federally funded Medicaid programs despite clear evidence of systemic violations. Lack of Enforcement by OCR: The Office for Civil Rights (OCR) failed to investigate systemic discrimination within Medicaid programs and the actions of DSS. Centers for Medicare & Medicaid Services (CMS): Failure to Address Mismanagement: Neglected to audit or address Medicaid mismanagement under the ABI Waiver Program, enabling further misuse of federal funds and harm to vulnerable populations. Permitting Retaliation: Did not intervene to protect whistleblowers exposing Medicaid corruption. Key Themes of Abuse of Authority: Systemic Retaliation: Agencies targeted David for exposing Medicaid mismanagement and systemic corruption, denying him access to justice and public forums. Weaponized Bureaucr
When did this occur?	Timeline of Occurrence: Abuse of Authority Key Dates and Events October 24, 2024 – Filing of CHRO Complaint: David Medeiros submitted a notarized complaint to CHRO detailing ADA violations and systemic retaliation by DSS. CHRO failed to assign a case number or acknowledge the complaint. October 30, 2024 – Follow-Up with CHRO: David contacted CHRO requesting an update and reiterating the need for a case number. No substantive response or acknowledgment was provided. November 1, 2024 – Appeal to Connecticut Attorney General: Submitted evidence to the Attorney General's Office highlighting DSS's retaliatory actions, ADA violations, and CHRO's inaction. The Attorney General ignored the submission and took no steps to address the complaints. November 10, 2024 – Escalation to Federal Agencies: Detailed complaints submitted to the Department of Justice (DOJ) and the Department of Health and Human Services (HHS) Office for Civil Rights (OCR), citing whistleblower retaliation, ADA non-compl
How did you discover this action?	How This Action Was Discovered David Medeiros discovered the retaliatory actions and discriminatory



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	practices through his direct interactions with state agencies, including CHRO, DSS, and the Attorney General's Office. These interactions were marked by deliberate inaction, procedural barriers, and public exclusion. Key discoveries include: Retaliatory Actions at Public Forums: During ABI Waiver Program discussions, DSS officials publicly ridiculed David and excluded him from critical decision-making processes. These actions were directly observed and documented by David as clear attempts to undermine his advocacy efforts and credibility as a whistleblower. Failure to Respond to ADA Accommodation Requests: Despite repeated requests for reasonable ADA accommodations, including simplified correspondence and email-only communication, DSS and CHRO refused to comply. This non-compliance became evident through continued procedural delays and inaccessible communication methods. CHRO's Refusal to Acknowledge Complaint: After filing a notarized complaint with CHRO on October 24, 2024, David discovered the agency's refusal to assign a case number or take any investigative action. Follow-ups on October 30, 2024, further confirmed CHRO's neglect of its statutory duties. Attorney General's Silence: Evidence submitted to the Connecticut Attorney General's Office on November 1, 2024, was met with complete inaction. David discovered the lack of accountability through the Attorney General's failure to respond to his submissions. Federal Inaction by DOJ and HHS OCR: Complaints escalated to the DOJ and HHS OCR on November 10, 2024, provided detailed documentation of ADA violations, whistleblower retaliation, and systemic misconduct. The absence of follow-up or enforcement from these federal agencies highlighted their neglect. Obstructed FOIA Requests: DSS and CHRO failed to provide timely responses to FOIA requests, further obstructing David's efforts to obtain transparency regarding Medicaid fund usage and agency accountability. Through these events, David identified a coordinated pattern of retaliation, inaction, and systemic



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	discrimination, underscoring a deliberate effort to suppress his advocacy and whistleblower disclosures.
What additional facts support your allegation?	Additional Facts Supporting the Allegation of Abuse of Authority Documented Retaliation and Public Exclusion: DSS Forum Behavior: During ABI Waiver Program forums, DSS officials publicly ridiculed David Medeiros and excluded him from critical discussions, despite his role as a disability advocate and whistleblower. This retaliation was witnessed by multiple attendees and documented in communication records. Exclusion from Decision-Making Processes: Despite being a key stakeholder and advocate for individuals with disabilities, David was systematically excluded from forums and denied opportunities to provide input on critical Medicaid policies. Failure to Investigate by CHRO: Despite filing a notarized complaint on October 24, 2024, detailing ADA violations and retaliation by DSS, CHRO refused to assign a case number or investigate the allegations. This failure to act highlights CHRO's abdication of its statutory responsibility to protect individuals from discrimination. Attorney General's Refusal to Act: On November 1, 2024, David submitted evidence of misconduct and retaliation to the Connecticut Attorney General's Office. The Attorney General's Office has failed to provide acknowledgment, initiate an investigation, or take any corrective action, enabling ongoing abuses. Pattern of ADA Non-Compliance: Multiple ADA accommodation requests, including email-only correspondence and accessible formats for communication, were systematically denied by DSS and CHRO. This lack of compliance demonstrates a deliberate effort to obstruct David's ability to participate meaningfully in governmental processes. FOIA Obstruction: David submitted FOIA requests to DSS and other agencies to obtain records related to Medicaid fund usage and ABI Waiver Program policies. These requests were either ignored or delayed far beyond statutory deadlines, highlighting a pattern of intentional non-compliance and a lack of transparency. Federal Inaction and Neglect:



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	Complaints escalated to the DOJ and HHS OCR on November 10, 2024, were met with silence. Despite being provided with comprehensive evidence of systemic ADA violations, whistleblower retaliation, and misuse of federal funds, federal agencies failed to investigate or enforce compliance. Exploitation of Disability: Agencies are fully aware of David's traumatic brain injury (TBI) and related cognitive challenges but have weaponized these vulnerabilities by creating procedural barriers, ignoring accommodation requests, and delaying responses. This exploitation underscores the systemic nature of the abuse. Medicaid Mismanagement Concerns: DSS's refusal to disclose Medicaid fund usage, particularly regarding the ABI Waiver Program, raises serious concerns about potential mismanagement or misuse of federal funds. The lack of transparency and retaliatory actions suggest an attempt to shield systemic inefficiencies from public scrutiny. Violation of Whistleblower Protections: David's disclosures of Medicaid mismanagement
Allegation	Danger to Public Health
What action did they take?	Actions Taken by the Individuals and Agencies Connecticut Department of Public Health (DPH) Action: Failed to ensure that public health programs under its jurisdiction comply with ADA standards, particularly for individuals with disabilities accessing Medicaid and ABI Waiver services. Did not intervene or enforce oversight when systemic health access violations were reported. Connecticut Department of Social Services (DSS) Action: Publicly ridiculed and excluded David Medeiros during ABI Waiver forums, violating his constitutional rights to free speech and equal participation. Obstructed transparency by refusing to provide records related to Medicaid policies, ABI Waiver management, and whistleblower reports. Failed to provide legally mandated ADA accommodations, including accessible communication formats and reasonable procedural modifications. Actively retaliated against David Medeiros for whistleblowing on Medicaid mismanagement and



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	systemic corruption. Connecticut Attorney General's Office Action: Ignored formal complaints and evidence of systemic failures, including ADA violations and retaliation against David Medeiros. Declined to intervene or enforce legal obligations despite the evidence provided, effectively enabling state agencies to continue discriminatory and retaliatory practices. Connecticut Commission on Human Rights and Opportunities (CHRO) Action: Refused to assign a case number to David Medeiros' notarized discrimination complaint, obstructing access to justice. Failed to investigate ADA violations and retaliation claims, violating its statutory mandate to uphold anti-discrimination laws. Ignored follow-up communications requesting updates on the status of the complaint. U.S. Department of Health and Human Services (HHS), Office for Civil Rights (OCR) Action: Failed to enforce ADA compliance in federally funded Medicaid programs administered by Connecticut DSS. Did not investigate complaints of systemic discrimination or Medicaid mismanagement despite federal jurisdiction. U.S. Department of Justice (DOJ), Civil Rights Division Action: Neglected to act on formal complaints of ADA violations, whistleblower retaliation, and constitutional rights infringements, despite its federal enforcement responsibilities. Allowed Connecticut agencies to continue operating without accountability for systemic misconduct. Federal Elected Officials (Senators and Representatives) Action: Did not advocate for or initiate federal oversight of Connecticut's Medicaid program or address the systemic discrimination and retaliation against whistleblowers. Summary of Retaliatory and Obstructive Actions Systemic exclusion of David Medeiros from public forums and decision-making processes. Suppression of whistleblower allegations through procedural delays, inaction, and retaliation. Weaponization of David's brain injury by refusing ADA-mandated accommodations, effectively silencing his advocacy. Mismanagement of Medicaid funds and denial of transparen



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When did this occur?	Timeline of Events October 24, 2024 – Filing of CHRO Complaint David Medeiros submitted a notarized complaint to the Connecticut Commission on Human Rights and Opportunities (CHRO) regarding ADA violations, discrimination, and retaliation by DSS. October 30, 2024 – Follow-Up with CHRO David followed up with CHRO to request a case number and a status update on his complaint. CHRO failed to respond or provide the requested case number. November 1, 2024 – Appeal to Connecticut Attorney General's Office David submitted evidence and a formal appeal to the Connecticut Attorney General, outlining DSS misconduct, CHRO inaction, and systemic ADA violations. The Attorney General ignored this submission. November 10, 2024 – Complaint Escalation to Federal Agencies David submitted formal complaints to the U.S. Department of Justice (DOJ) Civil Rights Division and the Office for Civil Rights (OCR) under the Department of Health and Human Services (HHS). These complaints detailed ADA violations,
How did you discover this action?	David Medeiros uncovered these actions through personal experiences as a whistleblower, disability advocate, and Medicaid stakeholder. Key discoveries include: Direct Personal Experience: While engaging with the Connecticut Department of Social Services (DSS) as a whistleblower and advocate for the ABI Waiver Program, David directly experienced public ridicule, exclusion from forums, and systemic retaliation. Documented Evidence: David submitted formal complaints to the Connecticut Commission on Human Rights and Opportunities (CHRO) and other agencies, only to receive no substantive responses or assigned case numbers, highlighting systemic failures. Procedural Barriers: Through attempts to obtain information via the Freedom of Information Act (FOIA) and ADA accommodation requests, David encountered procedural delays, denials, and refusals to provide accessible formats. Patterns of Neglect and Retaliation: The lack of federal enforcement from agencies such as the DOJ and



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	HHS OCR revealed systemic inaction and a pattern of neglect, particularly against individuals with disabilities and whistleblowers. Community Feedback and Advocacy Efforts: David learned of similar patterns of exclusion and systemic failures from other whistleblowers, Medicaid recipients, and disability advocates, further corroborating his findings. These cumulative experiences and observations provided David with irrefutable evidence of systemic wrongdoing, gross mismanagement, and abuse of authority.
What additional facts support your allegation?	5. What Additional Facts Support Your Allegation? Documented Complaints and Correspondence: Multiple formal complaints were submitted to the Connecticut Commission on Human Rights and Opportunities (CHRO), Connecticut Department of Social Services (DSS), Office of the Connecticut Attorney General, and federal agencies like the Department of Justice (DOJ) and Health and Human Services Office for Civil Rights (HHS OCR). These complaints document allegations of ADA violations, whistleblower retaliation, and systemic mismanagement. CHRO's refusal to assign case numbers or investigate further substantiates a pattern of inaction. ADA Violations and Procedural Barriers: Agencies failed to provide ADA-mandated accommodations, such as email-only communication, simplified correspondence, and accessible formats. These violations demonstrate a deliberate disregard for federal disability rights laws, including the Americans with Disabilities Act (ADA) and the Rehabilitation Act (Section 504). Retaliatory Actions: DSS officials publicly ridiculed David Medeiros during ABI Waiver Program forums, excluded him from critical discussions, and obstructed his access to essential records and accommodations. These retaliatory actions were intended to discredit David and suppress his advocacy. FOIA and Transparency Failures: David's FOIA requests seeking information on Medicaid fund usage, including ABI Waiver program details, were ignored or delayed, violating transparency laws under 5 U.S.C. § 552 and Connecticut FOIA statutes (C.G.S. § 1-200 et seq.).



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	Testimonies and Community Evidence: Accounts from other disability advocates, Medicaid recipients, and whistleblowers corroborate systemic issues within Connecticut's state agencies, particularly DSS and CHRO. Patterns of retaliation, neglect, and obstruction have been consistently reported. Systemic Mismanagement of Medicaid Funds: DSS's refusal to disclose Medicaid fund usage, particularly in relation to the ABI Waiver Program, raises concerns about potential misuse or gross mismanagement of public funds intended to serve vulnerable populations. Federal Inaction and Knowledge of Disability: Federal agencies, including the DOJ and HHS OCR, were alerted to the systemic failures and retaliatory practices, but no substantive action has been taken. This inaction, despite full knowledge of David's traumatic brain injury and ADA-related needs, compounds the harm. Impact on Public Health and Safety: Neglecting ADA compliance and whistleblower protections undermines public trust, threatens the integrity of federally funded programs, and endangers Medicaid beneficiaries reliant on these services for health and safety. These facts collectively establish a pattern of systemic neglect, retaliation, and corruption within Connecticut state agencies and the failure of federal oversight bodies to intervene effectively.
Allegation	Gross Waste of Funds
What action did they take?	2. What Action Did They Take? The individuals and entities listed above engaged in actions or failed to act in ways that facilitated or perpetuated gross waste of public funds. Specifically: Connecticut Department of Social Services (DSS): Improper Use of Medicaid Funds: Failed to allocate Medicaid funds appropriately within the Acquired Brain Injury (ABI) Waiver Program. Funds intended for critical care were mismanaged, diverted, or left unaccounted for. Neglected oversight of contracts and services provided to vulnerable populations, resulting in inefficiencies, waste, and potentially fraudulent activity. Inadequate Financial Reporting: Deliberately delayed or withheld accurate financial



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	reports related to Medicaid expenditures, violating transparency and federal compliance obligations. Failure to Conduct Internal Audits: Ignored requirements to investigate and audit financial practices within the ABI Waiver Program and other DSS-administered Medicaid services. Connecticut Office of Policy and Management (OPM): Approval of Questionable Allocations: Authorized state budgets and Medicaid expenditures without proper accountability mechanisms to track the use of funds. Failure to Address Known Inefficiencies: Despite financial distress and known concerns about Medicaid mismanagement, OPM failed to implement corrective measures to reduce waste or increase oversight. Connecticut General Assembly (CGA): Inadequate Legislative Oversight: Failed to hold DSS accountable during budget reviews or Medicaid oversight hearings, enabling wasteful practices to continue unchecked. Refusal to Investigate Complaints: Ignored whistleblower reports and advocacy efforts highlighting systemic Medicaid mismanagement and wasteful spending. State Comptroller's Office: Failure to Monitor Spending: Did not ensure proper documentation or auditing of Medicaid disbursements, including those related to the ABI Waiver Program. Neglect of Transparency Requirements: Omitted mandatory public disclosures that would expose financial mismanagement. Federal Oversight Bodies: Centers for Medicare & Medicaid Services (CMS): Failed to audit or investigate Connecticut's Medicaid program despite clear indicators of mismanagement. U.S. Department of Health and Human Services (HHS): Did not enforce federal requirements for accountability in state-administered Medicaid programs, allowing systemic waste to persist. Office of the Inspector General (OIG), HHS: Neglected its duty to investigate potential fraud, waste, and abuse in Connecticut's use of Medicaid funds, particularly those impacting vulnerable populations. Other Actions Taken: Retaliation Against Whistleblowers: Suppressed complaints and retaliated against individuals, including



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	David Medeiros, who attempted to expose wasteful practices or seek transparency. Deliberate Obfuscation of Records: Withheld or failed to provide critical financial documents and records in response to Freedom of Information Act (FOIA) requests
When did this occur?	When Did This Occur? The gross waste of public funds by the listed individuals and entities occurred over an extended period, spanning several years. Key timeframes include: Ongoing Mismanagement of Medicaid Funds Mismanagement within the Acquired Brain Injury (ABI) Waiver Program and other Medicaid services has persisted for at least the past five years, with notable escalation from 2020 through 2024 as whistleblower reports and advocacy efforts exposed systemic issues. Retaliatory and Obstructive Actions Retaliation against David Medeiros began following his whistleblower activities in 2022 and has continued through 2024. These actions coincided with: Reports submitted to Connecticut DSS regarding Medicaid mismanagement. Complaints filed with the Connecticut Commission on Human Rights and Opportunities (CHRO) in 2023 and 2024. Failure of Oversight Bodies The Centers for Medicare & Medicaid Services (CMS) and the U.S. Department of Health and Human Services (HHS) failed to act on
How did you discover this action?	How Did You Discover This Action? David Medeiros, as a whistleblower, disability advocate, and founder of ABI Resources, uncovered these actions through firsthand involvement, research, and communication with affected populations. The following outlines how these actions were discovered: Direct Involvement in Advocacy and Reporting: As a Medicaid Acquired Brain Injury Waiver (ABI Waiver) provider, David observed consistent mismanagement, delays, and non-compliance with Medicaid policies, impacting vulnerable populations reliant on these services. His firsthand interactions with Connecticut Department of Social Services (DSS) officials revealed systemic failures in the administration of funds, refusal to provide transparency, and retaliatory practices against those raising concerns. Complaints Filed and



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	Ignored: After filing formal complaints with DSS, CHRO, and other state agencies, David noted repeated refusals to assign case numbers, investigate allegations, or address the reported issues, indicating procedural obstructions and systemic retaliation. Follow-ups with state and federal oversight bodies, including HHS OCR and DOJ, yielded no action, further exposing a coordinated effort to suppress whistleblowers. Testimonies from Affected Populations: Through his work with ABI Resources, David received testimonies from individuals and families, highlighting delayed Medicaid services, discriminatory practices, and inaccessible public forums for those with disabilities. These accounts confirmed widespread financial inefficiencies and administrative failures within state programs. Analysis of FOIA Responses and Obstructions: Requests for Medicaid fund records under FOIA (5 U.S.C. § 552) were delayed, denied, or inadequately addressed, further revealing the deliberate suppression of transparency regarding the misuse of federal and state funds. DSS and CHRO's refusal to provide complete, timely, and accurate information raised significant concerns about financial mismanagement. Patterns of Retaliation: Retaliation against David personally—including public ridicule, exclusion from forums, and denial of accommodations—demonstrated a coordinated effort to silence his whistleblower activities. Escalation to Federal Agencies: Escalation to DOJ and HHS OCR in 2023 and 2024 confirmed federal inaction despite substantial evidence of systemic violations, indicating complicit neglect or deferral of oversight.
What additional facts support your allegation?	What Additional Facts Support Your Allegation? The following additional facts substantiate the allegations of gross waste of funds, mismanagement, and retaliatory practices by Connecticut state agencies and the federal inaction that has allowed these violations to persist: Documented FOIA Non-Compliance and Withheld Records: Numerous FOIA requests filed with the Connecticut Department of Social Services (DSS) and



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	other agencies remain unanswered, delayed, or improperly denied. Refusal to disclose Medicaid spending records and program oversight audits has raised concerns about the misallocation of funds and deliberate suppression of accountability. The lack of transparency violates FOIA (5 U.S.C. § 552) and creates a strong presumption of financial mismanagement. Patterns of Financial Irregularities in Medicaid Waiver Programs: Analysis of publicly available records and reports from Medicaid beneficiaries highlights delays and denials in services promised under the ABI Waiver Program, indicating misuse or diversion of federal funds. Families and individuals reliant on Medicaid services have reported prolonged processing times and inadequate resource allocation, suggesting systemic inefficiencies. Unaddressed Whistleblower Retaliation: David Medeiros faced public ridicule, exclusion, and retaliation for raising concerns about Medicaid mismanagement. These actions deter further scrutiny of DSS's practices and reinforce a culture of impunity. State agencies have ignored whistleblower protections outlined in the Whistleblower Protection Act (5 U.S.C. § 2302), further preventing transparency. Testimonies from Affected Individuals: Accounts from Medicaid beneficiaries and families describe delays in essential healthcare services and unexplained denials of claims, which directly contradict the program's intended purpose and funding requirements. Repeated Procedural Obstructions: DSS's refusal to issue detailed responses to formal complaints and case filings obstructs accountability efforts. The CHRO's refusal to assign case numbers prevents investigations into discrimination and non-compliance with ADA standards. Attorney General's Office inaction demonstrates systemic neglect, enabling DSS to continue its harmful practices unchecked. Expert Reports and Audits Ignored: Calls for independent audits of DSS's Medicaid programs have been ignored or dismissed, raising concerns about financial mismanagement and failure to adhere to federal funding regulations. Violation



REPORT GOVERNMENT WRONGDOING (DISCLOSURE)

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	of Federal Oversight Obligations: Federal agencies, including HHS OCR and the DOJ, have failed to enforce ADA compliance or investigate allegations of systemic corruption, allowing ongoing violations to harm vulnerable populations. Exploitation of Disability Challenges: David Medeiros, a brain injury survivor, has faced procedural barriers intentionally designed to exploit his cognitive challenges, such as refusal to provide accessible communication formats or simplified processes requ

DISCLOSURE SUBJECTS

Name of individual you believe is responsible for the wrongdoing disclosed.

First Name	Last Name	Title	Chain of Command
Kristen	Clarke	U.S. Department of Justice (DOJ), Civil Rights Division:	Assistant Attorney General: Kristen Clarke Directly oversees enforcement of civil rights laws, inclu
Melanie Fontes Rainer	Melanie Fontes Rainer	U.S. Department of Health and Human Services (HHS), Office for Civil Rights (OCR): Director:	Responsible for enforcing ADA and Section 504 of the Rehabilitation Act within federally funded heal
William Tong	William Tong	Connecticut Office of the Attorney General:	Primary legal officer for Connecticut, responsible for ensuring state agencies comply with constitut
Andrea Barton Reeves	Andrea Barton Reeves	Connecticut Department of Social Services	Oversees Medicaid administration and implementation of programs



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		(DSS): Commissioner:	such as the ABI Waiver, directly tie
Tanya A. Hughes	Tanya A. Hughes	Connecticut Commission on Human Rights and Opportunities (CHRO): Executive Director:	Investigates discrimination complaints, including ADA violations, but has shown inaction in your cas
Henry J. Kerner	Henry J. Kerner	U.S. Office of Special Counsel (OSC): Special Counsel:	Investigates whistleblower retaliation and reports of government wrongdoing.
Julie Su	Julie Su	U.S. Department of Labor (DOL):	Responsible for oversight of workplace ADA compliance and protections for individuals with disabilit
Chiquita Brooks- LaSure	Chiquita Brooks- LaSure	Centers for Medicare & Medicaid Services (CMS): Administrator:	Responsible for federal oversight of Medicaid programs, including ensuring state compliance with fed
Ned Lamont	Ned Lamont	Governor of Connecticut:	The executive authority overseeing state agencies, including DSS and CHRO, with the power to order r
Dr. Manisha Juthani	Dr. Manisha Juthani	Connecticut Department of Public Health (DPH):	Ensures state compliance with health-related ADA requirements and public health safety.
Gary Winfield	Gary Winfield	Connecticut General Assembly, Judiciary Committee:	Legislative oversight for state agency practices, including transparency, civil rights compliance, a



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Andrés J. Gallegos	Andrés J. Gallegos	National Council on Disability (NCD): Chair:	Federal agency advising the President and Congress on disability policies, including ADA compliance
Alina M. Semo	Alina M. Semo	Office of Government Information Services (OGIS): Director:	Mediates FOIA disputes and ensures transparency in government operations.
Gene L. Dodaro	Gene L. Dodaro	U.S. Government Accountability Office (GAO): Comptroller General	Investigates misuse of federal funds and systemic inefficiencies in federally funded programs like M
Andrea Barton Reeves	Andrea Barton Reeves	Connecticut Department of Social Services (DSS): Leadership: Commissioner	Connecticut Department of Social Services (DSS): Leadership: Commissioner
Tanya Hughes	Tanya Hughes	Connecticut Commission on Human Rights and Opportunities (CHRO): Leadership: Executive Director	Connecticut Commission on Human Rights and Opportunities (CHRO): Leadership: Executive Director
William Tong	William Tong	Connecticut Attorney General's Office: Leadership: Attorney General	Connecticut Attorney General's Office: Leadership: Attorney General



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Kristen Clarke	Kristen Clarke	U.S. Department of Justice (DOJ), Civil Rights Division: Leadership: Assistant Attorney General	U.S. Department of Justice (DOJ), Civil Rights Division: Leadership: Assistant Attorney General
Melanie Fontes Rainer	Melanie Fontes Rainer	U.S. Department of Health and Human Services (HHS), Office for Civil Rights (OCR): Leadership: Dire	U.S. Department of Health and Human Services (HHS), Office for Civil Rights (OCR): Leadership: Dire
Ned Lamont	Ned Lamont	State of Connecticut Leadership: Governor	State of Connecticut Leadership: Governor
Jeffrey Beckham	Jeffrey Beckham	Connecticut Office of Policy and Management (OPM): Secretary	Oversees budget and funding allocation, including Medicaid funds. Negligence or failure to ensure pr
Dr. Manisha Juthani	Dr. Manisha Juthani	Connecticut Department of Public Health (DPH): Commissioner	Connecticut Department of Public Health (DPH): Commissioner
Colleen M. Murphy	Colleen M. Murphy	Executive Director and General Counsel	Connecticut Freedom of Information Commission (FOIC):



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Martin M. Looney	Martin M. Looney	Connecticut General Assembly (CGA): Senate President Pro Tempore	Responsible for legislative oversight of state agencies like DSS and CHRO. Inaction or failure to in
Matthew Ritter	Matthew Ritter	House Speaker	Responsible for legislative oversight of state agencies like DSS and CHRO. Inaction or failure to in
Chiquita Brooks-LaSure	Chiquita Brooks-LaSure	Centers for Medicare & Medicaid Services (CMS): Administrator	Centers for Medicare & Medicaid Services (CMS): Administrator
Charlotte Burrows	Charlotte Burrows	U.S. Equal Employment Opportunity Commission (EEOC):	U.S. Equal Employment Opportunity Commission (EEOC): Chair
Henry Kerner	Henry Kerner	Office of Special Counsel (OSC):	ederal oversight for whistleblower complaints. If whistleblower disclosures were ignored or mishandl
Gene L. Dodaro	Gene L. Dodaro	U.S. Government Accountability Office (GAO): Comptroller General	U.S. Government Accountability Office (GAO): Comptroller General
Christi A. Grimm	Christi A. Grimm	Office of Inspector General (OIG), Department of Health and Human Services:	OIG is tasked with investigating fraud, waste, and abuse in federally funded programs like Medicaid.



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		Inspector General	
Deidre S. Gifford	Deidre S. Gifford	Commissioner, Connecticut Department of Social Services (DSS)	Oversaw the agency's discriminatory practices, denial of ADA accommodations, and retaliatory actions
Tanya Hughes	Tanya Hughes	Executive Director, Connecticut Commission on Human Rights and Opportunities (CHRO)	Failed to ensure the investigation of complaints, neglected to assign case numbers, and ignored stat
William Tong	William Tong	Connecticut Attorney General	Ignored evidence of systemic failures and violations, failing to intervene or hold DSS and CHRO acco
Merrick B. Garland	Merrick B. Garland	U.S. Attorney General, Department of Justice (DOJ)	U.S. Attorney General, Department of Justice (DOJ)
Xavier Becerra	Xavier Becerra	Secretary, U.S. Department of Health and Human Services (HHS)	Neglected oversight responsibilities related to ADA compliance within Medicaid-funded programs.
Chiquita Brooks-LaSure	Chiquita Brooks-LaSure	Administrator, Centers for Medicare & Medicaid Services (CMS)	Role: Allowed systemic Medicaid mismanagement and misuse of federal funds without intervention.
Lisa J. Pino	Lisa J. Pino	Director, Office for Civil Rights (OCR), HHS	Failed to enforce ADA compliance and investigate systemic discrimination and retaliatory practices w



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Manisha Juthani, MD	Manisha Juthani, MD	Commissioner, Connecticut Department of Public Health (DPH)	Oversees public health policies and programs, potentially involved in Medicaid oversight and ADA com
Deidre S. Gifford, MD, MPH	Deidre S. Gifford, MD, MPH	Commissioner, Connecticut Department of Social Services (DSS)	Commissioner, Connecticut Department of Social Services (DSS)
Andrea	Barton Reeves	Commissioner, Connecticut Department of Social Services (DSS)	Commissioner, Connecticut Department of Social Services (DSS)
William Tong	William Tong	Attorney General, State of Connecticut	Legal oversight of state agencies, failed to act on documented violations and complaints
Tanya Hughes	Tanya Hughes	Executive Director, Connecticut Commission on Human Rights and Opportunities (CHRO)	Executive Director, Connecticut Commission on Human Rights and Opportunities (CHRO)
Xavier Becerra	Xavier Becerra	Secretary, U.S. Department of Health and Human Services (HHS)	Secretary, U.S. Department of Health and Human Services (HHS)
Chiquita Brooks-LaSure	Chiquita Brooks-LaSure	Administrator, Centers for Medicare & Medicaid Services (CMS)	Administrator, Centers for Medicare & Medicaid Services (CMS)



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*Denotes required fields.

Kristen Clarke	Kristen Clarke	Assistant Attorney General, Civil Rights Division, U.S. Department of Justice (DOJ)	Assistant Attorney General, Civil Rights Division, U.S. Department of Justice (DOJ)
Robyn M. Colosimo	Robyn M. Colosimo	Acting Special Counsel, U.S. Office of Special Counsel (OSC)	Acting Special Counsel, U.S. Office of Special Counsel (OSC)
Richard Blumenthal	Richard Blumenthal	U.S. Senator for Connecticut	advocate for federal investigations and legislative oversight of state misconduct.
Chris Murphy	Chris Murphy	U.S. Senator for Connecticut	advocate for ensuring ADA compliance and whistleblower protections.
Rosa DeLauro	Rosa DeLauro	U.S. Representative, Connecticut's 3rd District	Focus on federal Medicaid and social services programs.
Andrea Barton Reeves – Commissioner, DSS	Andrea Barton Reeves – Commissioner, DSS	Andrea Barton Reeves – Commissioner, DSS	Andrea Barton Reeves – Commissioner, DSS
Dr. Deidre S. Gifford – Former Commissioner, DSS	Dr. Deidre S. Gifford – Former Commissioner, DSS	Dr. Deidre S. Gifford – Former Commissioner, DSS	Dr. Deidre S. Gifford – Former Commissioner, DSS
Tanya Hughes – Executive Director, CHRO	Tanya Hughes – Executive Director, CHRO	Tanya Hughes – Executive Director, CHRO	Tanya Hughes – Executive Director, CHRO
William Tong – Attorney General, Connecticut	William Tong – Attorney General, Connecticut	William Tong – Attorney	William Tong – Attorney General, Connecticut



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		General, Connecticut	
Chiquita Brooks-LaSure – Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure – Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure – Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure – Administrator, Centers for Medicare & Medicaid Services (CMS)
Xavier Becerra – Secretary, U.S. Department of Health and Human Services (HHS)	Xavier Becerra – Secretary, U.S. Department of Health and Human Services (HHS)	Xavier Becerra – Secretary, U.S. Department of Health and Human Services (HHS)	Xavier Becerra – Secretary, U.S. Department of Health and Human Services (HHS)
Rebecca Bond – Chief, Disability Rights Section, DOJ Civil Rights Division	Rebecca Bond – Chief, Disability Rights Section, DOJ Civil Rights Division	Rebecca Bond – Chief, Disability Rights Section, DOJ Civil Rights Division	Rebecca Bond – Chief, Disability Rights Section, DOJ Civil Rights Division
Governor Ned Lamont – Governor of Connecticut	Governor Ned Lamont – Governor of Connecticut	Governor Ned Lamont – Governor of Connecticut	Governor Ned Lamont – Governor of Connecticut
Jeffrey Beckham – Secretary, OPM	Jeffrey Beckham – Secretary, OPM	Connecticut Office of Policy and Management (OPM):	Connecticut Office of Policy and Management (OPM):
Matthew Ritter – Speaker of the House	Matthew Ritter – Speaker of the House	Connecticut General Assembly (CGA):	Connecticut General Assembly (CGA):



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Martin M. Looney – Senate President	Martin M. Looney – Senate President	Martin M. Looney – Senate President	Responsible for approving state Medicaid budgets and reforms.
Rob Kane	Rob Kane	State Auditors	Tasked with auditing state agencies for financial mismanagement, including Medicaid funds.
John C. Geragosian	John C. Geragosian	State Auditors	Tasked with auditing state agencies for financial mismanagement, including Medicaid funds.
Sean Scanlon	Sean Scanlon	State Comptroller	Monitors DSS Medicaid- related expenditures and financial reporting.
Chiquita Brooks- LaSure – Administrator, CMS	Chiquita Brooks- LaSure – Administrator, CMS	Chiquita Brooks-LaSure – Administrator, CMS	Chiquita Brooks-LaSure – Administrator, CMS
Xavier Becerra – Secretary, HHS	Xavier Becerra – Secretary, HHS	Xavier Becerra – Secretary, HHS	Responsible for monitoring Medicaid mismanagement in Connecticut.
Gene L. Dodaro – Comptroller General of the United States	Gene L. Dodaro – Comptroller General of the United States	Comptroller General of the United States	Leads federal reviews of wasteful practices involving Medicaid funds.
Christi A. Grimm – Inspector General, HHS	Christi A. Grimm – Inspector General, HHS	Christi A. Grimm – Inspector General, HHS	Conducts investigations into Medicaid fraud, waste, and abuse.
Henry J. Kerner – Special Counsel, U.S. Office of Special Counsel (OSC)	Henry J. Kerner – Special Counsel, U.S. Office of Special Counsel (OSC)	Henry J. Kerner – Special Counsel, U.S. Office of Special Counsel (OSC)	Enforces whistleblower protection for those reporting waste or mismanagement.



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REQUESTED OSC ACTION

What action would you like OSC to take?

Request for Federal Representation and Protection to Restore Constitutional Rights
To the U.S. Office of Special Counsel (OSC):

This complaint requires immediate federal representation to protect David Medeiros, a whistleblower, taxpayer advocate, and person with a disability, whose constitutional rights have been systematically violated by Connecticut state agencies. The federal government must act decisively to ensure that David's rights under the First, Fifth, and Fourteenth Amendments, as well as federal statutes like the Americans with Disabilities Act (ADA) and the Whistleblower Protection Act, are restored and protected.

Specific Actions Requested for Representation and Protection

Immediate Federal Representation

Federal Counsel Appointment: Appoint a federally funded attorney or representative to ensure David's constitutional rights are fully protected and enforced.

Direct Oversight of Legal Proceedings: Federal representatives must oversee all ongoing interactions between David and Connecticut agencies to prevent further violations or retaliation.

Protection from Retaliation: Establish safeguards ensuring David is no longer subjected to exclusion, discrimination, or retaliatory actions by state agencies or officials.

Restoration of Constitutional Rights

First Amendment: Reinforce David's right to petition the government for redress of grievances without fear of retaliation or obstruction.

Fifth Amendment: Ensure due process protections are upheld, requiring transparent and timely responses to David's complaints and FOIA requests.

Fourteenth Amendment: Address systemic discrimination and ensure equal protection under the law, particularly as it pertains to David's disability and whistleblower status.

Mandate ADA Compliance and Accessibility

Guarantee Accommodations: Require Connecticut agencies to provide ADA-compliant accommodations, including accessible communication formats and simplified procedures, tailored to David's cognitive needs as a traumatic brain injury survivor.

Independent Audit of ADA Compliance: Conduct a federal audit of ADA adherence within Connecticut's federally funded programs, including DSS's administration of the ABI Waiver Program.



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Federal Oversight to Enforce Accountability

Assign a Federal Monitor: Appoint an independent federal monitor to oversee the actions of Connecticut agencies, ensuring compliance with constitutional and statutory obligations.

Investigate Retaliatory Practices: Launch a federal investigation into retaliatory actions by Connecticut state officials against David Medeiros, holding violators accountable.

Restorative Justice for David Medeiros

Public Acknowledgment: Require Connecticut agencies to publicly acknowledge their violations of David's rights and take corrective action.

Financial Restitution: Compensate David for the personal, professional, and financial harm caused by the systemic violations and retaliatory practices.

Reinstatement of Advocacy Rights: Ensure David's ability to advocate for vulnerable populations, including individuals with disabilities, is fully restored without obstruction or exclusion.

Set a National Precedent

Protect All Whistleblowers: Use David's case to establish stronger federal protections for whistleblowers, ensuring no individual faces similar violations or retaliation in the future.

Strengthen Constitutional Safeguards: Reinforce federal mechanisms to prevent states from undermining constitutional and civil rights.

Systemic Reform Across States: Mandate reforms ensuring all states comply with federal laws protecting taxpayers, individuals with disabilities, and whistleblowers.

Conclusion

David Medeiros has endured severe constitutional violations, systemic discrimination, and targeted retaliation as a whistleblower and disability advocate. The federal government has a moral and legal obligation to represent and protect him, ensuring that his rights are fully restored and upheld.

By providing federal representation and enforcing constitutional and statutory protections, OSC can not only deliver justice for David but also set an enduring example for safeguarding the rights of all Americans, particularly those most vulnerable to systemic failures.

WHERE ELSE DID YOU REPORT THIS MATTER?

I have also disclosed this information to:



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Other Action Type	Action Taken Date

Additional information about reports to Inspectors General, if applicable.

First Name:

Last Name:

Title:

Address:

Email Address:

Telephone Number:

Case ID #:

a. **What is the status of the matter?**

NOTE: MATTERS INVESTIGATED BY AN OFFICE OF INSPECTOR GENERAL

It is the general policy of OSC not to transmit allegations of wrongdoing to the head of the agency involved if the agency's Office of Inspector General has fully investigated, or is currently investigating, the same allegations.

ATTACHMENTS

Please note that the space available for attachments is limited. Therefore, DO NOT attach every document and email that may be relevant to your claim. You will have an opportunity to make additional submissions at a later date. We recommend limiting attachments to official forms and correspondence that document the action(s) at issue in your disclosure if these documents are relevant to your allegations.

I have attached the following documents to my filing:

File Name
Federal Representation for Justice DB.42.131.Inf. Medeiros Connecticut 11.28.2024 .pdf
DAVID MEDEIROS VS CONNECTICUT DEPARTMENT OF SOCIAL SERVICES DSS CT GOV 10.30.2024 .PDF
10.24.2024 DOJ complaint Submission complete.pdf
DAVID MEDEIROS VS CONNECTICUT DEPARTMENT OF SOCIAL SERVICES DSS CT GOV 10.30.2024 (1).PDF
October 30, 2024 - David Medeiros VS Connecticut Department of Social Services DSS CT gov.docx



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CHRO CASE DSS 24 4 Filed Complaint Against Connecticut DSS Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
CHRO CASE DSS 24 3 Filed Complaint Against Connecticut DSS Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
CHRO CASE DSS 24 2 Filed Complaint Against Connecticut DSS Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
CHRO CASE DSS 24 Filed Complaint Against Connecticut DSS Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
OSCFiling-MedeirosDavid-DI-112620241121.pdf
requests (9).csv
requests (8).csv
requests (7).csv
11.27.2024 Escalated Complaint FOIA Non-Compliance ADA Violations Constitutional Violations and Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
11.27.2024 Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
090620247088 cms No Records Response Letter (1).pdf
01.02.2024 COMPLAINT LETTER.docx
11.23.2024 Binder1.pdf
09.24.2024
Federal Intervention_HHS_OIG_CMS_GAO_DOJ_OCR_Whistleblower_Report_2024.pdf
Comprehensive Grievance Report and Request for Clarity Whistleblower Report Mediciad ABI Waiver Programs.pdf
11.27.2024 ALL MUCKROCK TO DATE Binder1 .pdf
FOIA .zip
01.04.2024 CHRO AUDITS Binder2.pdf
000_2024-10-29 17_24_21.003990+00_00_comm.txt
01.01.2024 2nd FOIA.gov - Freedom of Information Act_ Create a request.pdf
Medeiros Response.pdf
Governor Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
12.14.2023 Dear Matthew S. Antonetti CT DSS .pdf
01.02.2024 COMPLAINT LETTER.docx
2410220 CAR Dismissal .pdf
10.22.2024 10.39 am CHRO Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
2410220 CP Email with Documents 2.4.24.msg
2410220 CAR Dismissal .pdf
2410220 Release of Jurisdiction.pdf



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2410220 CAR Dismissal .pdf
2410220 Answer Part 1 of 2.pdf
2410220 Affidavit.pdf
12.23.2023 CHRO COMPLAINT .docx
Admin-CL (1).pdf
01.26.2024 Binder1.pdf
dss foia ghewtfrg Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
ABI Forum 2024.pdf
12.23.2023 Governor Ned Lamont. David Medeiros ABI Resources Call for Systemic Reform in Response to ADA Accommodation Failures and Disability Discrimination Whistleblower Retaliation Compliance CT DSS COU CHRO .pdf
11.27.2024 ALL MUCKROCK TO DATE Binder1 .pdf

CONSENT

Do you consent to the disclosure of your identify to others outside OSC if it becomes necessary in taking further action on this matter?*

I consent to disclosure of my identity.

Yes

I do not consent to disclosure of my identity. (Even if you do not consent, OSC may disclose your identity if necessary due to an imminent danger to public health or safety or imminent violation of any criminal law. See 5 U.S.C. § 1213(h).)

No

CERTIFICATION

I certify that all of the statements made in this complaint are true, complete, and correct to the best of my knowledge and belief. I understand that a false statement or concealment of a material fact is a criminal offense punishable by a fine, imprisonment, or both. 18 U.S.C. § 1001.*

Yes



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BURDEN: The burden for this collection of information (including the time for reviewing instructions, searching existing data sources, gathering the data needed, and completing and reviewing the form) is estimated to be an average of one hour to submit a disclosure of information alleging agency wrongdoing, one hour and fifteen minutes to submit a complaint alleging a prohibited personnel practice or other prohibited activity, or 30 minutes to submit a complaint alleging prohibited political activity. Please send any comments about this burden estimate, and suggestions for reducing the burden, to the U.S. Office of Special Counsel, General Counsel's Office, 1730 M Street, NW, Suite 218, Washington, DC 20036-4505.

This Disclosure of Information was Received by OSC on: 11/28/2024

PLEASE KEEP A COPY OF YOUR COMPLAINT, ANY SUPPORTING DOCUMENTATION, AND ANY ADDITIONAL ALLEGATIONS THAT YOU SEND TO OSC NOW OR AT ANY TIME WHILE YOUR COMPLAINT IS PENDING. REPRODUCTION CHARGES UNDER THE FREEDOM OF INFORMATION ACT MAY APPLY TO ANY REQUEST YOU MAKE FOR COPIES OF MATERIALS THAT YOU PROVIDED TO OSC.



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IMPORTANT INFORMATION ABOUT FILING A DISCLOSURE

OSC WHISTLEBLOWER DISCLOSURE CHANNEL

Under 5 U.S.C. § 1213 and related provisions, the Office of Special Counsel (OSC) serves as a secure channel for federal employees, former federal employees, and applicants for federal employment with reliable knowledge of the wrongdoing to disclose:

- a violation of law, rule or regulation;
- gross mismanagement;
- gross waste of funds;
- an abuse of authority;
- a substantial and specific danger to public health or safety; and/or
- censorship related to scientific research.

OSC JURISDICTION

OSC has no jurisdiction over disclosures filed by:

- employees of the U.S. Postal Service and the Postal Regulatory Commission;
- members of the armed forces of the United States (*i.e.*, non-civilian military employees);
- state employees operating under federal grants;
- employees of federal contractors;
- other employees or federal agencies that are exempt under federal law; and
- Congressional or judicial branch employees.

ANONYMOUS SOURCES

While OSC will protect the identity of persons who make disclosures, it will not consider anonymous disclosures. If a disclosure is filed by an anonymous source, the disclosure will be referred to the Office of Inspector General in the appropriate agency. OSC will take no further action.

RETALIATION

Do you believe you suffered retaliation by your agency for disclosing wrongdoing? If yes, you may file a complaint of retaliation by navigating back to "My Cases" and selecting "New Complaint." Select Option 1 to complete and submit a Complaint of Prohibited Personnel Practice or other Prohibited Activity (PPPs). *If you have already completed the Complaint of Prohibited Personnel Practice or other Prohibited Activity above, please continue with this Disclosure.* PPPs are employment-related activities that are banned in the federal workforce.



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PPPs generally involve some type of personnel decision or action and may result in personal relief for people who have been subject to a PPP. For example, if we find that you were removed from federal service in retaliation for whistleblowing, OSC may act to get your job back. PPPs can also include allegations of harassment, failure to issue appraisals, and improper hiring. Do not file a disclosure to report retaliation or other PPPs.

CONTACT INFORMATION

Title:

First Name:* David

Middle Initial:

Last Name:* Medeiros

International Address?: No

Address:*

215 Mountain St
Willimantic, CT 06226

Cell Phone Number:

Home Phone Number:

Office Phone Number:

Ext.

Email Address:* aabiwr@live.com

Preferred means of contact:

Email: Yes

Cell phone: No

Home phone: No

Office phone: No

REPRESENTATIVE INFORMATION

Do you have representation? No

Information about representative, if applicable.

First Name:*

Middle Initial:

Last Name:*

International Address?:

Address: *



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*Denotes required fields.

Office Phone Number:

Ext.

Cell Phone Number:

Home Phone Number:

Email Address:

EMPLOYMENT INFORMATION

Name of Department/Agency about which you are making a disclosure.

Department:* Justice

Agency:* Office Of The Inspector General

Agency subcomponent: Office of the Inspector General (OIG) For DOJ: Disability Rights
Section For HHS: Office for Civil R

Street Address: 950 Pennsylvania Avenue NW

City: Washington

State: DC

Zip Code: 20201

Employment Status:* Non-Federal Employee (please specify)

Title	Series	Grade

Please provide your dates of employment in this position.

Employment Service Type	Employment Service Subtype	If Other (specify)
Excepted Service	Other	Private Citizen, Advocate, and Whistleblower
Other	Other	Private Citizen, Advocate, and Whistleblower

Are you covered by a collective bargaining agreement?



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DETAILS OF YOUR DISCLOSURES

Please identify the type of wrongdoing that you are alleging. You can make multiple disclosures, but you **MUST** choose one option. If you check "violation of law, rule, or regulation," specify, if you can, the particular law, rule or regulation violated (by name, subject, and/or legal citation). For each allegation, please answer the following questions (be as specific as possible). Please keep in mind that you will have an opportunity to provide more information and someone from OSC will contact you.

If OSC determines there is a substantial likelihood of wrongdoing, OSC will refer your disclosures to the involved agency for an investigation and report. To meet the substantial likelihood standard, there must be a significant probability that the information reveals wrongdoing that falls within one or more of the categories above. In its evaluation, OSC considers the strength, reliability, and credibility of the disclosures. If the substantial likelihood determination cannot be made, OSC will determine whether there is sufficient information to exercise its discretion to refer the allegations.

DISCLOSURES

Allegation	Violation of Law, Rule or Regulation
What action did they take?	Actions Taken by the Involved Parties 1. Connecticut Department of Social Services (DSS): - Publicly ridiculed and excluded David Medeiros during ABI Waiver forums, violating ADA and First Amendment protections. - Refused to provide ADA-mandated accommodations, including accessible communication formats and simplified processes. - Obstructed access to critical information about Medicaid programs, including ABI Waiver policies, in violation of FOIA. - Retaliated against David Medeiros for whistleblowing on systemic Medicaid mismanagement. 2. Connecticut Commission on Human Rights and Opportunities (CHRO): - Refused to assign a case number or investigate David's notarized complaint alleging ADA violations and discrimination by DSS. - Ignored follow-up inquiries regarding the status of the complaint, denying due process and perpetuating



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	discrimination. 3. Connecticut Attorney General's Office: • Failed to act on evidence submitted by David Medeiros regarding DSS misconduct and CHRO's inaction. • Neglected its statutory duty to uphold constitutional and civil rights protections in Connecticut, effectively enabling systemic violations. 4. U.S. Department of Justice (DOJ), Civil Rights Division: • Ignored David's formal complaints regarding ADA violations, whistleblower retaliation, and systemic corruption within Connecticut's Medicaid program. • Failed to investigate or enforce federal protections, allowing violations to persist unchecked. 5. U.S. Department of Health and Human Services (HHS), Office for Civil Rights (OCR): • Did not investigate systemic ADA violations in Connecticut's Medicaid program, despite clear evidence of non-compliance and harm to individuals with disabilities. 6. Connecticut Governor's Office: • Failed to intervene or provide oversight of DSS and CHRO despite being alerted to systemic violations and retaliation against David Medeiros. 7. Centers for Medicare & Medicaid Services (CMS): • Did not enforce federal Medicaid oversight to ensure that Connecticut DSS complies with federal regulations and ADA mandates. Summary of Actions: • Exclusion: Agencies excluded David from forums and processes critical to his advocacy and whistleblower activities. • Retaliation: State and federal actors retaliated against David for exposing Medicaid mismanagement, violating whistleblower protections. • Non-Compliance: Agencies failed to uphold ADA requirements and constitutional rights, creating systemic barriers and procedural delays. • Neglect: Federal oversight bodies deferred action, enabling Connecticut agencies to act with impunity. Constitutional Violations and Crimes Committed 12. First Amendment Violations • Suppression of Petition Rights: By ignoring David Medeiros' complaints and failing to investigate or act on his claims, Connecticut state agencies and federal oversight bodies have



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	suppressed his constitutional right to petition the government for redress of grievances. • Retaliation Against Free Speech: Retaliatory actions, such a
When did this occur?	Timeline of Events October 24, 2024 – Filing of CHRO Complaint David Medeiros submitted a notarized complaint to the Connecticut Commission on Human Rights and Opportunities (CHRO), detailing ADA violations, systemic discrimination, and retaliation by the Connecticut Department of Social Services (DSS). October 30, 2024 – Follow-Up with CHRO David requested a status update and assignment of a case number for his complaint. CHRO failed to respond, creating procedural barriers to justice. November 1, 2024 – Appeal to Connecticut Attorney General David escalated his complaints to the Connecticut Attorney General's Office, providing evidence of systemic violations and requesting oversight of DSS and CHRO. The Attorney General's Office did not respond or take any action. November 10, 2024 – Submission to DOJ David submitted a comprehensive complaint to the U.S. Department of Justice (DOJ), detailing ADA violations, constitutional breaches, whistleblower retaliation, and systemic mismana
How did you discover this action?	3. When did this occur? ChatGPT said: Timeline of Events October 24, 2024 – Filing of CHRO Complaint David Medeiros submitted a notarized complaint to the Connecticut Commission on Human Rights and Opportunities (CHRO), detailing ADA violations, systemic discrimination, and retaliation by the Connecticut Department of Social Services (DSS). October 30, 2024 – Follow-Up with CHRO David requested a status update and assignment of a case number for his complaint. CHRO failed to respond, creating procedural barriers to justice. November 1, 2024 – Appeal to Connecticut Attorney General David escalated his complaints to the Connecticut Attorney General's Office, providing evidence of systemic violations and requesting oversight of DSS and CHRO. The Attorney General's Office did not respond or take any action. November 10, 2024 –



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	Submission to DOJ David submitted a comprehensive complaint to the U.S. Department of Justice (DOJ), detailing ADA violations, constitutional breaches, whistleblower retaliation, and systemic mismanagement by Connecticut agencies. Despite the urgency, the DOJ failed to initiate an investigation or enforce compliance. November 28, 2024 – Current Status CHRO: Refuses to assign a case number or act on David's complaint, obstructing due process. Connecticut Attorney General: Has ignored all communications, abdicating responsibility for overseeing state agency compliance. DOJ: Has not taken substantive action to investigate federal violations or ensure ADA compliance. HHS OCR: Remains unresponsive despite its mandate to enforce ADA compliance and Medicaid program integrity. These violations and inactions have created a continuous pattern of systemic neglect and retaliation against David Medeiros, with no resolution or accountability to date. You said: 4. How did you discover this action? ChatGPT said: How the Action Was Discovered David Medeiros, as a whistleblower and disability advocate, discovered the actions through direct personal experience and documentation, which include: Personal Experience with Discrimination and Retaliation David experienced firsthand acts of exclusion, public ridicule, and procedural barriers during interactions with Connecticut Department of Social Services (DSS) officials. For example: He was excluded from critical discussions related to the ABI Waiver Program. He was subjected to public ridicule during forums, despite being a known advocate for individuals with disabilities and a whistleblower exposing Medicaid mismanagement. Documented Failures of State Agencies David submitted a notarized complaint to the Connecticut Commission on Human Rights and Opportunities (CHRO) detailing ADA violations and retaliation. However, CHRO failed to acknowledge the complaint, assign a case number, or investigate the allegations, creating procedural obstacles. Evidence of Inaction by the Connecticut Attorney General Despite



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	escalating the matter and providing comprehensive evidence of systemic failure
What additional facts support your allegation?	Additional Facts Supporting the Allegation Documented Failures by State Agencies Connecticut Commission on Human Rights and Opportunities (CHRO): David Medeiros submitted a notarized complaint to CHRO on October 24, 2024, detailing ADA violations and systemic retaliation by DSS. CHRO failed to: Assign a case number. Investigate the allegations. Provide any substantive acknowledgment or response, violating its statutory mandate to investigate discrimination complaints. This procedural inaction obstructs justice and denies David's right to due process. Connecticut Department of Social Services (DSS) Retaliation: DSS officials publicly ridiculed David during ABI Waiver forums and excluded him from critical discussions, despite his role as a whistleblower and disability advocate. DSS has refused to provide reasonable ADA accommodations, including accessible communication formats (e.g., email-only correspondence), in direct violation of the ADA and Section 504 of the Rehabilitation Act. Inaction by the Connecticut Attorney General's Office: Despite receiving evidence of systemic ADA violations, whistleblower retaliation, and Medicaid mismanagement, the Attorney General's Office failed to investigate or respond, abdicating its responsibility to enforce state and federal laws. Federal Oversight Failures: The U.S. Department of Justice (DOJ) and the Department of Health and Human Services Office for Civil Rights (HHS OCR) were notified of systemic ADA violations, whistleblower retaliation, and constitutional breaches in November 2024. Despite this, no federal investigations or enforcement actions have been initiated, perpetuating state agency misconduct. Evidence of ADA Non-Compliance: DSS repeatedly refused David's requests for ADA-compliant communication, such as screen-reader-compatible documents and simplified processes, exacerbating the challenges he faces as a traumatic brain injury (TBI) survivor. Mismanagement of Public Funds: DSS has



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	obstructed transparency regarding Medicaid fund usage, particularly funds allocated to the ABI Waiver Program. This raises significant concerns about potential misuse or mismanagement of taxpayer dollars. Exploitation of Disability: State and federal officials are aware of David's brain injury and cognitive challenges, yet they have exploited his disability by creating procedural barriers and denying accommodations, effectively excluding him from advocacy and justice processes. Pattern of Systemic Corruption and Retaliation: Agencies at both the state and federal levels have demonstrated a clear pattern of protecting their leadership and shielding systemic inefficiencies, corruption, and discrimination, rather than addressing legitimate complaints. By refusing to act on whistleblower disclosures, these agencies have enabled misconduct, eroded public trust, and fostered an environment where accountability is absent. Violation of Transparency Laws: DSS and CHRO have failed to comply with Freedom of Information
Allegation	Gross Mismanagement
What action did they take?	The listed individuals and entities engaged in or facilitated actions that collectively constitute systemic violations of constitutional rights, ADA non-compliance, whistleblower retaliation, and mismanagement of public funds. These actions include: 1. Suppression of Whistleblower Rights and Retaliation DSS (Connecticut Department of Social Services): Publicly ridiculed and excluded David Medeiros from critical forums related to Medicaid and the ABI Waiver Program. Obstructed David's advocacy efforts by withholding ADA-mandated accommodations, such as accessible communication formats and email-only correspondence. Refused to provide requested records or updates, effectively silencing his whistleblowing efforts and suppressing public accountability. CHRO (Commission on Human Rights and Opportunities): Refused to assign a case number to David's notarized complaint, delaying and obstructing justice. Failed to investigate claims of systemic discrimination and retaliation, despite statutory



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	mandates. Connecticut Attorney General's Office: Ignored multiple submissions of evidence regarding DSS misconduct and CHRO's failure to act. Failed to intervene or provide oversight to enforce transparency, ADA compliance, and whistleblower protections. 2. Violations of ADA Protections and Disability Rights DSS: Denied reasonable accommodations to David Medeiros, a traumatic brain injury (TBI) survivor, making it impossible for him to meaningfully participate in public processes. Weaponized David's disability by exploiting his cognitive challenges to create procedural delays, obstruct communication, and undermine his advocacy. CHRO: Failed to enforce ADA and anti-discrimination statutes by not investigating documented violations or taking any corrective actions. Federal Agencies (DOJ, HHS OCR, CMS): Neglected oversight responsibilities to ensure ADA compliance and accessibility in Connecticut's Medicaid program, enabling DSS to continue discriminatory practices unchecked. 3. Mismanagement of Public Funds and Lack of Transparency DSS: Withheld public records related to Medicaid fund allocations, including the ABI Waiver Program, violating FOIA and state transparency laws. Mismanaged Medicaid resources by failing to meet federal ADA standards while continuing to receive federal funding. Federal Agencies (CMS, HHS OCR): Failed to audit or investigate the misuse of Medicaid funds in Connecticut, despite whistleblower complaints highlighting systemic issues. 4. Abuse of Authority and Gross Mismanagement Connecticut Leadership (OPM, Governor's Office): Allowed systemic failures in oversight and enforcement by not addressing persistent complaints of corruption, discrimination, and retaliation. Enabled DSS and CHRO's non-compliance with state and federal laws by failing to enact structural reforms. Federal Agencies (DOJ, OSC): Ignored whistleblower reports and failed to initiate investigations into Connecticut's systemic mismanagement of Medicaid and ADA violat



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When did this occur?	Timeline of Events October 24, 2024 – Filing of CHRO Complaint David Medeiros submitted a notarized complaint to the Connecticut Commission on Human Rights and Opportunities (CHRO), detailing ADA violations, systemic discrimination, and retaliation by the Connecticut Department of Social Services (DSS). October 30, 2024 – Follow-Up with CHRO David requested a case number and an update on the status of his complaint. CHRO failed to respond or assign a case number, effectively obstructing the complaint process. November 1, 2024 – Appeal to Connecticut Attorney General David submitted evidence and documentation to the Connecticut Attorney General's Office, requesting oversight and intervention to address systemic misconduct by DSS and CHRO. The Attorney General's Office ignored the submission and failed to act. November 10, 2024 – Escalation to DOJ David submitted a detailed whistleblower complaint to the U.S. Department of Justice (DOJ), highlighting ADA violations, FOIA non-compliance
How did you discover this action?	Discovery of Actions David Medeiros discovered these actions through firsthand experience and documented interactions with the involved parties. The following key events and observations provided evidence of the actions taken against him: Refusal to Assign a Case Number by CHRO After submitting a notarized complaint to CHRO on October 24, 2024, David received no acknowledgment or case number, despite following up multiple times. The lack of response signaled procedural obstruction and a failure to fulfill CHRO's statutory obligations. Exclusion and Ridicule by DSS During public forums related to the ABI Waiver Program, DSS officials publicly ridiculed and excluded David, creating a hostile environment for his advocacy. Witnesses corroborated these incidents, providing evidence of discriminatory practices. Ignored Submissions to the Attorney General's Office Despite submitting detailed evidence of DSS and CHRO misconduct to the Attorney General on November 1, 2024, no acknowledgment or action was taken. This



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	inaction became apparent when repeated attempts to follow up were ignored. Federal Oversight Failures Complaints to the DOJ and HHS OCR, submitted on November 10, 2024, included comprehensive documentation of ADA violations, whistleblower retaliation, and systemic mismanagement. The absence of substantive action or follow-up from these federal agencies revealed a broader pattern of neglect and inaction. FOIA and ADA Compliance Failures Requests for ADA-compliant communication and public records related to Medicaid funds and the ABI Waiver Program were either ignored or obstructed. These failures were documented through email exchanges, unanswered requests, and a lack of transparent processes. Each discovery is supported by correspondence records, witness testimony, and David's detailed documentation of the systemic barriers and retaliatory practices he encountered. These actions collectively indicate deliberate neglect and systemic discrimination.
What additional facts support your allegation?	Additional Facts Supporting the Allegations Documented Retaliation and Exclusion by DSS: DSS officials publicly ridiculed David Medeiros during ABI Waiver forums, as corroborated by witnesses and documented in communications. These actions created a hostile environment, directly impeding his ability to advocate for Medicaid beneficiaries and individuals with disabilities. DSS failed to provide reasonable accommodations under the ADA, including email-only correspondence and simplified processes, despite David's documented cognitive challenges as a brain injury survivor. CHRO's Failure to Investigate: Despite submitting a notarized complaint on October 24, 2024, and multiple follow-up communications, CHRO refused to assign a case number or initiate an investigation, violating its statutory obligation to investigate discrimination complaints. CHRO's inaction effectively denied David due process and equal protection under the law, prolonging systemic discrimination and retaliation. Attorney General's Office Inaction: Submissions to the Connecticut Attorney



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	General included detailed evidence of DSS's ADA violations and whistleblower retaliation. Despite the compelling nature of the evidence, the office failed to respond, investigate, or intervene. This neglect demonstrates a disregard for its duty to ensure state agency compliance with federal and state laws. Federal Oversight Failures (DOJ and HHS OCR): The Department of Justice and the Office for Civil Rights at HHS were notified of systemic ADA violations, misuse of Medicaid funds, and whistleblower retaliation. Despite comprehensive documentation, neither agency initiated a substantive investigation or provided updates. Federal inaction perpetuates the culture of impunity within Connecticut's state agencies. FOIA and Transparency Failures: DSS obstructed transparency by refusing to provide records related to Medicaid fund usage and ABI Waiver operations, despite FOIA and state FOIA laws mandating timely responses. Requests for ADA-compliant documents and communication were ignored, compounding David's inability to access critical information. Pattern of Systemic Neglect and Corruption: Connecticut's financial reliance on Medicaid creates an incentive to suppress transparency and accountability. The refusal to investigate whistleblower complaints, accommodate disabilities, or ensure compliance highlights a coordinated effort to shield systemic mismanagement. David Medeiros' Vulnerability as a Brain Injury Survivor: Agencies weaponized David's cognitive challenges to create procedural barriers, delay responses, and obstruct justice, further exacerbating the discrimination and retaliation he faced. The refusal to accommodate his needs constitutes a violation of the ADA and Rehabilitation Act, underscoring the systemic failure to protect vulnerable individuals. Summary of Supporting Evidence: Witness testimony from public forums and interactions with DSS officials. Documentation of corresponden
Allegation	Abuse of Authority



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What action did they take?	Actions Taken: Abuse of Authority State-Level Actions Connecticut Department of Social Services (DSS): Public Ridicule and Exclusion: DSS officials publicly ridiculed David Medeiros during ABI Waiver Program forums, excluding him from discussions critical to Medicaid policy and decision-making. Denial of ADA Accommodations: Refused to provide accessible communication methods, such as email-only correspondence and simplified procedural guidelines, despite documented cognitive challenges from a brain injury. Obstruction of Records Requests: Failed to respond to Freedom of Information Act (FOIA) requests, withheld critical Medicaid documentation, and ignored whistleblower complaints. Retaliation for Whistleblowing: Took retaliatory actions, such as exclusion from forums and non-response to inquiries, after David exposed Medicaid mismanagement and systemic corruption. Connecticut Commission on Human Rights and Opportunities (CHRO): Failure to Investigate: Refused to assign a case number to David's notarized ADA complaint, preventing any investigation into DSS's discriminatory practices. Neglect of Statutory Duties: Ignored repeated follow-up requests for updates on the complaint, effectively obstructing access to justice. Complicity in Discrimination: Enabled DSS's retaliatory actions by failing to act on clear evidence of discrimination and ADA non-compliance. Connecticut Attorney General's Office: Neglect of Oversight Responsibilities: Failed to address or intervene in systemic violations by DSS and CHRO, despite receiving substantial evidence of ADA violations, whistleblower retaliation, and constitutional rights breaches. Shielding State Agencies: Refused to investigate or hold state officials accountable for their misconduct. Federal-Level Actions Department of Justice (DOJ): Failure to Act: Ignored complaints highlighting systemic ADA violations, retaliation against a whistleblower, and constitutional breaches in state-run programs. Deferred Oversight: Allowed Connecticut agencies to operate with impunity by deferring accountability to state authorities.



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	Department of Health and Human Services (HHS): Neglect of ADA Oversight: Failed to enforce ADA compliance within federally funded Medicaid programs despite clear evidence of systemic violations. Lack of Enforcement by OCR: The Office for Civil Rights (OCR) failed to investigate systemic discrimination within Medicaid programs and the actions of DSS. Centers for Medicare & Medicaid Services (CMS): Failure to Address Mismanagement: Neglected to audit or address Medicaid mismanagement under the ABI Waiver Program, enabling further misuse of federal funds and harm to vulnerable populations. Permitting Retaliation: Did not intervene to protect whistleblowers exposing Medicaid corruption. Key Themes of Abuse of Authority: Systemic Retaliation: Agencies targeted David for exposing Medicaid mismanagement and systemic corruption, denying him access to justice and public forums. Weaponized Bureaucr
When did this occur?	Timeline of Occurrence: Abuse of Authority Key Dates and Events October 24, 2024 – Filing of CHRO Complaint: David Medeiros submitted a notarized complaint to CHRO detailing ADA violations and systemic retaliation by DSS. CHRO failed to assign a case number or acknowledge the complaint. October 30, 2024 – Follow-Up with CHRO: David contacted CHRO requesting an update and reiterating the need for a case number. No substantive response or acknowledgment was provided. November 1, 2024 – Appeal to Connecticut Attorney General: Submitted evidence to the Attorney General's Office highlighting DSS's retaliatory actions, ADA violations, and CHRO's inaction. The Attorney General ignored the submission and took no steps to address the complaints. November 10, 2024 – Escalation to Federal Agencies: Detailed complaints submitted to the Department of Justice (DOJ) and the Department of Health and Human Services (HHS) Office for Civil Rights (OCR), citing whistleblower retaliation, ADA non-compl
How did you discover this action?	How This Action Was Discovered David Medeiros discovered the retaliatory actions and discriminatory



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	practices through his direct interactions with state agencies, including CHRO, DSS, and the Attorney General's Office. These interactions were marked by deliberate inaction, procedural barriers, and public exclusion. Key discoveries include: Retaliatory Actions at Public Forums: During ABI Waiver Program discussions, DSS officials publicly ridiculed David and excluded him from critical decision-making processes. These actions were directly observed and documented by David as clear attempts to undermine his advocacy efforts and credibility as a whistleblower. Failure to Respond to ADA Accommodation Requests: Despite repeated requests for reasonable ADA accommodations, including simplified correspondence and email-only communication, DSS and CHRO refused to comply. This non-compliance became evident through continued procedural delays and inaccessible communication methods. CHRO's Refusal to Acknowledge Complaint: After filing a notarized complaint with CHRO on October 24, 2024, David discovered the agency's refusal to assign a case number or take any investigative action. Follow-ups on October 30, 2024, further confirmed CHRO's neglect of its statutory duties. Attorney General's Silence: Evidence submitted to the Connecticut Attorney General's Office on November 1, 2024, was met with complete inaction. David discovered the lack of accountability through the Attorney General's failure to respond to his submissions. Federal Inaction by DOJ and HHS OCR: Complaints escalated to the DOJ and HHS OCR on November 10, 2024, provided detailed documentation of ADA violations, whistleblower retaliation, and systemic misconduct. The absence of follow-up or enforcement from these federal agencies highlighted their neglect. Obstructed FOIA Requests: DSS and CHRO failed to provide timely responses to FOIA requests, further obstructing David's efforts to obtain transparency regarding Medicaid fund usage and agency accountability. Through these events, David identified a coordinated pattern of retaliation, inaction, and systemic



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	discrimination, underscoring a deliberate effort to suppress his advocacy and whistleblower disclosures.
What additional facts support your allegation?	Additional Facts Supporting the Allegation of Abuse of Authority Documented Retaliation and Public Exclusion: DSS Forum Behavior: During ABI Waiver Program forums, DSS officials publicly ridiculed David Medeiros and excluded him from critical discussions, despite his role as a disability advocate and whistleblower. This retaliation was witnessed by multiple attendees and documented in communication records. Exclusion from Decision-Making Processes: Despite being a key stakeholder and advocate for individuals with disabilities, David was systematically excluded from forums and denied opportunities to provide input on critical Medicaid policies. Failure to Investigate by CHRO: Despite filing a notarized complaint on October 24, 2024, detailing ADA violations and retaliation by DSS, CHRO refused to assign a case number or investigate the allegations. This failure to act highlights CHRO's abdication of its statutory responsibility to protect individuals from discrimination. Attorney General's Refusal to Act: On November 1, 2024, David submitted evidence of misconduct and retaliation to the Connecticut Attorney General's Office. The Attorney General's Office has failed to provide acknowledgment, initiate an investigation, or take any corrective action, enabling ongoing abuses. Pattern of ADA Non-Compliance: Multiple ADA accommodation requests, including email-only correspondence and accessible formats for communication, were systematically denied by DSS and CHRO. This lack of compliance demonstrates a deliberate effort to obstruct David's ability to participate meaningfully in governmental processes. FOIA Obstruction: David submitted FOIA requests to DSS and other agencies to obtain records related to Medicaid fund usage and ABI Waiver Program policies. These requests were either ignored or delayed far beyond statutory deadlines, highlighting a pattern of intentional non-compliance and a lack of transparency. Federal Inaction and Neglect:



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	Complaints escalated to the DOJ and HHS OCR on November 10, 2024, were met with silence. Despite being provided with comprehensive evidence of systemic ADA violations, whistleblower retaliation, and misuse of federal funds, federal agencies failed to investigate or enforce compliance. Exploitation of Disability: Agencies are fully aware of David's traumatic brain injury (TBI) and related cognitive challenges but have weaponized these vulnerabilities by creating procedural barriers, ignoring accommodation requests, and delaying responses. This exploitation underscores the systemic nature of the abuse. Medicaid Mismanagement Concerns: DSS's refusal to disclose Medicaid fund usage, particularly regarding the ABI Waiver Program, raises serious concerns about potential mismanagement or misuse of federal funds. The lack of transparency and retaliatory actions suggest an attempt to shield systemic inefficiencies from public scrutiny. Violation of Whistleblower Protections: David's disclosures of Medicaid mismanagem
Allegation	Danger to Public Health
What action did they take?	Actions Taken by the Individuals and Agencies Connecticut Department of Public Health (DPH) Action: Failed to ensure that public health programs under its jurisdiction comply with ADA standards, particularly for individuals with disabilities accessing Medicaid and ABI Waiver services. Did not intervene or enforce oversight when systemic health access violations were reported. Connecticut Department of Social Services (DSS) Action: Publicly ridiculed and excluded David Medeiros during ABI Waiver forums, violating his constitutional rights to free speech and equal participation. Obstructed transparency by refusing to provide records related to Medicaid policies, ABI Waiver management, and whistleblower reports. Failed to provide legally mandated ADA accommodations, including accessible communication formats and reasonable procedural modifications. Actively retaliated against David Medeiros for whistleblowing on Medicaid mismanagement and



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	systemic corruption. Connecticut Attorney General's Office Action: Ignored formal complaints and evidence of systemic failures, including ADA violations and retaliation against David Medeiros. Declined to intervene or enforce legal obligations despite the evidence provided, effectively enabling state agencies to continue discriminatory and retaliatory practices. Connecticut Commission on Human Rights and Opportunities (CHRO) Action: Refused to assign a case number to David Medeiros' notarized discrimination complaint, obstructing access to justice. Failed to investigate ADA violations and retaliation claims, violating its statutory mandate to uphold anti-discrimination laws. Ignored follow-up communications requesting updates on the status of the complaint. U.S. Department of Health and Human Services (HHS), Office for Civil Rights (OCR) Action: Failed to enforce ADA compliance in federally funded Medicaid programs administered by Connecticut DSS. Did not investigate complaints of systemic discrimination or Medicaid mismanagement despite federal jurisdiction. U.S. Department of Justice (DOJ), Civil Rights Division Action: Neglected to act on formal complaints of ADA violations, whistleblower retaliation, and constitutional rights infringements, despite its federal enforcement responsibilities. Allowed Connecticut agencies to continue operating without accountability for systemic misconduct. Federal Elected Officials (Senators and Representatives) Action: Did not advocate for or initiate federal oversight of Connecticut's Medicaid program or address the systemic discrimination and retaliation against whistleblowers. Summary of Retaliatory and Obstructive Actions Systemic exclusion of David Medeiros from public forums and decision-making processes. Suppression of whistleblower allegations through procedural delays, inaction, and retaliation. Weaponization of David's brain injury by refusing ADA-mandated accommodations, effectively silencing his advocacy. Mismanagement of Medicaid funds and denial of transparen



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When did this occur?	Timeline of Events October 24, 2024 – Filing of CHRO Complaint David Medeiros submitted a notarized complaint to the Connecticut Commission on Human Rights and Opportunities (CHRO) regarding ADA violations, discrimination, and retaliation by DSS. October 30, 2024 – Follow-Up with CHRO David followed up with CHRO to request a case number and a status update on his complaint. CHRO failed to respond or provide the requested case number. November 1, 2024 – Appeal to Connecticut Attorney General's Office David submitted evidence and a formal appeal to the Connecticut Attorney General, outlining DSS misconduct, CHRO inaction, and systemic ADA violations. The Attorney General ignored this submission. November 10, 2024 – Complaint Escalation to Federal Agencies David submitted formal complaints to the U.S. Department of Justice (DOJ) Civil Rights Division and the Office for Civil Rights (OCR) under the Department of Health and Human Services (HHS). These complaints detailed ADA violations,
How did you discover this action?	David Medeiros uncovered these actions through personal experiences as a whistleblower, disability advocate, and Medicaid stakeholder. Key discoveries include: Direct Personal Experience: While engaging with the Connecticut Department of Social Services (DSS) as a whistleblower and advocate for the ABI Waiver Program, David directly experienced public ridicule, exclusion from forums, and systemic retaliation. Documented Evidence: David submitted formal complaints to the Connecticut Commission on Human Rights and Opportunities (CHRO) and other agencies, only to receive no substantive responses or assigned case numbers, highlighting systemic failures. Procedural Barriers: Through attempts to obtain information via the Freedom of Information Act (FOIA) and ADA accommodation requests, David encountered procedural delays, denials, and refusals to provide accessible formats. Patterns of Neglect and Retaliation: The lack of federal enforcement from agencies such as the DOJ and



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	HHS OCR revealed systemic inaction and a pattern of neglect, particularly against individuals with disabilities and whistleblowers. Community Feedback and Advocacy Efforts: David learned of similar patterns of exclusion and systemic failures from other whistleblowers, Medicaid recipients, and disability advocates, further corroborating his findings. These cumulative experiences and observations provided David with irrefutable evidence of systemic wrongdoing, gross mismanagement, and abuse of authority.
What additional facts support your allegation?	5. What Additional Facts Support Your Allegation? Documented Complaints and Correspondence: Multiple formal complaints were submitted to the Connecticut Commission on Human Rights and Opportunities (CHRO), Connecticut Department of Social Services (DSS), Office of the Connecticut Attorney General, and federal agencies like the Department of Justice (DOJ) and Health and Human Services Office for Civil Rights (HHS OCR). These complaints document allegations of ADA violations, whistleblower retaliation, and systemic mismanagement. CHRO's refusal to assign case numbers or investigate further substantiates a pattern of inaction. ADA Violations and Procedural Barriers: Agencies failed to provide ADA-mandated accommodations, such as email-only communication, simplified correspondence, and accessible formats. These violations demonstrate a deliberate disregard for federal disability rights laws, including the Americans with Disabilities Act (ADA) and the Rehabilitation Act (Section 504). Retaliatory Actions: DSS officials publicly ridiculed David Medeiros during ABI Waiver Program forums, excluded him from critical discussions, and obstructed his access to essential records and accommodations. These retaliatory actions were intended to discredit David and suppress his advocacy. FOIA and Transparency Failures: David's FOIA requests seeking information on Medicaid fund usage, including ABI Waiver program details, were ignored or delayed, violating transparency laws under 5 U.S.C. § 552 and Connecticut FOIA statutes (C.G.S. § 1-200 et seq.).



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	Testimonies and Community Evidence: Accounts from other disability advocates, Medicaid recipients, and whistleblowers corroborate systemic issues within Connecticut's state agencies, particularly DSS and CHRO. Patterns of retaliation, neglect, and obstruction have been consistently reported. Systemic Mismanagement of Medicaid Funds: DSS's refusal to disclose Medicaid fund usage, particularly in relation to the ABI Waiver Program, raises concerns about potential misuse or gross mismanagement of public funds intended to serve vulnerable populations. Federal Inaction and Knowledge of Disability: Federal agencies, including the DOJ and HHS OCR, were alerted to the systemic failures and retaliatory practices, but no substantive action has been taken. This inaction, despite full knowledge of David's traumatic brain injury and ADA-related needs, compounds the harm. Impact on Public Health and Safety: Neglecting ADA compliance and whistleblower protections undermines public trust, threatens the integrity of federally funded programs, and endangers Medicaid beneficiaries reliant on these services for health and safety. These facts collectively establish a pattern of systemic neglect, retaliation, and corruption within Connecticut state agencies and the failure of federal oversight bodies to intervene effectively.
Allegation	Gross Waste of Funds
What action did they take?	2. What Action Did They Take? The individuals and entities listed above engaged in actions or failed to act in ways that facilitated or perpetuated gross waste of public funds. Specifically: Connecticut Department of Social Services (DSS): Improper Use of Medicaid Funds: Failed to allocate Medicaid funds appropriately within the Acquired Brain Injury (ABI) Waiver Program. Funds intended for critical care were mismanaged, diverted, or left unaccounted for. Neglected oversight of contracts and services provided to vulnerable populations, resulting in inefficiencies, waste, and potentially fraudulent activity. Inadequate Financial Reporting: Deliberately delayed or withheld accurate financial



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	reports related to Medicaid expenditures, violating transparency and federal compliance obligations. Failure to Conduct Internal Audits: Ignored requirements to investigate and audit financial practices within the ABI Waiver Program and other DSS-administered Medicaid services. Connecticut Office of Policy and Management (OPM): Approval of Questionable Allocations: Authorized state budgets and Medicaid expenditures without proper accountability mechanisms to track the use of funds. Failure to Address Known Inefficiencies: Despite financial distress and known concerns about Medicaid mismanagement, OPM failed to implement corrective measures to reduce waste or increase oversight. Connecticut General Assembly (CGA): Inadequate Legislative Oversight: Failed to hold DSS accountable during budget reviews or Medicaid oversight hearings, enabling wasteful practices to continue unchecked. Refusal to Investigate Complaints: Ignored whistleblower reports and advocacy efforts highlighting systemic Medicaid mismanagement and wasteful spending. State Comptroller's Office: Failure to Monitor Spending: Did not ensure proper documentation or auditing of Medicaid disbursements, including those related to the ABI Waiver Program. Neglect of Transparency Requirements: Omitted mandatory public disclosures that would expose financial mismanagement. Federal Oversight Bodies: Centers for Medicare & Medicaid Services (CMS): Failed to audit or investigate Connecticut's Medicaid program despite clear indicators of mismanagement. U.S. Department of Health and Human Services (HHS): Did not enforce federal requirements for accountability in state-administered Medicaid programs, allowing systemic waste to persist. Office of the Inspector General (OIG), HHS: Neglected its duty to investigate potential fraud, waste, and abuse in Connecticut's use of Medicaid funds, particularly those impacting vulnerable populations. Other Actions Taken: Retaliation Against Whistleblowers: Suppressed complaints and retaliated against individuals, including



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	David Medeiros, who attempted to expose wasteful practices or seek transparency. Deliberate Obfuscation of Records: Withheld or failed to provide critical financial documents and records in response to Freedom of Information Act (FOIA) requests
When did this occur?	When Did This Occur? The gross waste of public funds by the listed individuals and entities occurred over an extended period, spanning several years. Key timeframes include: Ongoing Mismanagement of Medicaid Funds Mismanagement within the Acquired Brain Injury (ABI) Waiver Program and other Medicaid services has persisted for at least the past five years, with notable escalation from 2020 through 2024 as whistleblower reports and advocacy efforts exposed systemic issues. Retaliatory and Obstructive Actions Retaliation against David Medeiros began following his whistleblower activities in 2022 and has continued through 2024. These actions coincided with: Reports submitted to Connecticut DSS regarding Medicaid mismanagement. Complaints filed with the Connecticut Commission on Human Rights and Opportunities (CHRO) in 2023 and 2024. Failure of Oversight Bodies The Centers for Medicare & Medicaid Services (CMS) and the U.S. Department of Health and Human Services (HHS) failed to act on
How did you discover this action?	How Did You Discover This Action? David Medeiros, as a whistleblower, disability advocate, and founder of ABI Resources, uncovered these actions through firsthand involvement, research, and communication with affected populations. The following outlines how these actions were discovered: Direct Involvement in Advocacy and Reporting: As a Medicaid Acquired Brain Injury Waiver (ABI Waiver) provider, David observed consistent mismanagement, delays, and non-compliance with Medicaid policies, impacting vulnerable populations reliant on these services. His firsthand interactions with Connecticut Department of Social Services (DSS) officials revealed systemic failures in the administration of funds, refusal to provide transparency, and retaliatory practices against those raising concerns. Complaints Filed and



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	Ignored: After filing formal complaints with DSS, CHRO, and other state agencies, David noted repeated refusals to assign case numbers, investigate allegations, or address the reported issues, indicating procedural obstructions and systemic retaliation. Follow-ups with state and federal oversight bodies, including HHS OCR and DOJ, yielded no action, further exposing a coordinated effort to suppress whistleblowers. Testimonies from Affected Populations: Through his work with ABI Resources, David received testimonies from individuals and families, highlighting delayed Medicaid services, discriminatory practices, and inaccessible public forums for those with disabilities. These accounts confirmed widespread financial inefficiencies and administrative failures within state programs. Analysis of FOIA Responses and Obstructions: Requests for Medicaid fund records under FOIA (5 U.S.C. § 552) were delayed, denied, or inadequately addressed, further revealing the deliberate suppression of transparency regarding the misuse of federal and state funds. DSS and CHRO's refusal to provide complete, timely, and accurate information raised significant concerns about financial mismanagement. Patterns of Retaliation: Retaliation against David personally—including public ridicule, exclusion from forums, and denial of accommodations—demonstrated a coordinated effort to silence his whistleblower activities. Escalation to Federal Agencies: Escalation to DOJ and HHS OCR in 2023 and 2024 confirmed federal inaction despite substantial evidence of systemic violations, indicating complicit neglect or deferral of oversight.
What additional facts support your allegation?	What Additional Facts Support Your Allegation? The following additional facts substantiate the allegations of gross waste of funds, mismanagement, and retaliatory practices by Connecticut state agencies and the federal inaction that has allowed these violations to persist: Documented FOIA Non-Compliance and Withheld Records: Numerous FOIA requests filed with the Connecticut Department of Social Services (DSS) and



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	other agencies remain unanswered, delayed, or improperly denied. Refusal to disclose Medicaid spending records and program oversight audits has raised concerns about the misallocation of funds and deliberate suppression of accountability. The lack of transparency violates FOIA (5 U.S.C. § 552) and creates a strong presumption of financial mismanagement. Patterns of Financial Irregularities in Medicaid Waiver Programs: Analysis of publicly available records and reports from Medicaid beneficiaries highlights delays and denials in services promised under the ABI Waiver Program, indicating misuse or diversion of federal funds. Families and individuals reliant on Medicaid services have reported prolonged processing times and inadequate resource allocation, suggesting systemic inefficiencies. Unaddressed Whistleblower Retaliation: David Medeiros faced public ridicule, exclusion, and retaliation for raising concerns about Medicaid mismanagement. These actions deter further scrutiny of DSS's practices and reinforce a culture of impunity. State agencies have ignored whistleblower protections outlined in the Whistleblower Protection Act (5 U.S.C. § 2302), further preventing transparency. Testimonies from Affected Individuals: Accounts from Medicaid beneficiaries and families describe delays in essential healthcare services and unexplained denials of claims, which directly contradict the program's intended purpose and funding requirements. Repeated Procedural Obstructions: DSS's refusal to issue detailed responses to formal complaints and case filings obstructs accountability efforts. The CHRO's refusal to assign case numbers prevents investigations into discrimination and non-compliance with ADA standards. Attorney General's Office inaction demonstrates systemic neglect, enabling DSS to continue its harmful practices unchecked. Expert Reports and Audits Ignored: Calls for independent audits of DSS's Medicaid programs have been ignored or dismissed, raising concerns about financial mismanagement and failure to adhere to federal funding regulations. Violation



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	of Federal Oversight Obligations: Federal agencies, including HHS OCR and the DOJ, have failed to enforce ADA compliance or investigate allegations of systemic corruption, allowing ongoing violations to harm vulnerable populations. Exploitation of Disability Challenges: David Medeiros, a brain injury survivor, has faced procedural barriers intentionally designed to exploit his cognitive challenges, such as refusal to provide accessible communication formats or simplified processes requ

DISCLOSURE SUBJECTS

Name of individual you believe is responsible for the wrongdoing disclosed.

First Name	Last Name	Title	Chain of Command
Kristen	Clarke	U.S. Department of Justice (DOJ), Civil Rights Division:	Assistant Attorney General: Kristen Clarke Directly oversees enforcement of civil rights laws, inclu
Melanie Fontes Rainer	Melanie Fontes Rainer	U.S. Department of Health and Human Services (HHS), Office for Civil Rights (OCR): Director:	Responsible for enforcing ADA and Section 504 of the Rehabilitation Act within federally funded heal
William Tong	William Tong	Connecticut Office of the Attorney General:	Primary legal officer for Connecticut, responsible for ensuring state agencies comply with constitut
Andrea Barton Reeves	Andrea Barton Reeves	Connecticut Department of Social Services	Oversees Medicaid administration and implementation of programs



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		(DSS): Commissioner:	such as the ABI Waiver, directly tie
Tanya A. Hughes	Tanya A. Hughes	Connecticut Commission on Human Rights and Opportunities (CHRO): Executive Director:	Investigates discrimination complaints, including ADA violations, but has shown inaction in your cas
Henry J. Kerner	Henry J. Kerner	U.S. Office of Special Counsel (OSC): Special Counsel:	Investigates whistleblower retaliation and reports of government wrongdoing.
Julie Su	Julie Su	U.S. Department of Labor (DOL):	Responsible for oversight of workplace ADA compliance and protections for individuals with disabilit
Chiquita Brooks- LaSure	Chiquita Brooks- LaSure	Centers for Medicare & Medicaid Services (CMS): Administrator:	Responsible for federal oversight of Medicaid programs, including ensuring state compliance with fed
Ned Lamont	Ned Lamont	Governor of Connecticut:	The executive authority overseeing state agencies, including DSS and CHRO, with the power to order r
Dr. Manisha Juthani	Dr. Manisha Juthani	Connecticut Department of Public Health (DPH):	Ensures state compliance with health-related ADA requirements and public health safety.
Gary Winfield	Gary Winfield	Connecticut General Assembly, Judiciary Committee:	Legislative oversight for state agency practices, including transparency, civil rights compliance, a



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Andrés J. Gallegos	Andrés J. Gallegos	National Council on Disability (NCD): Chair:	Federal agency advising the President and Congress on disability policies, including ADA compliance
Alina M. Semo	Alina M. Semo	Office of Government Information Services (OGIS): Director:	Mediates FOIA disputes and ensures transparency in government operations.
Gene L. Dodaro	Gene L. Dodaro	U.S. Government Accountability Office (GAO): Comptroller General	Investigates misuse of federal funds and systemic inefficiencies in federally funded programs like M
Andrea Barton Reeves	Andrea Barton Reeves	Connecticut Department of Social Services (DSS): Leadership: Commissioner	Connecticut Department of Social Services (DSS): Leadership: Commissioner
Tanya Hughes	Tanya Hughes	Connecticut Commission on Human Rights and Opportunities (CHRO): Leadership: Executive Director	Connecticut Commission on Human Rights and Opportunities (CHRO): Leadership: Executive Director
William Tong	William Tong	Connecticut Attorney General's Office: Leadership: Attorney General	Connecticut Attorney General's Office: Leadership: Attorney General



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Kristen Clarke	Kristen Clarke	U.S. Department of Justice (DOJ), Civil Rights Division: Leadership: Assistant Attorney General	U.S. Department of Justice (DOJ), Civil Rights Division: Leadership: Assistant Attorney General
Melanie Fontes Rainer	Melanie Fontes Rainer	U.S. Department of Health and Human Services (HHS), Office for Civil Rights (OCR): Leadership: Dire	U.S. Department of Health and Human Services (HHS), Office for Civil Rights (OCR): Leadership: Dire
Ned Lamont	Ned Lamont	State of Connecticut Leadership: Governor	State of Connecticut Leadership: Governor
Jeffrey Beckham	Jeffrey Beckham	Connecticut Office of Policy and Management (OPM): Secretary	Oversees budget and funding allocation, including Medicaid funds. Negligence or failure to ensure pr
Dr. Manisha Juthani	Dr. Manisha Juthani	Connecticut Department of Public Health (DPH): Commissioner	Connecticut Department of Public Health (DPH): Commissioner
Colleen M. Murphy	Colleen M. Murphy	Executive Director and General Counsel	Connecticut Freedom of Information Commission (FOIC):



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Martin M. Looney	Martin M. Looney	Connecticut General Assembly (CGA): Senate President Pro Tempore	Responsible for legislative oversight of state agencies like DSS and CHRO. Inaction or failure to in
Matthew Ritter	Matthew Ritter	House Speaker	Responsible for legislative oversight of state agencies like DSS and CHRO. Inaction or failure to in
Chiquita Brooks-LaSure	Chiquita Brooks-LaSure	Centers for Medicare & Medicaid Services (CMS): Administrator	Centers for Medicare & Medicaid Services (CMS): Administrator
Charlotte Burrows	Charlotte Burrows	U.S. Equal Employment Opportunity Commission (EEOC):	U.S. Equal Employment Opportunity Commission (EEOC): Chair
Henry Kerner	Henry Kerner	Office of Special Counsel (OSC):	ederal oversight for whistleblower complaints. If whistleblower disclosures were ignored or mishandl
Gene L. Dodaro	Gene L. Dodaro	U.S. Government Accountability Office (GAO): Comptroller General	U.S. Government Accountability Office (GAO): Comptroller General
Christi A. Grimm	Christi A. Grimm	Office of Inspector General (OIG), Department of Health and Human Services:	OIG is tasked with investigating fraud, waste, and abuse in federally funded programs like Medicaid.



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		Inspector General	
Deidre S. Gifford	Deidre S. Gifford	Commissioner, Connecticut Department of Social Services (DSS)	Oversaw the agency's discriminatory practices, denial of ADA accommodations, and retaliatory actions
Tanya Hughes	Tanya Hughes	Executive Director, Connecticut Commission on Human Rights and Opportunities (CHRO)	Failed to ensure the investigation of complaints, neglected to assign case numbers, and ignored stat
William Tong	William Tong	Connecticut Attorney General	Ignored evidence of systemic failures and violations, failing to intervene or hold DSS and CHRO acco
Merrick B. Garland	Merrick B. Garland	U.S. Attorney General, Department of Justice (DOJ)	U.S. Attorney General, Department of Justice (DOJ)
Xavier Becerra	Xavier Becerra	Secretary, U.S. Department of Health and Human Services (HHS)	Neglected oversight responsibilities related to ADA compliance within Medicaid-funded programs.
Chiquita Brooks-LaSure	Chiquita Brooks-LaSure	Administrator, Centers for Medicare & Medicaid Services (CMS)	Role: Allowed systemic Medicaid mismanagement and misuse of federal funds without intervention.
Lisa J. Pino	Lisa J. Pino	Director, Office for Civil Rights (OCR), HHS	Failed to enforce ADA compliance and investigate systemic discrimination and retaliatory practices w



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Manisha Juthani, MD	Manisha Juthani, MD	Commissioner, Connecticut Department of Public Health (DPH)	Oversees public health policies and programs, potentially involved in Medicaid oversight and ADA com
Deidre S. Gifford, MD, MPH	Deidre S. Gifford, MD, MPH	Commissioner, Connecticut Department of Social Services (DSS)	Commissioner, Connecticut Department of Social Services (DSS)
Andrea	Barton Reeves	Commissioner, Connecticut Department of Social Services (DSS)	Commissioner, Connecticut Department of Social Services (DSS)
William Tong	William Tong	Attorney General, State of Connecticut	Legal oversight of state agencies, failed to act on documented violations and complaints
Tanya Hughes	Tanya Hughes	Executive Director, Connecticut Commission on Human Rights and Opportunities (CHRO)	Executive Director, Connecticut Commission on Human Rights and Opportunities (CHRO)
Xavier Becerra	Xavier Becerra	Secretary, U.S. Department of Health and Human Services (HHS)	Secretary, U.S. Department of Health and Human Services (HHS)
Chiquita Brooks-LaSure	Chiquita Brooks-LaSure	Administrator, Centers for Medicare & Medicaid Services (CMS)	Administrator, Centers for Medicare & Medicaid Services (CMS)



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Kristen Clarke	Kristen Clarke	Assistant Attorney General, Civil Rights Division, U.S. Department of Justice (DOJ)	Assistant Attorney General, Civil Rights Division, U.S. Department of Justice (DOJ)
Robyn M. Colosimo	Robyn M. Colosimo	Acting Special Counsel, U.S. Office of Special Counsel (OSC)	Acting Special Counsel, U.S. Office of Special Counsel (OSC)
Richard Blumenthal	Richard Blumenthal	U.S. Senator for Connecticut	advocate for federal investigations and legislative oversight of state misconduct.
Chris Murphy	Chris Murphy	U.S. Senator for Connecticut	advocate for ensuring ADA compliance and whistleblower protections.
Rosa DeLauro	Rosa DeLauro	U.S. Representative, Connecticut's 3rd District	Focus on federal Medicaid and social services programs.
Andrea Barton Reeves – Commissioner, DSS	Andrea Barton Reeves – Commissioner, DSS	Andrea Barton Reeves – Commissioner, DSS	Andrea Barton Reeves – Commissioner, DSS
Dr. Deidre S. Gifford – Former Commissioner, DSS	Dr. Deidre S. Gifford – Former Commissioner, DSS	Dr. Deidre S. Gifford – Former Commissioner, DSS	Dr. Deidre S. Gifford – Former Commissioner, DSS
Tanya Hughes – Executive Director, CHRO	Tanya Hughes – Executive Director, CHRO	Tanya Hughes – Executive Director, CHRO	Tanya Hughes – Executive Director, CHRO
William Tong – Attorney General, Connecticut	William Tong – Attorney General, Connecticut	William Tong – Attorney	William Tong – Attorney General, Connecticut



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		General, Connecticut	
Chiquita Brooks-LaSure – Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure – Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure – Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure – Administrator, Centers for Medicare & Medicaid Services (CMS)
Xavier Becerra – Secretary, U.S. Department of Health and Human Services (HHS)	Xavier Becerra – Secretary, U.S. Department of Health and Human Services (HHS)	Xavier Becerra – Secretary, U.S. Department of Health and Human Services (HHS)	Xavier Becerra – Secretary, U.S. Department of Health and Human Services (HHS)
Rebecca Bond – Chief, Disability Rights Section, DOJ Civil Rights Division	Rebecca Bond – Chief, Disability Rights Section, DOJ Civil Rights Division	Rebecca Bond – Chief, Disability Rights Section, DOJ Civil Rights Division	Rebecca Bond – Chief, Disability Rights Section, DOJ Civil Rights Division
Governor Ned Lamont – Governor of Connecticut	Governor Ned Lamont – Governor of Connecticut	Governor Ned Lamont – Governor of Connecticut	Governor Ned Lamont – Governor of Connecticut
Jeffrey Beckham – Secretary, OPM	Jeffrey Beckham – Secretary, OPM	Connecticut Office of Policy and Management (OPM):	Connecticut Office of Policy and Management (OPM):
Matthew Ritter – Speaker of the House	Matthew Ritter – Speaker of the House	Connecticut General Assembly (CGA):	Connecticut General Assembly (CGA):



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Martin M. Looney – Senate President	Martin M. Looney – Senate President	Martin M. Looney – Senate President	Responsible for approving state Medicaid budgets and reforms.
Rob Kane	Rob Kane	State Auditors	Tasked with auditing state agencies for financial mismanagement, including Medicaid funds.
John C. Geragosian	John C. Geragosian	State Auditors	Tasked with auditing state agencies for financial mismanagement, including Medicaid funds.
Sean Scanlon	Sean Scanlon	State Comptroller	Monitors DSS Medicaid-related expenditures and financial reporting.
Chiquita Brooks-LaSure – Administrator, CMS	Chiquita Brooks-LaSure – Administrator, CMS	Chiquita Brooks-LaSure – Administrator, CMS	Chiquita Brooks-LaSure – Administrator, CMS
Xavier Becerra – Secretary, HHS	Xavier Becerra – Secretary, HHS	Xavier Becerra – Secretary, HHS	Responsible for monitoring Medicaid mismanagement in Connecticut.
Gene L. Dodaro – Comptroller General of the United States	Gene L. Dodaro – Comptroller General of the United States	Comptroller General of the United States	Leads federal reviews of wasteful practices involving Medicaid funds.
Christi A. Grimm – Inspector General, HHS	Christi A. Grimm – Inspector General, HHS	Christi A. Grimm – Inspector General, HHS	Conducts investigations into Medicaid fraud, waste, and abuse.
Henry J. Kerner – Special Counsel, U.S. Office of Special Counsel (OSC)	Henry J. Kerner – Special Counsel, U.S. Office of Special Counsel (OSC)	Henry J. Kerner – Special Counsel, U.S. Office of Special Counsel (OSC)	Enforces whistleblower protection for those reporting waste or mismanagement.



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REQUESTED OSC ACTION

What action would you like OSC to take?

Request for Federal Representation and Protection to Restore Constitutional Rights
To the U.S. Office of Special Counsel (OSC):

This complaint requires immediate federal representation to protect David Medeiros, a whistleblower, taxpayer advocate, and person with a disability, whose constitutional rights have been systematically violated by Connecticut state agencies. The federal government must act decisively to ensure that David's rights under the First, Fifth, and Fourteenth Amendments, as well as federal statutes like the Americans with Disabilities Act (ADA) and the Whistleblower Protection Act, are restored and protected.

Specific Actions Requested for Representation and Protection

Immediate Federal Representation

Federal Counsel Appointment: Appoint a federally funded attorney or representative to ensure David's constitutional rights are fully protected and enforced.

Direct Oversight of Legal Proceedings: Federal representatives must oversee all ongoing interactions between David and Connecticut agencies to prevent further violations or retaliation.

Protection from Retaliation: Establish safeguards ensuring David is no longer subjected to exclusion, discrimination, or retaliatory actions by state agencies or officials.

Restoration of Constitutional Rights

First Amendment: Reinforce David's right to petition the government for redress of grievances without fear of retaliation or obstruction.

Fifth Amendment: Ensure due process protections are upheld, requiring transparent and timely responses to David's complaints and FOIA requests.

Fourteenth Amendment: Address systemic discrimination and ensure equal protection under the law, particularly as it pertains to David's disability and whistleblower status.

Mandate ADA Compliance and Accessibility

Guarantee Accommodations: Require Connecticut agencies to provide ADA-compliant accommodations, including accessible communication formats and simplified procedures, tailored to David's cognitive needs as a traumatic brain injury survivor.

Independent Audit of ADA Compliance: Conduct a federal audit of ADA adherence within Connecticut's federally funded programs, including DSS's administration of the ABI Waiver Program.



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Federal Oversight to Enforce Accountability

Assign a Federal Monitor: Appoint an independent federal monitor to oversee the actions of Connecticut agencies, ensuring compliance with constitutional and statutory obligations.

Investigate Retaliatory Practices: Launch a federal investigation into retaliatory actions by Connecticut state officials against David Medeiros, holding violators accountable.

Restorative Justice for David Medeiros

Public Acknowledgment: Require Connecticut agencies to publicly acknowledge their violations of David's rights and take corrective action.

Financial Restitution: Compensate David for the personal, professional, and financial harm caused by the systemic violations and retaliatory practices.

Reinstatement of Advocacy Rights: Ensure David's ability to advocate for vulnerable populations, including individuals with disabilities, is fully restored without obstruction or exclusion.

Set a National Precedent

Protect All Whistleblowers: Use David's case to establish stronger federal protections for whistleblowers, ensuring no individual faces similar violations or retaliation in the future.

Strengthen Constitutional Safeguards: Reinforce federal mechanisms to prevent states from undermining constitutional and civil rights.

Systemic Reform Across States: Mandate reforms ensuring all states comply with federal laws protecting taxpayers, individuals with disabilities, and whistleblowers.

Conclusion

David Medeiros has endured severe constitutional violations, systemic discrimination, and targeted retaliation as a whistleblower and disability advocate. The federal government has a moral and legal obligation to represent and protect him, ensuring that his rights are fully restored and upheld.

By providing federal representation and enforcing constitutional and statutory protections, OSC can not only deliver justice for David but also set an enduring example for safeguarding the rights of all Americans, particularly those most vulnerable to systemic failures.

WHERE ELSE DID YOU REPORT THIS MATTER?

I have also disclosed this information to:



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Other Action Type	Action Taken Date

Additional information about reports to Inspectors General, if applicable.

First Name: **Last Name:**

Title:

Address:

Email Address:

Telephone Number:

Case ID #:

a. **What is the status of the matter?**

NOTE: MATTERS INVESTIGATED BY AN OFFICE OF INSPECTOR GENERAL

It is the general policy of OSC not to transmit allegations of wrongdoing to the head of the agency involved if the agency's Office of Inspector General has fully investigated, or is currently investigating, the same allegations.

ATTACHMENTS

Please note that the space available for attachments is limited. Therefore, DO NOT attach every document and email that may be relevant to your claim. You will have an opportunity to make additional submissions at a later date. We recommend limiting attachments to official forms and correspondence that document the action(s) at issue in your disclosure if these documents are relevant to your allegations.

I have attached the following documents to my filing:

File Name
Federal Representation for Justice DB.42.131.Inf. Medeiros Connecticut 11.28.2024 .pdf
DAVID MEDEIROS VS CONNECTICUT DEPARTMENT OF SOCIAL SERVICES DSS CT GOV 10.30.2024 .PDF
10.24.2024 DOJ complaint Submission complete.pdf
DAVID MEDEIROS VS CONNECTICUT DEPARTMENT OF SOCIAL SERVICES DSS CT GOV 10.30.2024 (1).PDF
October 30, 2024 - David Medeiros VS Connecticut Department of Social Services DSS CT gov.docx



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CHRO CASE DSS 24 4 Filed Complaint Against Connecticut DSS Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
CHRO CASE DSS 24 3 Filed Complaint Against Connecticut DSS Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
CHRO CASE DSS 24 2 Filed Complaint Against Connecticut DSS Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
CHRO CASE DSS 24 Filed Complaint Against Connecticut DSS Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
OSCFiling-MedeirosDavid-DI-112620241121.pdf
requests (9).csv
requests (8).csv
requests (7).csv
11.27.2024 Escalated Complaint FOIA Non-Compliance ADA Violations Constitutional Violations and Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
11.27.2024 Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
090620247088 cms No Records Response Letter (1).pdf
01.02.2024 COMPLAINT LETTER.docx
11.23.2024 Binder1.pdf
09.24.2024
Federal Intervention_HHS_OIG_CMS_GAO_DOJ_OCR_Whistleblower_Report_2024.pdf
Comprehensive Grievance Report and Request for Clarity Whistleblower Report Mediciad ABI Waiver Programs.pdf
11.27.2024 ALL MUCKROCK TO DATE Binder1 .pdf
FOIA .zip
01.04.2024 CHRO AUDITS Binder2.pdf
000_2024-10-29 17_24_21.003990+00_00_comm.txt
01.01.2024 2nd FOIA.gov - Freedom of Information Act_ Create a request.pdf
Medeiros Response.pdf
Governor Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
12.14.2023 Dear Matthew S. Antonetti CT DSS .pdf
01.02.2024 COMPLAINT LETTER.docx
2410220 CAR Dismissal .pdf
10.22.2024 10.39 am CHRO Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
2410220 CP Email with Documents 2.4.24.msg
2410220 CAR Dismissal .pdf
2410220 Release of Jurisdiction.pdf



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2410220 CAR Dismissal .pdf
2410220 Answer Part 1 of 2.pdf
2410220 Affidavit.pdf
12.23.2023 CHRO COMPLAINT .docx
Admin-CL (1).pdf
01.26.2024 Binder1.pdf
dss foia ghewtfrg Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
ABI Forum 2024.pdf
12.23.2023 Governor Ned Lamont. David Medeiros ABI Resources Call for Systemic Reform in Response to ADA Accommodation Failures and Disability Discrimination Whistleblower Retaliation Compliance CT DSS COU CHRO .pdf
11.27.2024 ALL MUCKROCK TO DATE Binder1 .pdf

CONSENT

Do you consent to the disclosure of your identify to others outside OSC if it becomes necessary in taking further action on this matter?*

I consent to disclosure of my identity.

Yes

I do not consent to disclosure of my identity. (Even if you do not consent, OSC may disclose your identity if necessary due to an imminent danger to public health or safety or imminent violation of any criminal law. See 5 U.S.C. § 1213(h).)

No

CERTIFICATION

I certify that all of the statements made in this complaint are true, complete, and correct to the best of my knowledge and belief. I understand that a false statement or concealment of a material fact is a criminal offense punishable by a fine, imprisonment, or both. 18 U.S.C. § 1001.*

Yes



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BURDEN: The burden for this collection of information (including the time for reviewing instructions, searching existing data sources, gathering the data needed, and completing and reviewing the form) is estimated to be an average of one hour to submit a disclosure of information alleging agency wrongdoing, one hour and fifteen minutes to submit a complaint alleging a prohibited personnel practice or other prohibited activity, or 30 minutes to submit a complaint alleging prohibited political activity. Please send any comments about this burden estimate, and suggestions for reducing the burden, to the U.S. Office of Special Counsel, General Counsel's Office, 1730 M Street, NW, Suite 218, Washington, DC 20036-4505.

This Disclosure of Information was Received by OSC on: 11/28/2024

PLEASE KEEP A COPY OF YOUR COMPLAINT, ANY SUPPORTING DOCUMENTATION, AND ANY ADDITIONAL ALLEGATIONS THAT YOU SEND TO OSC NOW OR AT ANY TIME WHILE YOUR COMPLAINT IS PENDING. REPRODUCTION CHARGES UNDER THE FREEDOM OF INFORMATION ACT MAY APPLY TO ANY REQUEST YOU MAKE FOR COPIES OF MATERIALS THAT YOU PROVIDED TO OSC.



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IMPORTANT INFORMATION ABOUT FILING A DISCLOSURE

OSC WHISTLEBLOWER DISCLOSURE CHANNEL

Under 5 U.S.C. § 1213 and related provisions, the Office of Special Counsel (OSC) serves as a secure channel for federal employees, former federal employees, and applicants for federal employment with reliable knowledge of the wrongdoing to disclose:

- a violation of law, rule or regulation;
- gross mismanagement;
- gross waste of funds;
- an abuse of authority;
- a substantial and specific danger to public health or safety; and/or
- censorship related to scientific research.

OSC JURISDICTION

OSC has no jurisdiction over disclosures filed by:

- employees of the U.S. Postal Service and the Postal Regulatory Commission;
- members of the armed forces of the United States (*i.e.*, non-civilian military employees);
- state employees operating under federal grants;
- employees of federal contractors;
- other employees or federal agencies that are exempt under federal law; and
- Congressional or judicial branch employees.

ANONYMOUS SOURCES

While OSC will protect the identity of persons who make disclosures, it will not consider anonymous disclosures. If a disclosure is filed by an anonymous source, the disclosure will be referred to the Office of Inspector General in the appropriate agency. OSC will take no further action.

RETALIATION

Do you believe you suffered retaliation by your agency for disclosing wrongdoing? If yes, you may file a complaint of retaliation by navigating back to "My Cases" and selecting "New Complaint." Select Option 1 to complete and submit a Complaint of Prohibited Personnel Practice or other Prohibited Activity (PPPs). *If you have already completed the Complaint of Prohibited Personnel Practice or other Prohibited Activity above, please continue with this Disclosure.* PPPs are employment-related activities that are banned in the federal workforce.



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PPPs generally involve some type of personnel decision or action and may result in personal relief for people who have been subject to a PPP. For example, if we find that you were removed from federal service in retaliation for whistleblowing, OSC may act to get your job back. PPPs can also include allegations of harassment, failure to issue appraisals, and improper hiring. Do not file a disclosure to report retaliation or other PPPs.

CONTACT INFORMATION

Title:

First Name:* David

Middle Initial:

Last Name:* Medeiros

International Address?: No

Address:*

215 Mountain St
Willimantic, CT 06226

Cell Phone Number:

Home Phone Number:

Office Phone Number:

Ext.

Email Address:* aabiwr@live.com

Preferred means of contact:

Email: Yes

Cell phone: No

Home phone: No

Office phone: No

REPRESENTATIVE INFORMATION

Do you have representation? No

Information about representative, if applicable.

First Name:*

Middle Initial:

Last Name:*

International Address?:

Address: *



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Office Phone Number:

Ext.

Cell Phone Number:

Home Phone Number:

Email Address:

EMPLOYMENT INFORMATION

Name of Department/Agency about which you are making a disclosure.

Department:* Justice

Agency:* Office Of The Inspector General

Agency subcomponent: Office of the Inspector General (OIG) For DOJ: Disability Rights
Section For HHS: Office for Civil R

Street Address: 950 Pennsylvania Avenue NW

City: Washington

State: DC

Zip Code: 20201

Employment Status:* Non-Federal Employee (please specify)

Title	Series	Grade

Please provide your dates of employment in this position.

Employment Service Type	Employment Service Subtype	If Other (specify)
Excepted Service	Other	Private Citizen, Advocate, and Whistleblower
Other	Other	Private Citizen, Advocate, and Whistleblower

Are you covered by a collective bargaining agreement?



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DETAILS OF YOUR DISCLOSURES

Please identify the type of wrongdoing that you are alleging. You can make multiple disclosures, but you **MUST** choose one option. If you check "violation of law, rule, or regulation," specify, if you can, the particular law, rule or regulation violated (by name, subject, and/or legal citation). For each allegation, please answer the following questions (be as specific as possible). Please keep in mind that you will have an opportunity to provide more information and someone from OSC will contact you.

If OSC determines there is a substantial likelihood of wrongdoing, OSC will refer your disclosures to the involved agency for an investigation and report. To meet the substantial likelihood standard, there must be a significant probability that the information reveals wrongdoing that falls within one or more of the categories above. In its evaluation, OSC considers the strength, reliability, and credibility of the disclosures. If the substantial likelihood determination cannot be made, OSC will determine whether there is sufficient information to exercise its discretion to refer the allegations.

DISCLOSURES

Allegation	Violation of Law, Rule or Regulation
What action did they take?	Actions Taken by the Involved Parties 1. Connecticut Department of Social Services (DSS): - Publicly ridiculed and excluded David Medeiros during ABI Waiver forums, violating ADA and First Amendment protections. - Refused to provide ADA-mandated accommodations, including accessible communication formats and simplified processes. - Obstructed access to critical information about Medicaid programs, including ABI Waiver policies, in violation of FOIA. - Retaliated against David Medeiros for whistleblowing on systemic Medicaid mismanagement. 2. Connecticut Commission on Human Rights and Opportunities (CHRO): - Refused to assign a case number or investigate David's notarized complaint alleging ADA violations and discrimination by DSS. - Ignored follow-up inquiries regarding the status of the complaint, denying due process and perpetuating



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	discrimination. 3. Connecticut Attorney General's Office: • Failed to act on evidence submitted by David Medeiros regarding DSS misconduct and CHRO's inaction. • Neglected its statutory duty to uphold constitutional and civil rights protections in Connecticut, effectively enabling systemic violations. 4. U.S. Department of Justice (DOJ), Civil Rights Division: • Ignored David's formal complaints regarding ADA violations, whistleblower retaliation, and systemic corruption within Connecticut's Medicaid program. • Failed to investigate or enforce federal protections, allowing violations to persist unchecked. 5. U.S. Department of Health and Human Services (HHS), Office for Civil Rights (OCR): • Did not investigate systemic ADA violations in Connecticut's Medicaid program, despite clear evidence of non-compliance and harm to individuals with disabilities. 6. Connecticut Governor's Office: • Failed to intervene or provide oversight of DSS and CHRO despite being alerted to systemic violations and retaliation against David Medeiros. 7. Centers for Medicare & Medicaid Services (CMS): • Did not enforce federal Medicaid oversight to ensure that Connecticut DSS complies with federal regulations and ADA mandates. Summary of Actions: • Exclusion: Agencies excluded David from forums and processes critical to his advocacy and whistleblower activities. • Retaliation: State and federal actors retaliated against David for exposing Medicaid mismanagement, violating whistleblower protections. • Non-Compliance: Agencies failed to uphold ADA requirements and constitutional rights, creating systemic barriers and procedural delays. • Neglect: Federal oversight bodies deferred action, enabling Connecticut agencies to act with impunity. Constitutional Violations and Crimes Committed 12. First Amendment Violations • Suppression of Petition Rights: By ignoring David Medeiros' complaints and failing to investigate or act on his claims, Connecticut state agencies and federal oversight bodies have



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	suppressed his constitutional right to petition the government for redress of grievances. • Retaliation Against Free Speech: Retaliatory actions, such a
When did this occur?	Timeline of Events October 24, 2024 – Filing of CHRO Complaint David Medeiros submitted a notarized complaint to the Connecticut Commission on Human Rights and Opportunities (CHRO), detailing ADA violations, systemic discrimination, and retaliation by the Connecticut Department of Social Services (DSS). October 30, 2024 – Follow-Up with CHRO David requested a status update and assignment of a case number for his complaint. CHRO failed to respond, creating procedural barriers to justice. November 1, 2024 – Appeal to Connecticut Attorney General David escalated his complaints to the Connecticut Attorney General's Office, providing evidence of systemic violations and requesting oversight of DSS and CHRO. The Attorney General's Office did not respond or take any action. November 10, 2024 – Submission to DOJ David submitted a comprehensive complaint to the U.S. Department of Justice (DOJ), detailing ADA violations, constitutional breaches, whistleblower retaliation, and systemic mismana
How did you discover this action?	3. When did this occur? ChatGPT said: Timeline of Events October 24, 2024 – Filing of CHRO Complaint David Medeiros submitted a notarized complaint to the Connecticut Commission on Human Rights and Opportunities (CHRO), detailing ADA violations, systemic discrimination, and retaliation by the Connecticut Department of Social Services (DSS). October 30, 2024 – Follow-Up with CHRO David requested a status update and assignment of a case number for his complaint. CHRO failed to respond, creating procedural barriers to justice. November 1, 2024 – Appeal to Connecticut Attorney General David escalated his complaints to the Connecticut Attorney General's Office, providing evidence of systemic violations and requesting oversight of DSS and CHRO. The Attorney General's Office did not respond or take any action. November 10, 2024 –



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	Submission to DOJ David submitted a comprehensive complaint to the U.S. Department of Justice (DOJ), detailing ADA violations, constitutional breaches, whistleblower retaliation, and systemic mismanagement by Connecticut agencies. Despite the urgency, the DOJ failed to initiate an investigation or enforce compliance. November 28, 2024 – Current Status CHRO: Refuses to assign a case number or act on David’s complaint, obstructing due process. Connecticut Attorney General: Has ignored all communications, abdicating responsibility for overseeing state agency compliance. DOJ: Has not taken substantive action to investigate federal violations or ensure ADA compliance. HHS OCR: Remains unresponsive despite its mandate to enforce ADA compliance and Medicaid program integrity. These violations and inactions have created a continuous pattern of systemic neglect and retaliation against David Medeiros, with no resolution or accountability to date. You said: 4. How did you discover this action? ChatGPT said: How the Action Was Discovered David Medeiros, as a whistleblower and disability advocate, discovered the actions through direct personal experience and documentation, which include: Personal Experience with Discrimination and Retaliation David experienced firsthand acts of exclusion, public ridicule, and procedural barriers during interactions with Connecticut Department of Social Services (DSS) officials. For example: He was excluded from critical discussions related to the ABI Waiver Program. He was subjected to public ridicule during forums, despite being a known advocate for individuals with disabilities and a whistleblower exposing Medicaid mismanagement. Documented Failures of State Agencies David submitted a notarized complaint to the Connecticut Commission on Human Rights and Opportunities (CHRO) detailing ADA violations and retaliation. However, CHRO failed to acknowledge the complaint, assign a case number, or investigate the allegations, creating procedural obstacles. Evidence of Inaction by the Connecticut Attorney General Despite



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	escalating the matter and providing comprehensive evidence of systemic failure
What additional facts support your allegation?	Additional Facts Supporting the Allegation Documented Failures by State Agencies Connecticut Commission on Human Rights and Opportunities (CHRO): David Medeiros submitted a notarized complaint to CHRO on October 24, 2024, detailing ADA violations and systemic retaliation by DSS. CHRO failed to: Assign a case number. Investigate the allegations. Provide any substantive acknowledgment or response, violating its statutory mandate to investigate discrimination complaints. This procedural inaction obstructs justice and denies David's right to due process. Connecticut Department of Social Services (DSS) Retaliation: DSS officials publicly ridiculed David during ABI Waiver forums and excluded him from critical discussions, despite his role as a whistleblower and disability advocate. DSS has refused to provide reasonable ADA accommodations, including accessible communication formats (e.g., email-only correspondence), in direct violation of the ADA and Section 504 of the Rehabilitation Act. Inaction by the Connecticut Attorney General's Office: Despite receiving evidence of systemic ADA violations, whistleblower retaliation, and Medicaid mismanagement, the Attorney General's Office failed to investigate or respond, abdicating its responsibility to enforce state and federal laws. Federal Oversight Failures: The U.S. Department of Justice (DOJ) and the Department of Health and Human Services Office for Civil Rights (HHS OCR) were notified of systemic ADA violations, whistleblower retaliation, and constitutional breaches in November 2024. Despite this, no federal investigations or enforcement actions have been initiated, perpetuating state agency misconduct. Evidence of ADA Non-Compliance: DSS repeatedly refused David's requests for ADA-compliant communication, such as screen-reader-compatible documents and simplified processes, exacerbating the challenges he faces as a traumatic brain injury (TBI) survivor. Mismanagement of Public Funds: DSS has



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	obstructed transparency regarding Medicaid fund usage, particularly funds allocated to the ABI Waiver Program. This raises significant concerns about potential misuse or mismanagement of taxpayer dollars. Exploitation of Disability: State and federal officials are aware of David's brain injury and cognitive challenges, yet they have exploited his disability by creating procedural barriers and denying accommodations, effectively excluding him from advocacy and justice processes. Pattern of Systemic Corruption and Retaliation: Agencies at both the state and federal levels have demonstrated a clear pattern of protecting their leadership and shielding systemic inefficiencies, corruption, and discrimination, rather than addressing legitimate complaints. By refusing to act on whistleblower disclosures, these agencies have enabled misconduct, eroded public trust, and fostered an environment where accountability is absent. Violation of Transparency Laws: DSS and CHRO have failed to comply with Freedom of Information
Allegation	Gross Mismanagement
What action did they take?	The listed individuals and entities engaged in or facilitated actions that collectively constitute systemic violations of constitutional rights, ADA non-compliance, whistleblower retaliation, and mismanagement of public funds. These actions include: 1. Suppression of Whistleblower Rights and Retaliation DSS (Connecticut Department of Social Services): Publicly ridiculed and excluded David Medeiros from critical forums related to Medicaid and the ABI Waiver Program. Obstructed David's advocacy efforts by withholding ADA-mandated accommodations, such as accessible communication formats and email-only correspondence. Refused to provide requested records or updates, effectively silencing his whistleblowing efforts and suppressing public accountability. CHRO (Commission on Human Rights and Opportunities): Refused to assign a case number to David's notarized complaint, delaying and obstructing justice. Failed to investigate claims of systemic discrimination and retaliation, despite statutory



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	mandates. Connecticut Attorney General's Office: Ignored multiple submissions of evidence regarding DSS misconduct and CHRO's failure to act. Failed to intervene or provide oversight to enforce transparency, ADA compliance, and whistleblower protections. 2. Violations of ADA Protections and Disability Rights DSS: Denied reasonable accommodations to David Medeiros, a traumatic brain injury (TBI) survivor, making it impossible for him to meaningfully participate in public processes. Weaponized David's disability by exploiting his cognitive challenges to create procedural delays, obstruct communication, and undermine his advocacy. CHRO: Failed to enforce ADA and anti-discrimination statutes by not investigating documented violations or taking any corrective actions. Federal Agencies (DOJ, HHS OCR, CMS): Neglected oversight responsibilities to ensure ADA compliance and accessibility in Connecticut's Medicaid program, enabling DSS to continue discriminatory practices unchecked. 3. Mismanagement of Public Funds and Lack of Transparency DSS: Withheld public records related to Medicaid fund allocations, including the ABI Waiver Program, violating FOIA and state transparency laws. Mismanaged Medicaid resources by failing to meet federal ADA standards while continuing to receive federal funding. Federal Agencies (CMS, HHS OCR): Failed to audit or investigate the misuse of Medicaid funds in Connecticut, despite whistleblower complaints highlighting systemic issues. 4. Abuse of Authority and Gross Mismanagement Connecticut Leadership (OPM, Governor's Office): Allowed systemic failures in oversight and enforcement by not addressing persistent complaints of corruption, discrimination, and retaliation. Enabled DSS and CHRO's non-compliance with state and federal laws by failing to enact structural reforms. Federal Agencies (DOJ, OSC): Ignored whistleblower reports and failed to initiate investigations into Connecticut's systemic mismanagement of Medicaid and ADA violat



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When did this occur?	Timeline of Events October 24, 2024 – Filing of CHRO Complaint David Medeiros submitted a notarized complaint to the Connecticut Commission on Human Rights and Opportunities (CHRO), detailing ADA violations, systemic discrimination, and retaliation by the Connecticut Department of Social Services (DSS). October 30, 2024 – Follow-Up with CHRO David requested a case number and an update on the status of his complaint. CHRO failed to respond or assign a case number, effectively obstructing the complaint process. November 1, 2024 – Appeal to Connecticut Attorney General David submitted evidence and documentation to the Connecticut Attorney General's Office, requesting oversight and intervention to address systemic misconduct by DSS and CHRO. The Attorney General's Office ignored the submission and failed to act. November 10, 2024 – Escalation to DOJ David submitted a detailed whistleblower complaint to the U.S. Department of Justice (DOJ), highlighting ADA violations, FOIA non-compliance
How did you discover this action?	Discovery of Actions David Medeiros discovered these actions through firsthand experience and documented interactions with the involved parties. The following key events and observations provided evidence of the actions taken against him: Refusal to Assign a Case Number by CHRO After submitting a notarized complaint to CHRO on October 24, 2024, David received no acknowledgment or case number, despite following up multiple times. The lack of response signaled procedural obstruction and a failure to fulfill CHRO's statutory obligations. Exclusion and Ridicule by DSS During public forums related to the ABI Waiver Program, DSS officials publicly ridiculed and excluded David, creating a hostile environment for his advocacy. Witnesses corroborated these incidents, providing evidence of discriminatory practices. Ignored Submissions to the Attorney General's Office Despite submitting detailed evidence of DSS and CHRO misconduct to the Attorney General on November 1, 2024, no acknowledgment or action was taken. This



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	inaction became apparent when repeated attempts to follow up were ignored. Federal Oversight Failures Complaints to the DOJ and HHS OCR, submitted on November 10, 2024, included comprehensive documentation of ADA violations, whistleblower retaliation, and systemic mismanagement. The absence of substantive action or follow-up from these federal agencies revealed a broader pattern of neglect and inaction. FOIA and ADA Compliance Failures Requests for ADA-compliant communication and public records related to Medicaid funds and the ABI Waiver Program were either ignored or obstructed. These failures were documented through email exchanges, unanswered requests, and a lack of transparent processes. Each discovery is supported by correspondence records, witness testimony, and David's detailed documentation of the systemic barriers and retaliatory practices he encountered. These actions collectively indicate deliberate neglect and systemic discrimination.
What additional facts support your allegation?	Additional Facts Supporting the Allegations Documented Retaliation and Exclusion by DSS: DSS officials publicly ridiculed David Medeiros during ABI Waiver forums, as corroborated by witnesses and documented in communications. These actions created a hostile environment, directly impeding his ability to advocate for Medicaid beneficiaries and individuals with disabilities. DSS failed to provide reasonable accommodations under the ADA, including email-only correspondence and simplified processes, despite David's documented cognitive challenges as a brain injury survivor. CHRO's Failure to Investigate: Despite submitting a notarized complaint on October 24, 2024, and multiple follow-up communications, CHRO refused to assign a case number or initiate an investigation, violating its statutory obligation to investigate discrimination complaints. CHRO's inaction effectively denied David due process and equal protection under the law, prolonging systemic discrimination and retaliation. Attorney General's Office Inaction: Submissions to the Connecticut Attorney



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	General included detailed evidence of DSS's ADA violations and whistleblower retaliation. Despite the compelling nature of the evidence, the office failed to respond, investigate, or intervene. This neglect demonstrates a disregard for its duty to ensure state agency compliance with federal and state laws. Federal Oversight Failures (DOJ and HHS OCR): The Department of Justice and the Office for Civil Rights at HHS were notified of systemic ADA violations, misuse of Medicaid funds, and whistleblower retaliation. Despite comprehensive documentation, neither agency initiated a substantive investigation or provided updates. Federal inaction perpetuates the culture of impunity within Connecticut's state agencies. FOIA and Transparency Failures: DSS obstructed transparency by refusing to provide records related to Medicaid fund usage and ABI Waiver operations, despite FOIA and state FOIA laws mandating timely responses. Requests for ADA-compliant documents and communication were ignored, compounding David's inability to access critical information. Pattern of Systemic Neglect and Corruption: Connecticut's financial reliance on Medicaid creates an incentive to suppress transparency and accountability. The refusal to investigate whistleblower complaints, accommodate disabilities, or ensure compliance highlights a coordinated effort to shield systemic mismanagement. David Medeiros' Vulnerability as a Brain Injury Survivor: Agencies weaponized David's cognitive challenges to create procedural barriers, delay responses, and obstruct justice, further exacerbating the discrimination and retaliation he faced. The refusal to accommodate his needs constitutes a violation of the ADA and Rehabilitation Act, underscoring the systemic failure to protect vulnerable individuals. Summary of Supporting Evidence: Witness testimony from public forums and interactions with DSS officials. Documentation of corresponden
Allegation	Abuse of Authority



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What action did they take?	Actions Taken: Abuse of Authority State-Level Actions Connecticut Department of Social Services (DSS): Public Ridicule and Exclusion: DSS officials publicly ridiculed David Medeiros during ABI Waiver Program forums, excluding him from discussions critical to Medicaid policy and decision-making. Denial of ADA Accommodations: Refused to provide accessible communication methods, such as email-only correspondence and simplified procedural guidelines, despite documented cognitive challenges from a brain injury. Obstruction of Records Requests: Failed to respond to Freedom of Information Act (FOIA) requests, withheld critical Medicaid documentation, and ignored whistleblower complaints. Retaliation for Whistleblowing: Took retaliatory actions, such as exclusion from forums and non-response to inquiries, after David exposed Medicaid mismanagement and systemic corruption. Connecticut Commission on Human Rights and Opportunities (CHRO): Failure to Investigate: Refused to assign a case number to David's notarized ADA complaint, preventing any investigation into DSS's discriminatory practices. Neglect of Statutory Duties: Ignored repeated follow-up requests for updates on the complaint, effectively obstructing access to justice. Complicity in Discrimination: Enabled DSS's retaliatory actions by failing to act on clear evidence of discrimination and ADA non-compliance. Connecticut Attorney General's Office: Neglect of Oversight Responsibilities: Failed to address or intervene in systemic violations by DSS and CHRO, despite receiving substantial evidence of ADA violations, whistleblower retaliation, and constitutional rights breaches. Shielding State Agencies: Refused to investigate or hold state officials accountable for their misconduct. Federal-Level Actions Department of Justice (DOJ): Failure to Act: Ignored complaints highlighting systemic ADA violations, retaliation against a whistleblower, and constitutional breaches in state-run programs. Deferred Oversight: Allowed Connecticut agencies to operate with impunity by deferring accountability to state authorities.



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	Department of Health and Human Services (HHS): Neglect of ADA Oversight: Failed to enforce ADA compliance within federally funded Medicaid programs despite clear evidence of systemic violations. Lack of Enforcement by OCR: The Office for Civil Rights (OCR) failed to investigate systemic discrimination within Medicaid programs and the actions of DSS. Centers for Medicare & Medicaid Services (CMS): Failure to Address Mismanagement: Neglected to audit or address Medicaid mismanagement under the ABI Waiver Program, enabling further misuse of federal funds and harm to vulnerable populations. Permitting Retaliation: Did not intervene to protect whistleblowers exposing Medicaid corruption. Key Themes of Abuse of Authority: Systemic Retaliation: Agencies targeted David for exposing Medicaid mismanagement and systemic corruption, denying him access to justice and public forums. Weaponized Bureaucr
When did this occur?	Timeline of Occurrence: Abuse of Authority Key Dates and Events October 24, 2024 – Filing of CHRO Complaint: David Medeiros submitted a notarized complaint to CHRO detailing ADA violations and systemic retaliation by DSS. CHRO failed to assign a case number or acknowledge the complaint. October 30, 2024 – Follow-Up with CHRO: David contacted CHRO requesting an update and reiterating the need for a case number. No substantive response or acknowledgment was provided. November 1, 2024 – Appeal to Connecticut Attorney General: Submitted evidence to the Attorney General's Office highlighting DSS's retaliatory actions, ADA violations, and CHRO's inaction. The Attorney General ignored the submission and took no steps to address the complaints. November 10, 2024 – Escalation to Federal Agencies: Detailed complaints submitted to the Department of Justice (DOJ) and the Department of Health and Human Services (HHS) Office for Civil Rights (OCR), citing whistleblower retaliation, ADA non-compl
How did you discover this action?	How This Action Was Discovered David Medeiros discovered the retaliatory actions and discriminatory



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	practices through his direct interactions with state agencies, including CHRO, DSS, and the Attorney General's Office. These interactions were marked by deliberate inaction, procedural barriers, and public exclusion. Key discoveries include: Retaliatory Actions at Public Forums: During ABI Waiver Program discussions, DSS officials publicly ridiculed David and excluded him from critical decision-making processes. These actions were directly observed and documented by David as clear attempts to undermine his advocacy efforts and credibility as a whistleblower. Failure to Respond to ADA Accommodation Requests: Despite repeated requests for reasonable ADA accommodations, including simplified correspondence and email-only communication, DSS and CHRO refused to comply. This non-compliance became evident through continued procedural delays and inaccessible communication methods. CHRO's Refusal to Acknowledge Complaint: After filing a notarized complaint with CHRO on October 24, 2024, David discovered the agency's refusal to assign a case number or take any investigative action. Follow-ups on October 30, 2024, further confirmed CHRO's neglect of its statutory duties. Attorney General's Silence: Evidence submitted to the Connecticut Attorney General's Office on November 1, 2024, was met with complete inaction. David discovered the lack of accountability through the Attorney General's failure to respond to his submissions. Federal Inaction by DOJ and HHS OCR: Complaints escalated to the DOJ and HHS OCR on November 10, 2024, provided detailed documentation of ADA violations, whistleblower retaliation, and systemic misconduct. The absence of follow-up or enforcement from these federal agencies highlighted their neglect. Obstructed FOIA Requests: DSS and CHRO failed to provide timely responses to FOIA requests, further obstructing David's efforts to obtain transparency regarding Medicaid fund usage and agency accountability. Through these events, David identified a coordinated pattern of retaliation, inaction, and systemic



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	discrimination, underscoring a deliberate effort to suppress his advocacy and whistleblower disclosures.
What additional facts support your allegation?	Additional Facts Supporting the Allegation of Abuse of Authority Documented Retaliation and Public Exclusion: DSS Forum Behavior: During ABI Waiver Program forums, DSS officials publicly ridiculed David Medeiros and excluded him from critical discussions, despite his role as a disability advocate and whistleblower. This retaliation was witnessed by multiple attendees and documented in communication records. Exclusion from Decision-Making Processes: Despite being a key stakeholder and advocate for individuals with disabilities, David was systematically excluded from forums and denied opportunities to provide input on critical Medicaid policies. Failure to Investigate by CHRO: Despite filing a notarized complaint on October 24, 2024, detailing ADA violations and retaliation by DSS, CHRO refused to assign a case number or investigate the allegations. This failure to act highlights CHRO's abdication of its statutory responsibility to protect individuals from discrimination. Attorney General's Refusal to Act: On November 1, 2024, David submitted evidence of misconduct and retaliation to the Connecticut Attorney General's Office. The Attorney General's Office has failed to provide acknowledgment, initiate an investigation, or take any corrective action, enabling ongoing abuses. Pattern of ADA Non-Compliance: Multiple ADA accommodation requests, including email-only correspondence and accessible formats for communication, were systematically denied by DSS and CHRO. This lack of compliance demonstrates a deliberate effort to obstruct David's ability to participate meaningfully in governmental processes. FOIA Obstruction: David submitted FOIA requests to DSS and other agencies to obtain records related to Medicaid fund usage and ABI Waiver Program policies. These requests were either ignored or delayed far beyond statutory deadlines, highlighting a pattern of intentional non-compliance and a lack of transparency. Federal Inaction and Neglect:



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	Complaints escalated to the DOJ and HHS OCR on November 10, 2024, were met with silence. Despite being provided with comprehensive evidence of systemic ADA violations, whistleblower retaliation, and misuse of federal funds, federal agencies failed to investigate or enforce compliance. Exploitation of Disability: Agencies are fully aware of David's traumatic brain injury (TBI) and related cognitive challenges but have weaponized these vulnerabilities by creating procedural barriers, ignoring accommodation requests, and delaying responses. This exploitation underscores the systemic nature of the abuse. Medicaid Mismanagement Concerns: DSS's refusal to disclose Medicaid fund usage, particularly regarding the ABI Waiver Program, raises serious concerns about potential mismanagement or misuse of federal funds. The lack of transparency and retaliatory actions suggest an attempt to shield systemic inefficiencies from public scrutiny. Violation of Whistleblower Protections: David's disclosures of Medicaid mismanagem
Allegation	Danger to Public Health
What action did they take?	Actions Taken by the Individuals and Agencies Connecticut Department of Public Health (DPH) Action: Failed to ensure that public health programs under its jurisdiction comply with ADA standards, particularly for individuals with disabilities accessing Medicaid and ABI Waiver services. Did not intervene or enforce oversight when systemic health access violations were reported. Connecticut Department of Social Services (DSS) Action: Publicly ridiculed and excluded David Medeiros during ABI Waiver forums, violating his constitutional rights to free speech and equal participation. Obstructed transparency by refusing to provide records related to Medicaid policies, ABI Waiver management, and whistleblower reports. Failed to provide legally mandated ADA accommodations, including accessible communication formats and reasonable procedural modifications. Actively retaliated against David Medeiros for whistleblowing on Medicaid mismanagement and



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	systemic corruption. Connecticut Attorney General's Office Action: Ignored formal complaints and evidence of systemic failures, including ADA violations and retaliation against David Medeiros. Declined to intervene or enforce legal obligations despite the evidence provided, effectively enabling state agencies to continue discriminatory and retaliatory practices. Connecticut Commission on Human Rights and Opportunities (CHRO) Action: Refused to assign a case number to David Medeiros' notarized discrimination complaint, obstructing access to justice. Failed to investigate ADA violations and retaliation claims, violating its statutory mandate to uphold anti-discrimination laws. Ignored follow-up communications requesting updates on the status of the complaint. U.S. Department of Health and Human Services (HHS), Office for Civil Rights (OCR) Action: Failed to enforce ADA compliance in federally funded Medicaid programs administered by Connecticut DSS. Did not investigate complaints of systemic discrimination or Medicaid mismanagement despite federal jurisdiction. U.S. Department of Justice (DOJ), Civil Rights Division Action: Neglected to act on formal complaints of ADA violations, whistleblower retaliation, and constitutional rights infringements, despite its federal enforcement responsibilities. Allowed Connecticut agencies to continue operating without accountability for systemic misconduct. Federal Elected Officials (Senators and Representatives) Action: Did not advocate for or initiate federal oversight of Connecticut's Medicaid program or address the systemic discrimination and retaliation against whistleblowers. Summary of Retaliatory and Obstructive Actions Systemic exclusion of David Medeiros from public forums and decision-making processes. Suppression of whistleblower allegations through procedural delays, inaction, and retaliation. Weaponization of David's brain injury by refusing ADA-mandated accommodations, effectively silencing his advocacy. Mismanagement of Medicaid funds and denial of transparen



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When did this occur?	Timeline of Events October 24, 2024 – Filing of CHRO Complaint David Medeiros submitted a notarized complaint to the Connecticut Commission on Human Rights and Opportunities (CHRO) regarding ADA violations, discrimination, and retaliation by DSS. October 30, 2024 – Follow-Up with CHRO David followed up with CHRO to request a case number and a status update on his complaint. CHRO failed to respond or provide the requested case number. November 1, 2024 – Appeal to Connecticut Attorney General's Office David submitted evidence and a formal appeal to the Connecticut Attorney General, outlining DSS misconduct, CHRO inaction, and systemic ADA violations. The Attorney General ignored this submission. November 10, 2024 – Complaint Escalation to Federal Agencies David submitted formal complaints to the U.S. Department of Justice (DOJ) Civil Rights Division and the Office for Civil Rights (OCR) under the Department of Health and Human Services (HHS). These complaints detailed ADA violations,
How did you discover this action?	David Medeiros uncovered these actions through personal experiences as a whistleblower, disability advocate, and Medicaid stakeholder. Key discoveries include: Direct Personal Experience: While engaging with the Connecticut Department of Social Services (DSS) as a whistleblower and advocate for the ABI Waiver Program, David directly experienced public ridicule, exclusion from forums, and systemic retaliation. Documented Evidence: David submitted formal complaints to the Connecticut Commission on Human Rights and Opportunities (CHRO) and other agencies, only to receive no substantive responses or assigned case numbers, highlighting systemic failures. Procedural Barriers: Through attempts to obtain information via the Freedom of Information Act (FOIA) and ADA accommodation requests, David encountered procedural delays, denials, and refusals to provide accessible formats. Patterns of Neglect and Retaliation: The lack of federal enforcement from agencies such as the DOJ and



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	HHS OCR revealed systemic inaction and a pattern of neglect, particularly against individuals with disabilities and whistleblowers. Community Feedback and Advocacy Efforts: David learned of similar patterns of exclusion and systemic failures from other whistleblowers, Medicaid recipients, and disability advocates, further corroborating his findings. These cumulative experiences and observations provided David with irrefutable evidence of systemic wrongdoing, gross mismanagement, and abuse of authority.
What additional facts support your allegation?	5. What Additional Facts Support Your Allegation? Documented Complaints and Correspondence: Multiple formal complaints were submitted to the Connecticut Commission on Human Rights and Opportunities (CHRO), Connecticut Department of Social Services (DSS), Office of the Connecticut Attorney General, and federal agencies like the Department of Justice (DOJ) and Health and Human Services Office for Civil Rights (HHS OCR). These complaints document allegations of ADA violations, whistleblower retaliation, and systemic mismanagement. CHRO's refusal to assign case numbers or investigate further substantiates a pattern of inaction. ADA Violations and Procedural Barriers: Agencies failed to provide ADA-mandated accommodations, such as email-only communication, simplified correspondence, and accessible formats. These violations demonstrate a deliberate disregard for federal disability rights laws, including the Americans with Disabilities Act (ADA) and the Rehabilitation Act (Section 504). Retaliatory Actions: DSS officials publicly ridiculed David Medeiros during ABI Waiver Program forums, excluded him from critical discussions, and obstructed his access to essential records and accommodations. These retaliatory actions were intended to discredit David and suppress his advocacy. FOIA and Transparency Failures: David's FOIA requests seeking information on Medicaid fund usage, including ABI Waiver program details, were ignored or delayed, violating transparency laws under 5 U.S.C. § 552 and Connecticut FOIA statutes (C.G.S. § 1-200 et seq.).



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	Testimonies and Community Evidence: Accounts from other disability advocates, Medicaid recipients, and whistleblowers corroborate systemic issues within Connecticut's state agencies, particularly DSS and CHRO. Patterns of retaliation, neglect, and obstruction have been consistently reported. Systemic Mismanagement of Medicaid Funds: DSS's refusal to disclose Medicaid fund usage, particularly in relation to the ABI Waiver Program, raises concerns about potential misuse or gross mismanagement of public funds intended to serve vulnerable populations. Federal Inaction and Knowledge of Disability: Federal agencies, including the DOJ and HHS OCR, were alerted to the systemic failures and retaliatory practices, but no substantive action has been taken. This inaction, despite full knowledge of David's traumatic brain injury and ADA-related needs, compounds the harm. Impact on Public Health and Safety: Neglecting ADA compliance and whistleblower protections undermines public trust, threatens the integrity of federally funded programs, and endangers Medicaid beneficiaries reliant on these services for health and safety. These facts collectively establish a pattern of systemic neglect, retaliation, and corruption within Connecticut state agencies and the failure of federal oversight bodies to intervene effectively.
Allegation	Gross Waste of Funds
What action did they take?	2. What Action Did They Take? The individuals and entities listed above engaged in actions or failed to act in ways that facilitated or perpetuated gross waste of public funds. Specifically: Connecticut Department of Social Services (DSS): Improper Use of Medicaid Funds: Failed to allocate Medicaid funds appropriately within the Acquired Brain Injury (ABI) Waiver Program. Funds intended for critical care were mismanaged, diverted, or left unaccounted for. Neglected oversight of contracts and services provided to vulnerable populations, resulting in inefficiencies, waste, and potentially fraudulent activity. Inadequate Financial Reporting: Deliberately delayed or withheld accurate financial



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	reports related to Medicaid expenditures, violating transparency and federal compliance obligations. Failure to Conduct Internal Audits: Ignored requirements to investigate and audit financial practices within the ABI Waiver Program and other DSS-administered Medicaid services. Connecticut Office of Policy and Management (OPM): Approval of Questionable Allocations: Authorized state budgets and Medicaid expenditures without proper accountability mechanisms to track the use of funds. Failure to Address Known Inefficiencies: Despite financial distress and known concerns about Medicaid mismanagement, OPM failed to implement corrective measures to reduce waste or increase oversight. Connecticut General Assembly (CGA): Inadequate Legislative Oversight: Failed to hold DSS accountable during budget reviews or Medicaid oversight hearings, enabling wasteful practices to continue unchecked. Refusal to Investigate Complaints: Ignored whistleblower reports and advocacy efforts highlighting systemic Medicaid mismanagement and wasteful spending. State Comptroller's Office: Failure to Monitor Spending: Did not ensure proper documentation or auditing of Medicaid disbursements, including those related to the ABI Waiver Program. Neglect of Transparency Requirements: Omitted mandatory public disclosures that would expose financial mismanagement. Federal Oversight Bodies: Centers for Medicare & Medicaid Services (CMS): Failed to audit or investigate Connecticut's Medicaid program despite clear indicators of mismanagement. U.S. Department of Health and Human Services (HHS): Did not enforce federal requirements for accountability in state-administered Medicaid programs, allowing systemic waste to persist. Office of the Inspector General (OIG), HHS: Neglected its duty to investigate potential fraud, waste, and abuse in Connecticut's use of Medicaid funds, particularly those impacting vulnerable populations. Other Actions Taken: Retaliation Against Whistleblowers: Suppressed complaints and retaliated against individuals, including



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	David Medeiros, who attempted to expose wasteful practices or seek transparency. Deliberate Obfuscation of Records: Withheld or failed to provide critical financial documents and records in response to Freedom of Information Act (FOIA) requests
When did this occur?	When Did This Occur? The gross waste of public funds by the listed individuals and entities occurred over an extended period, spanning several years. Key timeframes include: Ongoing Mismanagement of Medicaid Funds Mismanagement within the Acquired Brain Injury (ABI) Waiver Program and other Medicaid services has persisted for at least the past five years, with notable escalation from 2020 through 2024 as whistleblower reports and advocacy efforts exposed systemic issues. Retaliatory and Obstructive Actions Retaliation against David Medeiros began following his whistleblower activities in 2022 and has continued through 2024. These actions coincided with: Reports submitted to Connecticut DSS regarding Medicaid mismanagement. Complaints filed with the Connecticut Commission on Human Rights and Opportunities (CHRO) in 2023 and 2024. Failure of Oversight Bodies The Centers for Medicare & Medicaid Services (CMS) and the U.S. Department of Health and Human Services (HHS) failed to act on
How did you discover this action?	How Did You Discover This Action? David Medeiros, as a whistleblower, disability advocate, and founder of ABI Resources, uncovered these actions through firsthand involvement, research, and communication with affected populations. The following outlines how these actions were discovered: Direct Involvement in Advocacy and Reporting: As a Medicaid Acquired Brain Injury Waiver (ABI Waiver) provider, David observed consistent mismanagement, delays, and non-compliance with Medicaid policies, impacting vulnerable populations reliant on these services. His firsthand interactions with Connecticut Department of Social Services (DSS) officials revealed systemic failures in the administration of funds, refusal to provide transparency, and retaliatory practices against those raising concerns. Complaints Filed and



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	Ignored: After filing formal complaints with DSS, CHRO, and other state agencies, David noted repeated refusals to assign case numbers, investigate allegations, or address the reported issues, indicating procedural obstructions and systemic retaliation. Follow-ups with state and federal oversight bodies, including HHS OCR and DOJ, yielded no action, further exposing a coordinated effort to suppress whistleblowers. Testimonies from Affected Populations: Through his work with ABI Resources, David received testimonies from individuals and families, highlighting delayed Medicaid services, discriminatory practices, and inaccessible public forums for those with disabilities. These accounts confirmed widespread financial inefficiencies and administrative failures within state programs. Analysis of FOIA Responses and Obstructions: Requests for Medicaid fund records under FOIA (5 U.S.C. § 552) were delayed, denied, or inadequately addressed, further revealing the deliberate suppression of transparency regarding the misuse of federal and state funds. DSS and CHRO's refusal to provide complete, timely, and accurate information raised significant concerns about financial mismanagement. Patterns of Retaliation: Retaliation against David personally—including public ridicule, exclusion from forums, and denial of accommodations—demonstrated a coordinated effort to silence his whistleblower activities. Escalation to Federal Agencies: Escalation to DOJ and HHS OCR in 2023 and 2024 confirmed federal inaction despite substantial evidence of systemic violations, indicating complicit neglect or deferral of oversight.
What additional facts support your allegation?	What Additional Facts Support Your Allegation? The following additional facts substantiate the allegations of gross waste of funds, mismanagement, and retaliatory practices by Connecticut state agencies and the federal inaction that has allowed these violations to persist: Documented FOIA Non-Compliance and Withheld Records: Numerous FOIA requests filed with the Connecticut Department of Social Services (DSS) and



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	other agencies remain unanswered, delayed, or improperly denied. Refusal to disclose Medicaid spending records and program oversight audits has raised concerns about the misallocation of funds and deliberate suppression of accountability. The lack of transparency violates FOIA (5 U.S.C. § 552) and creates a strong presumption of financial mismanagement. Patterns of Financial Irregularities in Medicaid Waiver Programs: Analysis of publicly available records and reports from Medicaid beneficiaries highlights delays and denials in services promised under the ABI Waiver Program, indicating misuse or diversion of federal funds. Families and individuals reliant on Medicaid services have reported prolonged processing times and inadequate resource allocation, suggesting systemic inefficiencies. Unaddressed Whistleblower Retaliation: David Medeiros faced public ridicule, exclusion, and retaliation for raising concerns about Medicaid mismanagement. These actions deter further scrutiny of DSS's practices and reinforce a culture of impunity. State agencies have ignored whistleblower protections outlined in the Whistleblower Protection Act (5 U.S.C. § 2302), further preventing transparency. Testimonies from Affected Individuals: Accounts from Medicaid beneficiaries and families describe delays in essential healthcare services and unexplained denials of claims, which directly contradict the program's intended purpose and funding requirements. Repeated Procedural Obstructions: DSS's refusal to issue detailed responses to formal complaints and case filings obstructs accountability efforts. The CHRO's refusal to assign case numbers prevents investigations into discrimination and non-compliance with ADA standards. Attorney General's Office inaction demonstrates systemic neglect, enabling DSS to continue its harmful practices unchecked. Expert Reports and Audits Ignored: Calls for independent audits of DSS's Medicaid programs have been ignored or dismissed, raising concerns about financial mismanagement and failure to adhere to federal funding regulations. Violation



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	of Federal Oversight Obligations: Federal agencies, including HHS OCR and the DOJ, have failed to enforce ADA compliance or investigate allegations of systemic corruption, allowing ongoing violations to harm vulnerable populations. Exploitation of Disability Challenges: David Medeiros, a brain injury survivor, has faced procedural barriers intentionally designed to exploit his cognitive challenges, such as refusal to provide accessible communication formats or simplified processes requ

DISCLOSURE SUBJECTS

Name of individual you believe is responsible for the wrongdoing disclosed.

First Name	Last Name	Title	Chain of Command
Kristen	Clarke	U.S. Department of Justice (DOJ), Civil Rights Division:	Assistant Attorney General: Kristen Clarke Directly oversees enforcement of civil rights laws, inclu
Melanie Fontes Rainer	Melanie Fontes Rainer	U.S. Department of Health and Human Services (HHS), Office for Civil Rights (OCR): Director:	Responsible for enforcing ADA and Section 504 of the Rehabilitation Act within federally funded heal
William Tong	William Tong	Connecticut Office of the Attorney General:	Primary legal officer for Connecticut, responsible for ensuring state agencies comply with constitut
Andrea Barton Reeves	Andrea Barton Reeves	Connecticut Department of Social Services	Oversees Medicaid administration and implementation of programs



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		(DSS): Commissioner:	such as the ABI Waiver, directly tie
Tanya A. Hughes	Tanya A. Hughes	Connecticut Commission on Human Rights and Opportunities (CHRO): Executive Director:	Investigates discrimination complaints, including ADA violations, but has shown inaction in your cas
Henry J. Kerner	Henry J. Kerner	U.S. Office of Special Counsel (OSC): Special Counsel:	Investigates whistleblower retaliation and reports of government wrongdoing.
Julie Su	Julie Su	U.S. Department of Labor (DOL):	Responsible for oversight of workplace ADA compliance and protections for individuals with disabilit
Chiquita Brooks- LaSure	Chiquita Brooks- LaSure	Centers for Medicare & Medicaid Services (CMS): Administrator:	Responsible for federal oversight of Medicaid programs, including ensuring state compliance with fed
Ned Lamont	Ned Lamont	Governor of Connecticut:	The executive authority overseeing state agencies, including DSS and CHRO, with the power to order r
Dr. Manisha Juthani	Dr. Manisha Juthani	Connecticut Department of Public Health (DPH):	Ensures state compliance with health-related ADA requirements and public health safety.
Gary Winfield	Gary Winfield	Connecticut General Assembly, Judiciary Committee:	Legislative oversight for state agency practices, including transparency, civil rights compliance, a



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Andrés J. Gallegos	Andrés J. Gallegos	National Council on Disability (NCD): Chair:	Federal agency advising the President and Congress on disability policies, including ADA compliance
Alina M. Semo	Alina M. Semo	Office of Government Information Services (OGIS): Director:	Mediates FOIA disputes and ensures transparency in government operations.
Gene L. Dodaro	Gene L. Dodaro	U.S. Government Accountability Office (GAO): Comptroller General	Investigates misuse of federal funds and systemic inefficiencies in federally funded programs like M
Andrea Barton Reeves	Andrea Barton Reeves	Connecticut Department of Social Services (DSS): Leadership: Commissioner	Connecticut Department of Social Services (DSS): Leadership: Commissioner
Tanya Hughes	Tanya Hughes	Connecticut Commission on Human Rights and Opportunities (CHRO): Leadership: Executive Director	Connecticut Commission on Human Rights and Opportunities (CHRO): Leadership: Executive Director
William Tong	William Tong	Connecticut Attorney General's Office: Leadership: Attorney General	Connecticut Attorney General's Office: Leadership: Attorney General



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Kristen Clarke	Kristen Clarke	U.S. Department of Justice (DOJ), Civil Rights Division: Leadership: Assistant Attorney General	U.S. Department of Justice (DOJ), Civil Rights Division: Leadership: Assistant Attorney General
Melanie Fontes Rainer	Melanie Fontes Rainer	U.S. Department of Health and Human Services (HHS), Office for Civil Rights (OCR): Leadership: Dire	U.S. Department of Health and Human Services (HHS), Office for Civil Rights (OCR): Leadership: Dire
Ned Lamont	Ned Lamont	State of Connecticut Leadership: Governor	State of Connecticut Leadership: Governor
Jeffrey Beckham	Jeffrey Beckham	Connecticut Office of Policy and Management (OPM): Secretary	Oversees budget and funding allocation, including Medicaid funds. Negligence or failure to ensure pr
Dr. Manisha Juthani	Dr. Manisha Juthani	Connecticut Department of Public Health (DPH): Commissioner	Connecticut Department of Public Health (DPH): Commissioner
Colleen M. Murphy	Colleen M. Murphy	Executive Director and General Counsel	Connecticut Freedom of Information Commission (FOIC):



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Martin M. Looney	Martin M. Looney	Connecticut General Assembly (CGA): Senate President Pro Tempore	Responsible for legislative oversight of state agencies like DSS and CHRO. Inaction or failure to in
Matthew Ritter	Matthew Ritter	House Speaker	Responsible for legislative oversight of state agencies like DSS and CHRO. Inaction or failure to in
Chiquita Brooks-LaSure	Chiquita Brooks-LaSure	Centers for Medicare & Medicaid Services (CMS): Administrator	Centers for Medicare & Medicaid Services (CMS): Administrator
Charlotte Burrows	Charlotte Burrows	U.S. Equal Employment Opportunity Commission (EEOC):	U.S. Equal Employment Opportunity Commission (EEOC): Chair
Henry Kerner	Henry Kerner	Office of Special Counsel (OSC):	ederal oversight for whistleblower complaints. If whistleblower disclosures were ignored or mishandl
Gene L. Dodaro	Gene L. Dodaro	U.S. Government Accountability Office (GAO): Comptroller General	U.S. Government Accountability Office (GAO): Comptroller General
Christi A. Grimm	Christi A. Grimm	Office of Inspector General (OIG), Department of Health and Human Services:	OIG is tasked with investigating fraud, waste, and abuse in federally funded programs like Medicaid.



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		Inspector General	
Deidre S. Gifford	Deidre S. Gifford	Commissioner, Connecticut Department of Social Services (DSS)	Oversaw the agency's discriminatory practices, denial of ADA accommodations, and retaliatory actions
Tanya Hughes	Tanya Hughes	Executive Director, Connecticut Commission on Human Rights and Opportunities (CHRO)	Failed to ensure the investigation of complaints, neglected to assign case numbers, and ignored stat
William Tong	William Tong	Connecticut Attorney General	Ignored evidence of systemic failures and violations, failing to intervene or hold DSS and CHRO acco
Merrick B. Garland	Merrick B. Garland	U.S. Attorney General, Department of Justice (DOJ)	U.S. Attorney General, Department of Justice (DOJ)
Xavier Becerra	Xavier Becerra	Secretary, U.S. Department of Health and Human Services (HHS)	Neglected oversight responsibilities related to ADA compliance within Medicaid-funded programs.
Chiquita Brooks-LaSure	Chiquita Brooks-LaSure	Administrator, Centers for Medicare & Medicaid Services (CMS)	Role: Allowed systemic Medicaid mismanagement and misuse of federal funds without intervention.
Lisa J. Pino	Lisa J. Pino	Director, Office for Civil Rights (OCR), HHS	Failed to enforce ADA compliance and investigate systemic discrimination and retaliatory practices w



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Manisha Juthani, MD	Manisha Juthani, MD	Commissioner, Connecticut Department of Public Health (DPH)	Oversees public health policies and programs, potentially involved in Medicaid oversight and ADA com
Deidre S. Gifford, MD, MPH	Deidre S. Gifford, MD, MPH	Commissioner, Connecticut Department of Social Services (DSS)	Commissioner, Connecticut Department of Social Services (DSS)
Andrea	Barton Reeves	Commissioner, Connecticut Department of Social Services (DSS)	Commissioner, Connecticut Department of Social Services (DSS)
William Tong	William Tong	Attorney General, State of Connecticut	Legal oversight of state agencies, failed to act on documented violations and complaints
Tanya Hughes	Tanya Hughes	Executive Director, Connecticut Commission on Human Rights and Opportunities (CHRO)	Executive Director, Connecticut Commission on Human Rights and Opportunities (CHRO)
Xavier Becerra	Xavier Becerra	Secretary, U.S. Department of Health and Human Services (HHS)	Secretary, U.S. Department of Health and Human Services (HHS)
Chiquita Brooks-LaSure	Chiquita Brooks-LaSure	Administrator, Centers for Medicare & Medicaid Services (CMS)	Administrator, Centers for Medicare & Medicaid Services (CMS)



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Kristen Clarke	Kristen Clarke	Assistant Attorney General, Civil Rights Division, U.S. Department of Justice (DOJ)	Assistant Attorney General, Civil Rights Division, U.S. Department of Justice (DOJ)
Robyn M. Colosimo	Robyn M. Colosimo	Acting Special Counsel, U.S. Office of Special Counsel (OSC)	Acting Special Counsel, U.S. Office of Special Counsel (OSC)
Richard Blumenthal	Richard Blumenthal	U.S. Senator for Connecticut	advocate for federal investigations and legislative oversight of state misconduct.
Chris Murphy	Chris Murphy	U.S. Senator for Connecticut	advocate for ensuring ADA compliance and whistleblower protections.
Rosa DeLauro	Rosa DeLauro	U.S. Representative, Connecticut's 3rd District	Focus on federal Medicaid and social services programs.
Andrea Barton Reeves – Commissioner, DSS	Andrea Barton Reeves – Commissioner, DSS	Andrea Barton Reeves – Commissioner, DSS	Andrea Barton Reeves – Commissioner, DSS
Dr. Deidre S. Gifford – Former Commissioner, DSS	Dr. Deidre S. Gifford – Former Commissioner, DSS	Dr. Deidre S. Gifford – Former Commissioner, DSS	Dr. Deidre S. Gifford – Former Commissioner, DSS
Tanya Hughes – Executive Director, CHRO	Tanya Hughes – Executive Director, CHRO	Tanya Hughes – Executive Director, CHRO	Tanya Hughes – Executive Director, CHRO
William Tong – Attorney General, Connecticut	William Tong – Attorney General, Connecticut	William Tong – Attorney	William Tong – Attorney General, Connecticut



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		General, Connecticut	
Chiquita Brooks-LaSure – Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure – Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure – Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure – Administrator, Centers for Medicare & Medicaid Services (CMS)
Xavier Becerra – Secretary, U.S. Department of Health and Human Services (HHS)	Xavier Becerra – Secretary, U.S. Department of Health and Human Services (HHS)	Xavier Becerra – Secretary, U.S. Department of Health and Human Services (HHS)	Xavier Becerra – Secretary, U.S. Department of Health and Human Services (HHS)
Rebecca Bond – Chief, Disability Rights Section, DOJ Civil Rights Division	Rebecca Bond – Chief, Disability Rights Section, DOJ Civil Rights Division	Rebecca Bond – Chief, Disability Rights Section, DOJ Civil Rights Division	Rebecca Bond – Chief, Disability Rights Section, DOJ Civil Rights Division
Governor Ned Lamont – Governor of Connecticut	Governor Ned Lamont – Governor of Connecticut	Governor Ned Lamont – Governor of Connecticut	Governor Ned Lamont – Governor of Connecticut
Jeffrey Beckham – Secretary, OPM	Jeffrey Beckham – Secretary, OPM	Connecticut Office of Policy and Management (OPM):	Connecticut Office of Policy and Management (OPM):
Matthew Ritter – Speaker of the House	Matthew Ritter – Speaker of the House	Connecticut General Assembly (CGA):	Connecticut General Assembly (CGA):



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Martin M. Looney – Senate President	Martin M. Looney – Senate President	Martin M. Looney – Senate President	Responsible for approving state Medicaid budgets and reforms.
Rob Kane	Rob Kane	State Auditors	Tasked with auditing state agencies for financial mismanagement, including Medicaid funds.
John C. Geragosian	John C. Geragosian	State Auditors	Tasked with auditing state agencies for financial mismanagement, including Medicaid funds.
Sean Scanlon	Sean Scanlon	State Comptroller	Monitors DSS Medicaid- related expenditures and financial reporting.
Chiquita Brooks- LaSure – Administrator, CMS	Chiquita Brooks- LaSure – Administrator, CMS	Chiquita Brooks-LaSure – Administrator, CMS	Chiquita Brooks-LaSure – Administrator, CMS
Xavier Becerra – Secretary, HHS	Xavier Becerra – Secretary, HHS	Xavier Becerra – Secretary, HHS	Responsible for monitoring Medicaid mismanagement in Connecticut.
Gene L. Dodaro – Comptroller General of the United States	Gene L. Dodaro – Comptroller General of the United States	Comptroller General of the United States	Leads federal reviews of wasteful practices involving Medicaid funds.
Christi A. Grimm – Inspector General, HHS	Christi A. Grimm – Inspector General, HHS	Christi A. Grimm – Inspector General, HHS	Conducts investigations into Medicaid fraud, waste, and abuse.
Henry J. Kerner – Special Counsel, U.S. Office of Special Counsel (OSC)	Henry J. Kerner – Special Counsel, U.S. Office of Special Counsel (OSC)	Henry J. Kerner – Special Counsel, U.S. Office of Special Counsel (OSC)	Enforces whistleblower protection for those reporting waste or mismanagement.



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REQUESTED OSC ACTION

What action would you like OSC to take?

Request for Federal Representation and Protection to Restore Constitutional Rights
To the U.S. Office of Special Counsel (OSC):

This complaint requires immediate federal representation to protect David Medeiros, a whistleblower, taxpayer advocate, and person with a disability, whose constitutional rights have been systematically violated by Connecticut state agencies. The federal government must act decisively to ensure that David's rights under the First, Fifth, and Fourteenth Amendments, as well as federal statutes like the Americans with Disabilities Act (ADA) and the Whistleblower Protection Act, are restored and protected.

Specific Actions Requested for Representation and Protection

Immediate Federal Representation

Federal Counsel Appointment: Appoint a federally funded attorney or representative to ensure David's constitutional rights are fully protected and enforced.

Direct Oversight of Legal Proceedings: Federal representatives must oversee all ongoing interactions between David and Connecticut agencies to prevent further violations or retaliation.

Protection from Retaliation: Establish safeguards ensuring David is no longer subjected to exclusion, discrimination, or retaliatory actions by state agencies or officials.

Restoration of Constitutional Rights

First Amendment: Reinforce David's right to petition the government for redress of grievances without fear of retaliation or obstruction.

Fifth Amendment: Ensure due process protections are upheld, requiring transparent and timely responses to David's complaints and FOIA requests.

Fourteenth Amendment: Address systemic discrimination and ensure equal protection under the law, particularly as it pertains to David's disability and whistleblower status.

Mandate ADA Compliance and Accessibility

Guarantee Accommodations: Require Connecticut agencies to provide ADA-compliant accommodations, including accessible communication formats and simplified procedures, tailored to David's cognitive needs as a traumatic brain injury survivor.

Independent Audit of ADA Compliance: Conduct a federal audit of ADA adherence within Connecticut's federally funded programs, including DSS's administration of the ABI Waiver Program.



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Federal Oversight to Enforce Accountability

Assign a Federal Monitor: Appoint an independent federal monitor to oversee the actions of Connecticut agencies, ensuring compliance with constitutional and statutory obligations.

Investigate Retaliatory Practices: Launch a federal investigation into retaliatory actions by Connecticut state officials against David Medeiros, holding violators accountable.

Restorative Justice for David Medeiros

Public Acknowledgment: Require Connecticut agencies to publicly acknowledge their violations of David's rights and take corrective action.

Financial Restitution: Compensate David for the personal, professional, and financial harm caused by the systemic violations and retaliatory practices.

Reinstatement of Advocacy Rights: Ensure David's ability to advocate for vulnerable populations, including individuals with disabilities, is fully restored without obstruction or exclusion.

Set a National Precedent

Protect All Whistleblowers: Use David's case to establish stronger federal protections for whistleblowers, ensuring no individual faces similar violations or retaliation in the future.

Strengthen Constitutional Safeguards: Reinforce federal mechanisms to prevent states from undermining constitutional and civil rights.

Systemic Reform Across States: Mandate reforms ensuring all states comply with federal laws protecting taxpayers, individuals with disabilities, and whistleblowers.

Conclusion

David Medeiros has endured severe constitutional violations, systemic discrimination, and targeted retaliation as a whistleblower and disability advocate. The federal government has a moral and legal obligation to represent and protect him, ensuring that his rights are fully restored and upheld.

By providing federal representation and enforcing constitutional and statutory protections, OSC can not only deliver justice for David but also set an enduring example for safeguarding the rights of all Americans, particularly those most vulnerable to systemic failures.

WHERE ELSE DID YOU REPORT THIS MATTER?

I have also disclosed this information to:



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Other Action Type	Action Taken Date

Additional information about reports to Inspectors General, if applicable.

First Name:

Last Name:

Title:

Address:

Email Address:

Telephone Number:

Case ID #:

a. **What is the status of the matter?**

NOTE: MATTERS INVESTIGATED BY AN OFFICE OF INSPECTOR GENERAL

It is the general policy of OSC not to transmit allegations of wrongdoing to the head of the agency involved if the agency's Office of Inspector General has fully investigated, or is currently investigating, the same allegations.

ATTACHMENTS

Please note that the space available for attachments is limited. Therefore, DO NOT attach every document and email that may be relevant to your claim. You will have an opportunity to make additional submissions at a later date. We recommend limiting attachments to official forms and correspondence that document the action(s) at issue in your disclosure if these documents are relevant to your allegations.

I have attached the following documents to my filing:

File Name
Federal Representation for Justice DB.42.131.Inf. Medeiros Connecticut 11.28.2024 .pdf
DAVID MEDEIROS VS CONNECTICUT DEPARTMENT OF SOCIAL SERVICES DSS CT GOV 10.30.2024 .PDF
10.24.2024 DOJ complaint Submission complete.pdf
DAVID MEDEIROS VS CONNECTICUT DEPARTMENT OF SOCIAL SERVICES DSS CT GOV 10.30.2024 (1).PDF
October 30, 2024 - David Medeiros VS Connecticut Department of Social Services DSS CT gov.docx



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CHRO CASE DSS 24 4 Filed Complaint Against Connecticut DSS Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
CHRO CASE DSS 24 3 Filed Complaint Against Connecticut DSS Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
CHRO CASE DSS 24 2 Filed Complaint Against Connecticut DSS Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
CHRO CASE DSS 24 Filed Complaint Against Connecticut DSS Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
OSCFiling-MedeirosDavid-DI-112620241121.pdf
requests (9).csv
requests (8).csv
requests (7).csv
11.27.2024 Escalated Complaint FOIA Non-Compliance ADA Violations Constitutional Violations and Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
11.27.2024 Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
090620247088 cms No Records Response Letter (1).pdf
01.02.2024 COMPLAINT LETTER.docx
11.23.2024 Binder1.pdf
09.24.2024
Federal Intervention_HHS_OIG_CMS_GAO_DOJ_OCR_Whistleblower_Report_2024.pdf
Comprehensive Grievance Report and Request for Clarity Whistleblower Report Mediciad ABI Waiver Programs.pdf
11.27.2024 ALL MUCKROCK TO DATE Binder1 .pdf
FOIA .zip
01.04.2024 CHRO AUDITS Binder2.pdf
000_2024-10-29 17_24_21.003990+00_00_comm.txt
01.01.2024 2nd FOIA.gov - Freedom of Information Act_ Create a request.pdf
Medeiros Response.pdf
Governor Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
12.14.2023 Dear Matthew S. Antonetti CT DSS .pdf
01.02.2024 COMPLAINT LETTER.docx
2410220 CAR Dismissal .pdf
10.22.2024 10.39 am CHRO Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
2410220 CP Email with Documents 2.4.24.msg
2410220 CAR Dismissal .pdf
2410220 Release of Jurisdiction.pdf



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2410220 CAR Dismissal .pdf
2410220 Answer Part 1 of 2.pdf
2410220 Affidavit.pdf
12.23.2023 CHRO COMPLAINT .docx
Admin-CL (1).pdf
01.26.2024 Binder1.pdf
dss foia ghewtfrg Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
ABI Forum 2024.pdf
12.23.2023 Governor Ned Lamont. David Medeiros ABI Resources Call for Systemic Reform in Response to ADA Accommodation Failures and Disability Discrimination Whistleblower Retaliation Compliance CT DSS COU CHRO .pdf
11.27.2024 ALL MUCKROCK TO DATE Binder1 .pdf

CONSENT

Do you consent to the disclosure of your identify to others outside OSC if it becomes necessary in taking further action on this matter?*

I consent to disclosure of my identity.

Yes

I do not consent to disclosure of my identity. (Even if you do not consent, OSC may disclose your identity if necessary due to an imminent danger to public health or safety or imminent violation of any criminal law. See 5 U.S.C. § 1213(h).)

No

CERTIFICATION

I certify that all of the statements made in this complaint are true, complete, and correct to the best of my knowledge and belief. I understand that a false statement or concealment of a material fact is a criminal offense punishable by a fine, imprisonment, or both. 18 U.S.C. § 1001.*

Yes



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BURDEN: The burden for this collection of information (including the time for reviewing instructions, searching existing data sources, gathering the data needed, and completing and reviewing the form) is estimated to be an average of one hour to submit a disclosure of information alleging agency wrongdoing, one hour and fifteen minutes to submit a complaint alleging a prohibited personnel practice or other prohibited activity, or 30 minutes to submit a complaint alleging prohibited political activity. Please send any comments about this burden estimate, and suggestions for reducing the burden, to the U.S. Office of Special Counsel, General Counsel's Office, 1730 M Street, NW, Suite 218, Washington, DC 20036-4505.

This Disclosure of Information was Received by OSC on: 11/28/2024

PLEASE KEEP A COPY OF YOUR COMPLAINT, ANY SUPPORTING DOCUMENTATION, AND ANY ADDITIONAL ALLEGATIONS THAT YOU SEND TO OSC NOW OR AT ANY TIME WHILE YOUR COMPLAINT IS PENDING. REPRODUCTION CHARGES UNDER THE FREEDOM OF INFORMATION ACT MAY APPLY TO ANY REQUEST YOU MAKE FOR COPIES OF MATERIALS THAT YOU PROVIDED TO OSC.



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IMPORTANT INFORMATION ABOUT FILING A DISCLOSURE

OSC WHISTLEBLOWER DISCLOSURE CHANNEL

Under 5 U.S.C. § 1213 and related provisions, the Office of Special Counsel (OSC) serves as a secure channel for federal employees, former federal employees, and applicants for federal employment with reliable knowledge of the wrongdoing to disclose:

- a violation of law, rule or regulation;
- gross mismanagement;
- gross waste of funds;
- an abuse of authority;
- a substantial and specific danger to public health or safety; and/or
- censorship related to scientific research.

OSC JURISDICTION

OSC has no jurisdiction over disclosures filed by:

- employees of the U.S. Postal Service and the Postal Regulatory Commission;
- members of the armed forces of the United States (*i.e.*, non-civilian military employees);
- state employees operating under federal grants;
- employees of federal contractors;
- other employees or federal agencies that are exempt under federal law; and
- Congressional or judicial branch employees.

ANONYMOUS SOURCES

While OSC will protect the identity of persons who make disclosures, it will not consider anonymous disclosures. If a disclosure is filed by an anonymous source, the disclosure will be referred to the Office of Inspector General in the appropriate agency. OSC will take no further action.

RETALIATION

Do you believe you suffered retaliation by your agency for disclosing wrongdoing? If yes, you may file a complaint of retaliation by navigating back to "My Cases" and selecting "New Complaint." Select Option 1 to complete and submit a Complaint of Prohibited Personnel Practice or other Prohibited Activity (PPPs). *If you have already completed the Complaint of Prohibited Personnel Practice or other Prohibited Activity above, please continue with this Disclosure.* PPPs are employment-related activities that are banned in the federal workforce.



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PPPs generally involve some type of personnel decision or action and may result in personal relief for people who have been subject to a PPP. For example, if we find that you were removed from federal service in retaliation for whistleblowing, OSC may act to get your job back. PPPs can also include allegations of harassment, failure to issue appraisals, and improper hiring. Do not file a disclosure to report retaliation or other PPPs.

CONTACT INFORMATION

Title:

First Name:* David

Middle Initial:

Last Name:* Medeiros

International Address?: No

Address:*

215 Mountain St
Willimantic, CT 06226

Cell Phone Number:

Home Phone Number:

Office Phone Number:

Ext.

Email Address:* aabiwr@live.com

Preferred means of contact:

Email: Yes

Cell phone: No

Home phone: No

Office phone: No

REPRESENTATIVE INFORMATION

Do you have representation? No

Information about representative, if applicable.

First Name:*

Middle Initial:

Last Name:*

International Address?:

Address: *



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Office Phone Number:

Ext.

Cell Phone Number:

Home Phone Number:

Email Address:

EMPLOYMENT INFORMATION

Name of Department/Agency about which you are making a disclosure.

Department:* Justice

Agency:* Office Of The Inspector General

Agency subcomponent: Office of the Inspector General (OIG) For DOJ: Disability Rights
Section For HHS: Office for Civil R

Street Address: 950 Pennsylvania Avenue NW

City: Washington

State: DC

Zip Code: 20201

Employment Status:* Non-Federal Employee (please specify)

Title	Series	Grade

Please provide your dates of employment in this position.

Employment Service Type	Employment Service Subtype	If Other (specify)
Excepted Service	Other	Private Citizen, Advocate, and Whistleblower
Other	Other	Private Citizen, Advocate, and Whistleblower

Are you covered by a collective bargaining agreement?



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DETAILS OF YOUR DISCLOSURES

Please identify the type of wrongdoing that you are alleging. You can make multiple disclosures, but you **MUST** choose one option. If you check "violation of law, rule, or regulation," specify, if you can, the particular law, rule or regulation violated (by name, subject, and/or legal citation). For each allegation, please answer the following questions (be as specific as possible). Please keep in mind that you will have an opportunity to provide more information and someone from OSC will contact you.

If OSC determines there is a substantial likelihood of wrongdoing, OSC will refer your disclosures to the involved agency for an investigation and report. To meet the substantial likelihood standard, there must be a significant probability that the information reveals wrongdoing that falls within one or more of the categories above. In its evaluation, OSC considers the strength, reliability, and credibility of the disclosures. If the substantial likelihood determination cannot be made, OSC will determine whether there is sufficient information to exercise its discretion to refer the allegations.

DISCLOSURES

Allegation	Violation of Law, Rule or Regulation
What action did they take?	Actions Taken by the Involved Parties 1. Connecticut Department of Social Services (DSS): - Publicly ridiculed and excluded David Medeiros during ABI Waiver forums, violating ADA and First Amendment protections. - Refused to provide ADA-mandated accommodations, including accessible communication formats and simplified processes. - Obstructed access to critical information about Medicaid programs, including ABI Waiver policies, in violation of FOIA. - Retaliated against David Medeiros for whistleblowing on systemic Medicaid mismanagement. 2. Connecticut Commission on Human Rights and Opportunities (CHRO): - Refused to assign a case number or investigate David's notarized complaint alleging ADA violations and discrimination by DSS. - Ignored follow-up inquiries regarding the status of the complaint, denying due process and perpetuating



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	discrimination. 3. Connecticut Attorney General's Office: • Failed to act on evidence submitted by David Medeiros regarding DSS misconduct and CHRO's inaction. • Neglected its statutory duty to uphold constitutional and civil rights protections in Connecticut, effectively enabling systemic violations. 4. U.S. Department of Justice (DOJ), Civil Rights Division: • Ignored David's formal complaints regarding ADA violations, whistleblower retaliation, and systemic corruption within Connecticut's Medicaid program. • Failed to investigate or enforce federal protections, allowing violations to persist unchecked. 5. U.S. Department of Health and Human Services (HHS), Office for Civil Rights (OCR): • Did not investigate systemic ADA violations in Connecticut's Medicaid program, despite clear evidence of non-compliance and harm to individuals with disabilities. 6. Connecticut Governor's Office: • Failed to intervene or provide oversight of DSS and CHRO despite being alerted to systemic violations and retaliation against David Medeiros. 7. Centers for Medicare & Medicaid Services (CMS): • Did not enforce federal Medicaid oversight to ensure that Connecticut DSS complies with federal regulations and ADA mandates. Summary of Actions: • Exclusion: Agencies excluded David from forums and processes critical to his advocacy and whistleblower activities. • Retaliation: State and federal actors retaliated against David for exposing Medicaid mismanagement, violating whistleblower protections. • Non-Compliance: Agencies failed to uphold ADA requirements and constitutional rights, creating systemic barriers and procedural delays. • Neglect: Federal oversight bodies deferred action, enabling Connecticut agencies to act with impunity. Constitutional Violations and Crimes Committed 12. First Amendment Violations • Suppression of Petition Rights: By ignoring David Medeiros' complaints and failing to investigate or act on his claims, Connecticut state agencies and federal oversight bodies have



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	suppressed his constitutional right to petition the government for redress of grievances. • Retaliation Against Free Speech: Retaliatory actions, such a
When did this occur?	Timeline of Events October 24, 2024 – Filing of CHRO Complaint David Medeiros submitted a notarized complaint to the Connecticut Commission on Human Rights and Opportunities (CHRO), detailing ADA violations, systemic discrimination, and retaliation by the Connecticut Department of Social Services (DSS). October 30, 2024 – Follow-Up with CHRO David requested a status update and assignment of a case number for his complaint. CHRO failed to respond, creating procedural barriers to justice. November 1, 2024 – Appeal to Connecticut Attorney General David escalated his complaints to the Connecticut Attorney General's Office, providing evidence of systemic violations and requesting oversight of DSS and CHRO. The Attorney General's Office did not respond or take any action. November 10, 2024 – Submission to DOJ David submitted a comprehensive complaint to the U.S. Department of Justice (DOJ), detailing ADA violations, constitutional breaches, whistleblower retaliation, and systemic mismana
How did you discover this action?	3. When did this occur? ChatGPT said: Timeline of Events October 24, 2024 – Filing of CHRO Complaint David Medeiros submitted a notarized complaint to the Connecticut Commission on Human Rights and Opportunities (CHRO), detailing ADA violations, systemic discrimination, and retaliation by the Connecticut Department of Social Services (DSS). October 30, 2024 – Follow-Up with CHRO David requested a status update and assignment of a case number for his complaint. CHRO failed to respond, creating procedural barriers to justice. November 1, 2024 – Appeal to Connecticut Attorney General David escalated his complaints to the Connecticut Attorney General's Office, providing evidence of systemic violations and requesting oversight of DSS and CHRO. The Attorney General's Office did not respond or take any action. November 10, 2024 –



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	Submission to DOJ David submitted a comprehensive complaint to the U.S. Department of Justice (DOJ), detailing ADA violations, constitutional breaches, whistleblower retaliation, and systemic mismanagement by Connecticut agencies. Despite the urgency, the DOJ failed to initiate an investigation or enforce compliance. November 28, 2024 – Current Status CHRO: Refuses to assign a case number or act on David’s complaint, obstructing due process. Connecticut Attorney General: Has ignored all communications, abdicating responsibility for overseeing state agency compliance. DOJ: Has not taken substantive action to investigate federal violations or ensure ADA compliance. HHS OCR: Remains unresponsive despite its mandate to enforce ADA compliance and Medicaid program integrity. These violations and inactions have created a continuous pattern of systemic neglect and retaliation against David Medeiros, with no resolution or accountability to date. You said: 4. How did you discover this action? ChatGPT said: How the Action Was Discovered David Medeiros, as a whistleblower and disability advocate, discovered the actions through direct personal experience and documentation, which include: Personal Experience with Discrimination and Retaliation David experienced firsthand acts of exclusion, public ridicule, and procedural barriers during interactions with Connecticut Department of Social Services (DSS) officials. For example: He was excluded from critical discussions related to the ABI Waiver Program. He was subjected to public ridicule during forums, despite being a known advocate for individuals with disabilities and a whistleblower exposing Medicaid mismanagement. Documented Failures of State Agencies David submitted a notarized complaint to the Connecticut Commission on Human Rights and Opportunities (CHRO) detailing ADA violations and retaliation. However, CHRO failed to acknowledge the complaint, assign a case number, or investigate the allegations, creating procedural obstacles. Evidence of Inaction by the Connecticut Attorney General Despite



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	escalating the matter and providing comprehensive evidence of systemic failure
What additional facts support your allegation?	Additional Facts Supporting the Allegation Documented Failures by State Agencies Connecticut Commission on Human Rights and Opportunities (CHRO): David Medeiros submitted a notarized complaint to CHRO on October 24, 2024, detailing ADA violations and systemic retaliation by DSS. CHRO failed to: Assign a case number. Investigate the allegations. Provide any substantive acknowledgment or response, violating its statutory mandate to investigate discrimination complaints. This procedural inaction obstructs justice and denies David's right to due process. Connecticut Department of Social Services (DSS) Retaliation: DSS officials publicly ridiculed David during ABI Waiver forums and excluded him from critical discussions, despite his role as a whistleblower and disability advocate. DSS has refused to provide reasonable ADA accommodations, including accessible communication formats (e.g., email-only correspondence), in direct violation of the ADA and Section 504 of the Rehabilitation Act. Inaction by the Connecticut Attorney General's Office: Despite receiving evidence of systemic ADA violations, whistleblower retaliation, and Medicaid mismanagement, the Attorney General's Office failed to investigate or respond, abdicating its responsibility to enforce state and federal laws. Federal Oversight Failures: The U.S. Department of Justice (DOJ) and the Department of Health and Human Services Office for Civil Rights (HHS OCR) were notified of systemic ADA violations, whistleblower retaliation, and constitutional breaches in November 2024. Despite this, no federal investigations or enforcement actions have been initiated, perpetuating state agency misconduct. Evidence of ADA Non-Compliance: DSS repeatedly refused David's requests for ADA-compliant communication, such as screen-reader-compatible documents and simplified processes, exacerbating the challenges he faces as a traumatic brain injury (TBI) survivor. Mismanagement of Public Funds: DSS has



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	obstructed transparency regarding Medicaid fund usage, particularly funds allocated to the ABI Waiver Program. This raises significant concerns about potential misuse or mismanagement of taxpayer dollars. Exploitation of Disability: State and federal officials are aware of David's brain injury and cognitive challenges, yet they have exploited his disability by creating procedural barriers and denying accommodations, effectively excluding him from advocacy and justice processes. Pattern of Systemic Corruption and Retaliation: Agencies at both the state and federal levels have demonstrated a clear pattern of protecting their leadership and shielding systemic inefficiencies, corruption, and discrimination, rather than addressing legitimate complaints. By refusing to act on whistleblower disclosures, these agencies have enabled misconduct, eroded public trust, and fostered an environment where accountability is absent. Violation of Transparency Laws: DSS and CHRO have failed to comply with Freedom of Information
Allegation	Gross Mismanagement
What action did they take?	The listed individuals and entities engaged in or facilitated actions that collectively constitute systemic violations of constitutional rights, ADA non-compliance, whistleblower retaliation, and mismanagement of public funds. These actions include: 1. Suppression of Whistleblower Rights and Retaliation DSS (Connecticut Department of Social Services): Publicly ridiculed and excluded David Medeiros from critical forums related to Medicaid and the ABI Waiver Program. Obstructed David's advocacy efforts by withholding ADA-mandated accommodations, such as accessible communication formats and email-only correspondence. Refused to provide requested records or updates, effectively silencing his whistleblowing efforts and suppressing public accountability. CHRO (Commission on Human Rights and Opportunities): Refused to assign a case number to David's notarized complaint, delaying and obstructing justice. Failed to investigate claims of systemic discrimination and retaliation, despite statutory



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	mandates. Connecticut Attorney General's Office: Ignored multiple submissions of evidence regarding DSS misconduct and CHRO's failure to act. Failed to intervene or provide oversight to enforce transparency, ADA compliance, and whistleblower protections. 2. Violations of ADA Protections and Disability Rights DSS: Denied reasonable accommodations to David Medeiros, a traumatic brain injury (TBI) survivor, making it impossible for him to meaningfully participate in public processes. Weaponized David's disability by exploiting his cognitive challenges to create procedural delays, obstruct communication, and undermine his advocacy. CHRO: Failed to enforce ADA and anti-discrimination statutes by not investigating documented violations or taking any corrective actions. Federal Agencies (DOJ, HHS OCR, CMS): Neglected oversight responsibilities to ensure ADA compliance and accessibility in Connecticut's Medicaid program, enabling DSS to continue discriminatory practices unchecked. 3. Mismanagement of Public Funds and Lack of Transparency DSS: Withheld public records related to Medicaid fund allocations, including the ABI Waiver Program, violating FOIA and state transparency laws. Mismanaged Medicaid resources by failing to meet federal ADA standards while continuing to receive federal funding. Federal Agencies (CMS, HHS OCR): Failed to audit or investigate the misuse of Medicaid funds in Connecticut, despite whistleblower complaints highlighting systemic issues. 4. Abuse of Authority and Gross Mismanagement Connecticut Leadership (OPM, Governor's Office): Allowed systemic failures in oversight and enforcement by not addressing persistent complaints of corruption, discrimination, and retaliation. Enabled DSS and CHRO's non-compliance with state and federal laws by failing to enact structural reforms. Federal Agencies (DOJ, OSC): Ignored whistleblower reports and failed to initiate investigations into Connecticut's systemic mismanagement of Medicaid and ADA violat



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When did this occur?	Timeline of Events October 24, 2024 – Filing of CHRO Complaint David Medeiros submitted a notarized complaint to the Connecticut Commission on Human Rights and Opportunities (CHRO), detailing ADA violations, systemic discrimination, and retaliation by the Connecticut Department of Social Services (DSS). October 30, 2024 – Follow-Up with CHRO David requested a case number and an update on the status of his complaint. CHRO failed to respond or assign a case number, effectively obstructing the complaint process. November 1, 2024 – Appeal to Connecticut Attorney General David submitted evidence and documentation to the Connecticut Attorney General’s Office, requesting oversight and intervention to address systemic misconduct by DSS and CHRO. The Attorney General’s Office ignored the submission and failed to act. November 10, 2024 – Escalation to DOJ David submitted a detailed whistleblower complaint to the U.S. Department of Justice (DOJ), highlighting ADA violations, FOIA non-compliance
How did you discover this action?	Discovery of Actions David Medeiros discovered these actions through firsthand experience and documented interactions with the involved parties. The following key events and observations provided evidence of the actions taken against him: Refusal to Assign a Case Number by CHRO After submitting a notarized complaint to CHRO on October 24, 2024, David received no acknowledgment or case number, despite following up multiple times. The lack of response signaled procedural obstruction and a failure to fulfill CHRO’s statutory obligations. Exclusion and Ridicule by DSS During public forums related to the ABI Waiver Program, DSS officials publicly ridiculed and excluded David, creating a hostile environment for his advocacy. Witnesses corroborated these incidents, providing evidence of discriminatory practices. Ignored Submissions to the Attorney General’s Office Despite submitting detailed evidence of DSS and CHRO misconduct to the Attorney General on November 1, 2024, no acknowledgment or action was taken. This



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	inaction became apparent when repeated attempts to follow up were ignored. Federal Oversight Failures Complaints to the DOJ and HHS OCR, submitted on November 10, 2024, included comprehensive documentation of ADA violations, whistleblower retaliation, and systemic mismanagement. The absence of substantive action or follow-up from these federal agencies revealed a broader pattern of neglect and inaction. FOIA and ADA Compliance Failures Requests for ADA-compliant communication and public records related to Medicaid funds and the ABI Waiver Program were either ignored or obstructed. These failures were documented through email exchanges, unanswered requests, and a lack of transparent processes. Each discovery is supported by correspondence records, witness testimony, and David's detailed documentation of the systemic barriers and retaliatory practices he encountered. These actions collectively indicate deliberate neglect and systemic discrimination.
What additional facts support your allegation?	Additional Facts Supporting the Allegations Documented Retaliation and Exclusion by DSS: DSS officials publicly ridiculed David Medeiros during ABI Waiver forums, as corroborated by witnesses and documented in communications. These actions created a hostile environment, directly impeding his ability to advocate for Medicaid beneficiaries and individuals with disabilities. DSS failed to provide reasonable accommodations under the ADA, including email-only correspondence and simplified processes, despite David's documented cognitive challenges as a brain injury survivor. CHRO's Failure to Investigate: Despite submitting a notarized complaint on October 24, 2024, and multiple follow-up communications, CHRO refused to assign a case number or initiate an investigation, violating its statutory obligation to investigate discrimination complaints. CHRO's inaction effectively denied David due process and equal protection under the law, prolonging systemic discrimination and retaliation. Attorney General's Office Inaction: Submissions to the Connecticut Attorney



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	General included detailed evidence of DSS's ADA violations and whistleblower retaliation. Despite the compelling nature of the evidence, the office failed to respond, investigate, or intervene. This neglect demonstrates a disregard for its duty to ensure state agency compliance with federal and state laws. Federal Oversight Failures (DOJ and HHS OCR): The Department of Justice and the Office for Civil Rights at HHS were notified of systemic ADA violations, misuse of Medicaid funds, and whistleblower retaliation. Despite comprehensive documentation, neither agency initiated a substantive investigation or provided updates. Federal inaction perpetuates the culture of impunity within Connecticut's state agencies. FOIA and Transparency Failures: DSS obstructed transparency by refusing to provide records related to Medicaid fund usage and ABI Waiver operations, despite FOIA and state FOIA laws mandating timely responses. Requests for ADA-compliant documents and communication were ignored, compounding David's inability to access critical information. Pattern of Systemic Neglect and Corruption: Connecticut's financial reliance on Medicaid creates an incentive to suppress transparency and accountability. The refusal to investigate whistleblower complaints, accommodate disabilities, or ensure compliance highlights a coordinated effort to shield systemic mismanagement. David Medeiros' Vulnerability as a Brain Injury Survivor: Agencies weaponized David's cognitive challenges to create procedural barriers, delay responses, and obstruct justice, further exacerbating the discrimination and retaliation he faced. The refusal to accommodate his needs constitutes a violation of the ADA and Rehabilitation Act, underscoring the systemic failure to protect vulnerable individuals. Summary of Supporting Evidence: Witness testimony from public forums and interactions with DSS officials. Documentation of corresponden
Allegation	Abuse of Authority



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What action did they take?	Actions Taken: Abuse of Authority State-Level Actions Connecticut Department of Social Services (DSS): Public Ridicule and Exclusion: DSS officials publicly ridiculed David Medeiros during ABI Waiver Program forums, excluding him from discussions critical to Medicaid policy and decision-making. Denial of ADA Accommodations: Refused to provide accessible communication methods, such as email-only correspondence and simplified procedural guidelines, despite documented cognitive challenges from a brain injury. Obstruction of Records Requests: Failed to respond to Freedom of Information Act (FOIA) requests, withheld critical Medicaid documentation, and ignored whistleblower complaints. Retaliation for Whistleblowing: Took retaliatory actions, such as exclusion from forums and non-response to inquiries, after David exposed Medicaid mismanagement and systemic corruption. Connecticut Commission on Human Rights and Opportunities (CHRO): Failure to Investigate: Refused to assign a case number to David's notarized ADA complaint, preventing any investigation into DSS's discriminatory practices. Neglect of Statutory Duties: Ignored repeated follow-up requests for updates on the complaint, effectively obstructing access to justice. Complicity in Discrimination: Enabled DSS's retaliatory actions by failing to act on clear evidence of discrimination and ADA non-compliance. Connecticut Attorney General's Office: Neglect of Oversight Responsibilities: Failed to address or intervene in systemic violations by DSS and CHRO, despite receiving substantial evidence of ADA violations, whistleblower retaliation, and constitutional rights breaches. Shielding State Agencies: Refused to investigate or hold state officials accountable for their misconduct. Federal-Level Actions Department of Justice (DOJ): Failure to Act: Ignored complaints highlighting systemic ADA violations, retaliation against a whistleblower, and constitutional breaches in state-run programs. Deferred Oversight: Allowed Connecticut agencies to operate with impunity by deferring accountability to state authorities.



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	Department of Health and Human Services (HHS): Neglect of ADA Oversight: Failed to enforce ADA compliance within federally funded Medicaid programs despite clear evidence of systemic violations. Lack of Enforcement by OCR: The Office for Civil Rights (OCR) failed to investigate systemic discrimination within Medicaid programs and the actions of DSS. Centers for Medicare & Medicaid Services (CMS): Failure to Address Mismanagement: Neglected to audit or address Medicaid mismanagement under the ABI Waiver Program, enabling further misuse of federal funds and harm to vulnerable populations. Permitting Retaliation: Did not intervene to protect whistleblowers exposing Medicaid corruption. Key Themes of Abuse of Authority: Systemic Retaliation: Agencies targeted David for exposing Medicaid mismanagement and systemic corruption, denying him access to justice and public forums. Weaponized Bureaucr
When did this occur?	Timeline of Occurrence: Abuse of Authority Key Dates and Events October 24, 2024 – Filing of CHRO Complaint: David Medeiros submitted a notarized complaint to CHRO detailing ADA violations and systemic retaliation by DSS. CHRO failed to assign a case number or acknowledge the complaint. October 30, 2024 – Follow-Up with CHRO: David contacted CHRO requesting an update and reiterating the need for a case number. No substantive response or acknowledgment was provided. November 1, 2024 – Appeal to Connecticut Attorney General: Submitted evidence to the Attorney General's Office highlighting DSS's retaliatory actions, ADA violations, and CHRO's inaction. The Attorney General ignored the submission and took no steps to address the complaints. November 10, 2024 – Escalation to Federal Agencies: Detailed complaints submitted to the Department of Justice (DOJ) and the Department of Health and Human Services (HHS) Office for Civil Rights (OCR), citing whistleblower retaliation, ADA non-compl
How did you discover this action?	How This Action Was Discovered David Medeiros discovered the retaliatory actions and discriminatory



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	practices through his direct interactions with state agencies, including CHRO, DSS, and the Attorney General's Office. These interactions were marked by deliberate inaction, procedural barriers, and public exclusion. Key discoveries include: Retaliatory Actions at Public Forums: During ABI Waiver Program discussions, DSS officials publicly ridiculed David and excluded him from critical decision-making processes. These actions were directly observed and documented by David as clear attempts to undermine his advocacy efforts and credibility as a whistleblower. Failure to Respond to ADA Accommodation Requests: Despite repeated requests for reasonable ADA accommodations, including simplified correspondence and email-only communication, DSS and CHRO refused to comply. This non-compliance became evident through continued procedural delays and inaccessible communication methods. CHRO's Refusal to Acknowledge Complaint: After filing a notarized complaint with CHRO on October 24, 2024, David discovered the agency's refusal to assign a case number or take any investigative action. Follow-ups on October 30, 2024, further confirmed CHRO's neglect of its statutory duties. Attorney General's Silence: Evidence submitted to the Connecticut Attorney General's Office on November 1, 2024, was met with complete inaction. David discovered the lack of accountability through the Attorney General's failure to respond to his submissions. Federal Inaction by DOJ and HHS OCR: Complaints escalated to the DOJ and HHS OCR on November 10, 2024, provided detailed documentation of ADA violations, whistleblower retaliation, and systemic misconduct. The absence of follow-up or enforcement from these federal agencies highlighted their neglect. Obstructed FOIA Requests: DSS and CHRO failed to provide timely responses to FOIA requests, further obstructing David's efforts to obtain transparency regarding Medicaid fund usage and agency accountability. Through these events, David identified a coordinated pattern of retaliation, inaction, and systemic



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	discrimination, underscoring a deliberate effort to suppress his advocacy and whistleblower disclosures.
What additional facts support your allegation?	Additional Facts Supporting the Allegation of Abuse of Authority Documented Retaliation and Public Exclusion: DSS Forum Behavior: During ABI Waiver Program forums, DSS officials publicly ridiculed David Medeiros and excluded him from critical discussions, despite his role as a disability advocate and whistleblower. This retaliation was witnessed by multiple attendees and documented in communication records. Exclusion from Decision-Making Processes: Despite being a key stakeholder and advocate for individuals with disabilities, David was systematically excluded from forums and denied opportunities to provide input on critical Medicaid policies. Failure to Investigate by CHRO: Despite filing a notarized complaint on October 24, 2024, detailing ADA violations and retaliation by DSS, CHRO refused to assign a case number or investigate the allegations. This failure to act highlights CHRO's abdication of its statutory responsibility to protect individuals from discrimination. Attorney General's Refusal to Act: On November 1, 2024, David submitted evidence of misconduct and retaliation to the Connecticut Attorney General's Office. The Attorney General's Office has failed to provide acknowledgment, initiate an investigation, or take any corrective action, enabling ongoing abuses. Pattern of ADA Non-Compliance: Multiple ADA accommodation requests, including email-only correspondence and accessible formats for communication, were systematically denied by DSS and CHRO. This lack of compliance demonstrates a deliberate effort to obstruct David's ability to participate meaningfully in governmental processes. FOIA Obstruction: David submitted FOIA requests to DSS and other agencies to obtain records related to Medicaid fund usage and ABI Waiver Program policies. These requests were either ignored or delayed far beyond statutory deadlines, highlighting a pattern of intentional non-compliance and a lack of transparency. Federal Inaction and Neglect:



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	Complaints escalated to the DOJ and HHS OCR on November 10, 2024, were met with silence. Despite being provided with comprehensive evidence of systemic ADA violations, whistleblower retaliation, and misuse of federal funds, federal agencies failed to investigate or enforce compliance. Exploitation of Disability: Agencies are fully aware of David's traumatic brain injury (TBI) and related cognitive challenges but have weaponized these vulnerabilities by creating procedural barriers, ignoring accommodation requests, and delaying responses. This exploitation underscores the systemic nature of the abuse. Medicaid Mismanagement Concerns: DSS's refusal to disclose Medicaid fund usage, particularly regarding the ABI Waiver Program, raises serious concerns about potential mismanagement or misuse of federal funds. The lack of transparency and retaliatory actions suggest an attempt to shield systemic inefficiencies from public scrutiny. Violation of Whistleblower Protections: David's disclosures of Medicaid mismanagem
Allegation	Danger to Public Health
What action did they take?	Actions Taken by the Individuals and Agencies Connecticut Department of Public Health (DPH) Action: Failed to ensure that public health programs under its jurisdiction comply with ADA standards, particularly for individuals with disabilities accessing Medicaid and ABI Waiver services. Did not intervene or enforce oversight when systemic health access violations were reported. Connecticut Department of Social Services (DSS) Action: Publicly ridiculed and excluded David Medeiros during ABI Waiver forums, violating his constitutional rights to free speech and equal participation. Obstructed transparency by refusing to provide records related to Medicaid policies, ABI Waiver management, and whistleblower reports. Failed to provide legally mandated ADA accommodations, including accessible communication formats and reasonable procedural modifications. Actively retaliated against David Medeiros for whistleblowing on Medicaid mismanagement and



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	systemic corruption. Connecticut Attorney General's Office Action: Ignored formal complaints and evidence of systemic failures, including ADA violations and retaliation against David Medeiros. Declined to intervene or enforce legal obligations despite the evidence provided, effectively enabling state agencies to continue discriminatory and retaliatory practices. Connecticut Commission on Human Rights and Opportunities (CHRO) Action: Refused to assign a case number to David Medeiros' notarized discrimination complaint, obstructing access to justice. Failed to investigate ADA violations and retaliation claims, violating its statutory mandate to uphold anti-discrimination laws. Ignored follow-up communications requesting updates on the status of the complaint. U.S. Department of Health and Human Services (HHS), Office for Civil Rights (OCR) Action: Failed to enforce ADA compliance in federally funded Medicaid programs administered by Connecticut DSS. Did not investigate complaints of systemic discrimination or Medicaid mismanagement despite federal jurisdiction. U.S. Department of Justice (DOJ), Civil Rights Division Action: Neglected to act on formal complaints of ADA violations, whistleblower retaliation, and constitutional rights infringements, despite its federal enforcement responsibilities. Allowed Connecticut agencies to continue operating without accountability for systemic misconduct. Federal Elected Officials (Senators and Representatives) Action: Did not advocate for or initiate federal oversight of Connecticut's Medicaid program or address the systemic discrimination and retaliation against whistleblowers. Summary of Retaliatory and Obstructive Actions Systemic exclusion of David Medeiros from public forums and decision-making processes. Suppression of whistleblower allegations through procedural delays, inaction, and retaliation. Weaponization of David's brain injury by refusing ADA-mandated accommodations, effectively silencing his advocacy. Mismanagement of Medicaid funds and denial of transparen



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When did this occur?	Timeline of Events October 24, 2024 – Filing of CHRO Complaint David Medeiros submitted a notarized complaint to the Connecticut Commission on Human Rights and Opportunities (CHRO) regarding ADA violations, discrimination, and retaliation by DSS. October 30, 2024 – Follow-Up with CHRO David followed up with CHRO to request a case number and a status update on his complaint. CHRO failed to respond or provide the requested case number. November 1, 2024 – Appeal to Connecticut Attorney General's Office David submitted evidence and a formal appeal to the Connecticut Attorney General, outlining DSS misconduct, CHRO inaction, and systemic ADA violations. The Attorney General ignored this submission. November 10, 2024 – Complaint Escalation to Federal Agencies David submitted formal complaints to the U.S. Department of Justice (DOJ) Civil Rights Division and the Office for Civil Rights (OCR) under the Department of Health and Human Services (HHS). These complaints detailed ADA violations,
How did you discover this action?	David Medeiros uncovered these actions through personal experiences as a whistleblower, disability advocate, and Medicaid stakeholder. Key discoveries include: Direct Personal Experience: While engaging with the Connecticut Department of Social Services (DSS) as a whistleblower and advocate for the ABI Waiver Program, David directly experienced public ridicule, exclusion from forums, and systemic retaliation. Documented Evidence: David submitted formal complaints to the Connecticut Commission on Human Rights and Opportunities (CHRO) and other agencies, only to receive no substantive responses or assigned case numbers, highlighting systemic failures. Procedural Barriers: Through attempts to obtain information via the Freedom of Information Act (FOIA) and ADA accommodation requests, David encountered procedural delays, denials, and refusals to provide accessible formats. Patterns of Neglect and Retaliation: The lack of federal enforcement from agencies such as the DOJ and



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	HHS OCR revealed systemic inaction and a pattern of neglect, particularly against individuals with disabilities and whistleblowers. Community Feedback and Advocacy Efforts: David learned of similar patterns of exclusion and systemic failures from other whistleblowers, Medicaid recipients, and disability advocates, further corroborating his findings. These cumulative experiences and observations provided David with irrefutable evidence of systemic wrongdoing, gross mismanagement, and abuse of authority.
What additional facts support your allegation?	5. What Additional Facts Support Your Allegation? Documented Complaints and Correspondence: Multiple formal complaints were submitted to the Connecticut Commission on Human Rights and Opportunities (CHRO), Connecticut Department of Social Services (DSS), Office of the Connecticut Attorney General, and federal agencies like the Department of Justice (DOJ) and Health and Human Services Office for Civil Rights (HHS OCR). These complaints document allegations of ADA violations, whistleblower retaliation, and systemic mismanagement. CHRO's refusal to assign case numbers or investigate further substantiates a pattern of inaction. ADA Violations and Procedural Barriers: Agencies failed to provide ADA-mandated accommodations, such as email-only communication, simplified correspondence, and accessible formats. These violations demonstrate a deliberate disregard for federal disability rights laws, including the Americans with Disabilities Act (ADA) and the Rehabilitation Act (Section 504). Retaliatory Actions: DSS officials publicly ridiculed David Medeiros during ABI Waiver Program forums, excluded him from critical discussions, and obstructed his access to essential records and accommodations. These retaliatory actions were intended to discredit David and suppress his advocacy. FOIA and Transparency Failures: David's FOIA requests seeking information on Medicaid fund usage, including ABI Waiver program details, were ignored or delayed, violating transparency laws under 5 U.S.C. § 552 and Connecticut FOIA statutes (C.G.S. § 1-200 et seq.).



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	Testimonies and Community Evidence: Accounts from other disability advocates, Medicaid recipients, and whistleblowers corroborate systemic issues within Connecticut's state agencies, particularly DSS and CHRO. Patterns of retaliation, neglect, and obstruction have been consistently reported. Systemic Mismanagement of Medicaid Funds: DSS's refusal to disclose Medicaid fund usage, particularly in relation to the ABI Waiver Program, raises concerns about potential misuse or gross mismanagement of public funds intended to serve vulnerable populations. Federal Inaction and Knowledge of Disability: Federal agencies, including the DOJ and HHS OCR, were alerted to the systemic failures and retaliatory practices, but no substantive action has been taken. This inaction, despite full knowledge of David's traumatic brain injury and ADA-related needs, compounds the harm. Impact on Public Health and Safety: Neglecting ADA compliance and whistleblower protections undermines public trust, threatens the integrity of federally funded programs, and endangers Medicaid beneficiaries reliant on these services for health and safety. These facts collectively establish a pattern of systemic neglect, retaliation, and corruption within Connecticut state agencies and the failure of federal oversight bodies to intervene effectively.
Allegation	Gross Waste of Funds
What action did they take?	2. What Action Did They Take? The individuals and entities listed above engaged in actions or failed to act in ways that facilitated or perpetuated gross waste of public funds. Specifically: Connecticut Department of Social Services (DSS): Improper Use of Medicaid Funds: Failed to allocate Medicaid funds appropriately within the Acquired Brain Injury (ABI) Waiver Program. Funds intended for critical care were mismanaged, diverted, or left unaccounted for. Neglected oversight of contracts and services provided to vulnerable populations, resulting in inefficiencies, waste, and potentially fraudulent activity. Inadequate Financial Reporting: Deliberately delayed or withheld accurate financial



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	reports related to Medicaid expenditures, violating transparency and federal compliance obligations. Failure to Conduct Internal Audits: Ignored requirements to investigate and audit financial practices within the ABI Waiver Program and other DSS-administered Medicaid services. Connecticut Office of Policy and Management (OPM): Approval of Questionable Allocations: Authorized state budgets and Medicaid expenditures without proper accountability mechanisms to track the use of funds. Failure to Address Known Inefficiencies: Despite financial distress and known concerns about Medicaid mismanagement, OPM failed to implement corrective measures to reduce waste or increase oversight. Connecticut General Assembly (CGA): Inadequate Legislative Oversight: Failed to hold DSS accountable during budget reviews or Medicaid oversight hearings, enabling wasteful practices to continue unchecked. Refusal to Investigate Complaints: Ignored whistleblower reports and advocacy efforts highlighting systemic Medicaid mismanagement and wasteful spending. State Comptroller's Office: Failure to Monitor Spending: Did not ensure proper documentation or auditing of Medicaid disbursements, including those related to the ABI Waiver Program. Neglect of Transparency Requirements: Omitted mandatory public disclosures that would expose financial mismanagement. Federal Oversight Bodies: Centers for Medicare & Medicaid Services (CMS): Failed to audit or investigate Connecticut's Medicaid program despite clear indicators of mismanagement. U.S. Department of Health and Human Services (HHS): Did not enforce federal requirements for accountability in state-administered Medicaid programs, allowing systemic waste to persist. Office of the Inspector General (OIG), HHS: Neglected its duty to investigate potential fraud, waste, and abuse in Connecticut's use of Medicaid funds, particularly those impacting vulnerable populations. Other Actions Taken: Retaliation Against Whistleblowers: Suppressed complaints and retaliated against individuals, including



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	David Medeiros, who attempted to expose wasteful practices or seek transparency. Deliberate Obfuscation of Records: Withheld or failed to provide critical financial documents and records in response to Freedom of Information Act (FOIA) requests
When did this occur?	When Did This Occur? The gross waste of public funds by the listed individuals and entities occurred over an extended period, spanning several years. Key timeframes include: Ongoing Mismanagement of Medicaid Funds Mismanagement within the Acquired Brain Injury (ABI) Waiver Program and other Medicaid services has persisted for at least the past five years, with notable escalation from 2020 through 2024 as whistleblower reports and advocacy efforts exposed systemic issues. Retaliatory and Obstructive Actions Retaliation against David Medeiros began following his whistleblower activities in 2022 and has continued through 2024. These actions coincided with: Reports submitted to Connecticut DSS regarding Medicaid mismanagement. Complaints filed with the Connecticut Commission on Human Rights and Opportunities (CHRO) in 2023 and 2024. Failure of Oversight Bodies The Centers for Medicare & Medicaid Services (CMS) and the U.S. Department of Health and Human Services (HHS) failed to act on
How did you discover this action?	How Did You Discover This Action? David Medeiros, as a whistleblower, disability advocate, and founder of ABI Resources, uncovered these actions through firsthand involvement, research, and communication with affected populations. The following outlines how these actions were discovered: Direct Involvement in Advocacy and Reporting: As a Medicaid Acquired Brain Injury Waiver (ABI Waiver) provider, David observed consistent mismanagement, delays, and non-compliance with Medicaid policies, impacting vulnerable populations reliant on these services. His firsthand interactions with Connecticut Department of Social Services (DSS) officials revealed systemic failures in the administration of funds, refusal to provide transparency, and retaliatory practices against those raising concerns. Complaints Filed and



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	Ignored: After filing formal complaints with DSS, CHRO, and other state agencies, David noted repeated refusals to assign case numbers, investigate allegations, or address the reported issues, indicating procedural obstructions and systemic retaliation. Follow-ups with state and federal oversight bodies, including HHS OCR and DOJ, yielded no action, further exposing a coordinated effort to suppress whistleblowers. Testimonies from Affected Populations: Through his work with ABI Resources, David received testimonies from individuals and families, highlighting delayed Medicaid services, discriminatory practices, and inaccessible public forums for those with disabilities. These accounts confirmed widespread financial inefficiencies and administrative failures within state programs. Analysis of FOIA Responses and Obstructions: Requests for Medicaid fund records under FOIA (5 U.S.C. § 552) were delayed, denied, or inadequately addressed, further revealing the deliberate suppression of transparency regarding the misuse of federal and state funds. DSS and CHRO's refusal to provide complete, timely, and accurate information raised significant concerns about financial mismanagement. Patterns of Retaliation: Retaliation against David personally—including public ridicule, exclusion from forums, and denial of accommodations—demonstrated a coordinated effort to silence his whistleblower activities. Escalation to Federal Agencies: Escalation to DOJ and HHS OCR in 2023 and 2024 confirmed federal inaction despite substantial evidence of systemic violations, indicating complicit neglect or deferral of oversight.
What additional facts support your allegation?	What Additional Facts Support Your Allegation? The following additional facts substantiate the allegations of gross waste of funds, mismanagement, and retaliatory practices by Connecticut state agencies and the federal inaction that has allowed these violations to persist: Documented FOIA Non-Compliance and Withheld Records: Numerous FOIA requests filed with the Connecticut Department of Social Services (DSS) and



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	other agencies remain unanswered, delayed, or improperly denied. Refusal to disclose Medicaid spending records and program oversight audits has raised concerns about the misallocation of funds and deliberate suppression of accountability. The lack of transparency violates FOIA (5 U.S.C. § 552) and creates a strong presumption of financial mismanagement. Patterns of Financial Irregularities in Medicaid Waiver Programs: Analysis of publicly available records and reports from Medicaid beneficiaries highlights delays and denials in services promised under the ABI Waiver Program, indicating misuse or diversion of federal funds. Families and individuals reliant on Medicaid services have reported prolonged processing times and inadequate resource allocation, suggesting systemic inefficiencies. Unaddressed Whistleblower Retaliation: David Medeiros faced public ridicule, exclusion, and retaliation for raising concerns about Medicaid mismanagement. These actions deter further scrutiny of DSS's practices and reinforce a culture of impunity. State agencies have ignored whistleblower protections outlined in the Whistleblower Protection Act (5 U.S.C. § 2302), further preventing transparency. Testimonies from Affected Individuals: Accounts from Medicaid beneficiaries and families describe delays in essential healthcare services and unexplained denials of claims, which directly contradict the program's intended purpose and funding requirements. Repeated Procedural Obstructions: DSS's refusal to issue detailed responses to formal complaints and case filings obstructs accountability efforts. The CHRO's refusal to assign case numbers prevents investigations into discrimination and non-compliance with ADA standards. Attorney General's Office inaction demonstrates systemic neglect, enabling DSS to continue its harmful practices unchecked. Expert Reports and Audits Ignored: Calls for independent audits of DSS's Medicaid programs have been ignored or dismissed, raising concerns about financial mismanagement and failure to adhere to federal funding regulations. Violation



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	of Federal Oversight Obligations: Federal agencies, including HHS OCR and the DOJ, have failed to enforce ADA compliance or investigate allegations of systemic corruption, allowing ongoing violations to harm vulnerable populations. Exploitation of Disability Challenges: David Medeiros, a brain injury survivor, has faced procedural barriers intentionally designed to exploit his cognitive challenges, such as refusal to provide accessible communication formats or simplified processes requ

DISCLOSURE SUBJECTS

Name of individual you believe is responsible for the wrongdoing disclosed.

First Name	Last Name	Title	Chain of Command
Kristen	Clarke	U.S. Department of Justice (DOJ), Civil Rights Division:	Assistant Attorney General: Kristen Clarke Directly oversees enforcement of civil rights laws, inclu
Melanie Fontes Rainer	Melanie Fontes Rainer	U.S. Department of Health and Human Services (HHS), Office for Civil Rights (OCR): Director:	Responsible for enforcing ADA and Section 504 of the Rehabilitation Act within federally funded heal
William Tong	William Tong	Connecticut Office of the Attorney General:	Primary legal officer for Connecticut, responsible for ensuring state agencies comply with constitut
Andrea Barton Reeves	Andrea Barton Reeves	Connecticut Department of Social Services	Oversees Medicaid administration and implementation of programs



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		(DSS): Commissioner:	such as the ABI Waiver, directly tie
Tanya A. Hughes	Tanya A. Hughes	Connecticut Commission on Human Rights and Opportunities (CHRO): Executive Director:	Investigates discrimination complaints, including ADA violations, but has shown inaction in your cas
Henry J. Kerner	Henry J. Kerner	U.S. Office of Special Counsel (OSC): Special Counsel:	Investigates whistleblower retaliation and reports of government wrongdoing.
Julie Su	Julie Su	U.S. Department of Labor (DOL):	Responsible for oversight of workplace ADA compliance and protections for individuals with disabilit
Chiquita Brooks- LaSure	Chiquita Brooks- LaSure	Centers for Medicare & Medicaid Services (CMS): Administrator:	Responsible for federal oversight of Medicaid programs, including ensuring state compliance with fed
Ned Lamont	Ned Lamont	Governor of Connecticut:	The executive authority overseeing state agencies, including DSS and CHRO, with the power to order r
Dr. Manisha Juthani	Dr. Manisha Juthani	Connecticut Department of Public Health (DPH):	Ensures state compliance with health-related ADA requirements and public health safety.
Gary Winfield	Gary Winfield	Connecticut General Assembly, Judiciary Committee:	Legislative oversight for state agency practices, including transparency, civil rights compliance, a



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Andrés J. Gallegos	Andrés J. Gallegos	National Council on Disability (NCD): Chair:	Federal agency advising the President and Congress on disability policies, including ADA compliance
Alina M. Semo	Alina M. Semo	Office of Government Information Services (OGIS): Director:	Mediates FOIA disputes and ensures transparency in government operations.
Gene L. Dodaro	Gene L. Dodaro	U.S. Government Accountability Office (GAO): Comptroller General	Investigates misuse of federal funds and systemic inefficiencies in federally funded programs like M
Andrea Barton Reeves	Andrea Barton Reeves	Connecticut Department of Social Services (DSS): Leadership: Commissioner	Connecticut Department of Social Services (DSS): Leadership: Commissioner
Tanya Hughes	Tanya Hughes	Connecticut Commission on Human Rights and Opportunities (CHRO): Leadership: Executive Director	Connecticut Commission on Human Rights and Opportunities (CHRO): Leadership: Executive Director
William Tong	William Tong	Connecticut Attorney General's Office: Leadership: Attorney General	Connecticut Attorney General's Office: Leadership: Attorney General



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Kristen Clarke	Kristen Clarke	U.S. Department of Justice (DOJ), Civil Rights Division: Leadership: Assistant Attorney General	U.S. Department of Justice (DOJ), Civil Rights Division: Leadership: Assistant Attorney General
Melanie Fontes Rainer	Melanie Fontes Rainer	U.S. Department of Health and Human Services (HHS), Office for Civil Rights (OCR): Leadership: Dire	U.S. Department of Health and Human Services (HHS), Office for Civil Rights (OCR): Leadership: Dire
Ned Lamont	Ned Lamont	State of Connecticut Leadership: Governor	State of Connecticut Leadership: Governor
Jeffrey Beckham	Jeffrey Beckham	Connecticut Office of Policy and Management (OPM): Secretary	Oversees budget and funding allocation, including Medicaid funds. Negligence or failure to ensure pr
Dr. Manisha Juthani	Dr. Manisha Juthani	Connecticut Department of Public Health (DPH): Commissioner	Connecticut Department of Public Health (DPH): Commissioner
Colleen M. Murphy	Colleen M. Murphy	Executive Director and General Counsel	Connecticut Freedom of Information Commission (FOIC):



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Martin M. Looney	Martin M. Looney	Connecticut General Assembly (CGA): Senate President Pro Tempore	Responsible for legislative oversight of state agencies like DSS and CHRO. Inaction or failure to in
Matthew Ritter	Matthew Ritter	House Speaker	Responsible for legislative oversight of state agencies like DSS and CHRO. Inaction or failure to in
Chiquita Brooks-LaSure	Chiquita Brooks-LaSure	Centers for Medicare & Medicaid Services (CMS): Administrator	Centers for Medicare & Medicaid Services (CMS): Administrator
Charlotte Burrows	Charlotte Burrows	U.S. Equal Employment Opportunity Commission (EEOC):	U.S. Equal Employment Opportunity Commission (EEOC): Chair
Henry Kerner	Henry Kerner	Office of Special Counsel (OSC):	ederal oversight for whistleblower complaints. If whistleblower disclosures were ignored or mishandl
Gene L. Dodaro	Gene L. Dodaro	U.S. Government Accountability Office (GAO): Comptroller General	U.S. Government Accountability Office (GAO): Comptroller General
Christi A. Grimm	Christi A. Grimm	Office of Inspector General (OIG), Department of Health and Human Services:	OIG is tasked with investigating fraud, waste, and abuse in federally funded programs like Medicaid.



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		Inspector General	
Deidre S. Gifford	Deidre S. Gifford	Commissioner, Connecticut Department of Social Services (DSS)	Oversaw the agency's discriminatory practices, denial of ADA accommodations, and retaliatory actions
Tanya Hughes	Tanya Hughes	Executive Director, Connecticut Commission on Human Rights and Opportunities (CHRO)	Failed to ensure the investigation of complaints, neglected to assign case numbers, and ignored stat
William Tong	William Tong	Connecticut Attorney General	Ignored evidence of systemic failures and violations, failing to intervene or hold DSS and CHRO acco
Merrick B. Garland	Merrick B. Garland	U.S. Attorney General, Department of Justice (DOJ)	U.S. Attorney General, Department of Justice (DOJ)
Xavier Becerra	Xavier Becerra	Secretary, U.S. Department of Health and Human Services (HHS)	Neglected oversight responsibilities related to ADA compliance within Medicaid-funded programs.
Chiquita Brooks-LaSure	Chiquita Brooks-LaSure	Administrator, Centers for Medicare & Medicaid Services (CMS)	Role: Allowed systemic Medicaid mismanagement and misuse of federal funds without intervention.
Lisa J. Pino	Lisa J. Pino	Director, Office for Civil Rights (OCR), HHS	Failed to enforce ADA compliance and investigate systemic discrimination and retaliatory practices w



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Manisha Juthani, MD	Manisha Juthani, MD	Commissioner, Connecticut Department of Public Health (DPH)	Oversees public health policies and programs, potentially involved in Medicaid oversight and ADA com
Deidre S. Gifford, MD, MPH	Deidre S. Gifford, MD, MPH	Commissioner, Connecticut Department of Social Services (DSS)	Commissioner, Connecticut Department of Social Services (DSS)
Andrea	Barton Reeves	Commissioner, Connecticut Department of Social Services (DSS)	Commissioner, Connecticut Department of Social Services (DSS)
William Tong	William Tong	Attorney General, State of Connecticut	Legal oversight of state agencies, failed to act on documented violations and complaints
Tanya Hughes	Tanya Hughes	Executive Director, Connecticut Commission on Human Rights and Opportunities (CHRO)	Executive Director, Connecticut Commission on Human Rights and Opportunities (CHRO)
Xavier Becerra	Xavier Becerra	Secretary, U.S. Department of Health and Human Services (HHS)	Secretary, U.S. Department of Health and Human Services (HHS)
Chiquita Brooks-LaSure	Chiquita Brooks-LaSure	Administrator, Centers for Medicare & Medicaid Services (CMS)	Administrator, Centers for Medicare & Medicaid Services (CMS)



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*Denotes required fields.

Kristen Clarke	Kristen Clarke	Assistant Attorney General, Civil Rights Division, U.S. Department of Justice (DOJ)	Assistant Attorney General, Civil Rights Division, U.S. Department of Justice (DOJ)
Robyn M. Colosimo	Robyn M. Colosimo	Acting Special Counsel, U.S. Office of Special Counsel (OSC)	Acting Special Counsel, U.S. Office of Special Counsel (OSC)
Richard Blumenthal	Richard Blumenthal	U.S. Senator for Connecticut	advocate for federal investigations and legislative oversight of state misconduct.
Chris Murphy	Chris Murphy	U.S. Senator for Connecticut	advocate for ensuring ADA compliance and whistleblower protections.
Rosa DeLauro	Rosa DeLauro	U.S. Representative, Connecticut's 3rd District	Focus on federal Medicaid and social services programs.
Andrea Barton Reeves – Commissioner, DSS	Andrea Barton Reeves – Commissioner, DSS	Andrea Barton Reeves – Commissioner, DSS	Andrea Barton Reeves – Commissioner, DSS
Dr. Deidre S. Gifford – Former Commissioner, DSS	Dr. Deidre S. Gifford – Former Commissioner, DSS	Dr. Deidre S. Gifford – Former Commissioner, DSS	Dr. Deidre S. Gifford – Former Commissioner, DSS
Tanya Hughes – Executive Director, CHRO	Tanya Hughes – Executive Director, CHRO	Tanya Hughes – Executive Director, CHRO	Tanya Hughes – Executive Director, CHRO
William Tong – Attorney General, Connecticut	William Tong – Attorney General, Connecticut	William Tong – Attorney	William Tong – Attorney General, Connecticut



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		General, Connecticut	
Chiquita Brooks-LaSure – Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure – Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure – Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure – Administrator, Centers for Medicare & Medicaid Services (CMS)
Xavier Becerra – Secretary, U.S. Department of Health and Human Services (HHS)	Xavier Becerra – Secretary, U.S. Department of Health and Human Services (HHS)	Xavier Becerra – Secretary, U.S. Department of Health and Human Services (HHS)	Xavier Becerra – Secretary, U.S. Department of Health and Human Services (HHS)
Rebecca Bond – Chief, Disability Rights Section, DOJ Civil Rights Division	Rebecca Bond – Chief, Disability Rights Section, DOJ Civil Rights Division	Rebecca Bond – Chief, Disability Rights Section, DOJ Civil Rights Division	Rebecca Bond – Chief, Disability Rights Section, DOJ Civil Rights Division
Governor Ned Lamont – Governor of Connecticut	Governor Ned Lamont – Governor of Connecticut	Governor Ned Lamont – Governor of Connecticut	Governor Ned Lamont – Governor of Connecticut
Jeffrey Beckham – Secretary, OPM	Jeffrey Beckham – Secretary, OPM	Connecticut Office of Policy and Management (OPM):	Connecticut Office of Policy and Management (OPM):
Matthew Ritter – Speaker of the House	Matthew Ritter – Speaker of the House	Connecticut General Assembly (CGA):	Connecticut General Assembly (CGA):



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Martin M. Looney – Senate President	Martin M. Looney – Senate President	Martin M. Looney – Senate President	Responsible for approving state Medicaid budgets and reforms.
Rob Kane	Rob Kane	State Auditors	Tasked with auditing state agencies for financial mismanagement, including Medicaid funds.
John C. Geragosian	John C. Geragosian	State Auditors	Tasked with auditing state agencies for financial mismanagement, including Medicaid funds.
Sean Scanlon	Sean Scanlon	State Comptroller	Monitors DSS Medicaid- related expenditures and financial reporting.
Chiquita Brooks- LaSure – Administrator, CMS	Chiquita Brooks- LaSure – Administrator, CMS	Chiquita Brooks-LaSure – Administrator, CMS	Chiquita Brooks-LaSure – Administrator, CMS
Xavier Becerra – Secretary, HHS	Xavier Becerra – Secretary, HHS	Xavier Becerra – Secretary, HHS	Responsible for monitoring Medicaid mismanagement in Connecticut.
Gene L. Dodaro – Comptroller General of the United States	Gene L. Dodaro – Comptroller General of the United States	Comptroller General of the United States	Leads federal reviews of wasteful practices involving Medicaid funds.
Christi A. Grimm – Inspector General, HHS	Christi A. Grimm – Inspector General, HHS	Christi A. Grimm – Inspector General, HHS	Conducts investigations into Medicaid fraud, waste, and abuse.
Henry J. Kerner – Special Counsel, U.S. Office of Special Counsel (OSC)	Henry J. Kerner – Special Counsel, U.S. Office of Special Counsel (OSC)	Henry J. Kerner – Special Counsel, U.S. Office of Special Counsel (OSC)	Enforces whistleblower protection for those reporting waste or mismanagement.



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REQUESTED OSC ACTION

What action would you like OSC to take?

Request for Federal Representation and Protection to Restore Constitutional Rights
To the U.S. Office of Special Counsel (OSC):

This complaint requires immediate federal representation to protect David Medeiros, a whistleblower, taxpayer advocate, and person with a disability, whose constitutional rights have been systematically violated by Connecticut state agencies. The federal government must act decisively to ensure that David's rights under the First, Fifth, and Fourteenth Amendments, as well as federal statutes like the Americans with Disabilities Act (ADA) and the Whistleblower Protection Act, are restored and protected.

Specific Actions Requested for Representation and Protection

Immediate Federal Representation

Federal Counsel Appointment: Appoint a federally funded attorney or representative to ensure David's constitutional rights are fully protected and enforced.

Direct Oversight of Legal Proceedings: Federal representatives must oversee all ongoing interactions between David and Connecticut agencies to prevent further violations or retaliation.

Protection from Retaliation: Establish safeguards ensuring David is no longer subjected to exclusion, discrimination, or retaliatory actions by state agencies or officials.

Restoration of Constitutional Rights

First Amendment: Reinforce David's right to petition the government for redress of grievances without fear of retaliation or obstruction.

Fifth Amendment: Ensure due process protections are upheld, requiring transparent and timely responses to David's complaints and FOIA requests.

Fourteenth Amendment: Address systemic discrimination and ensure equal protection under the law, particularly as it pertains to David's disability and whistleblower status.

Mandate ADA Compliance and Accessibility

Guarantee Accommodations: Require Connecticut agencies to provide ADA-compliant accommodations, including accessible communication formats and simplified procedures, tailored to David's cognitive needs as a traumatic brain injury survivor.

Independent Audit of ADA Compliance: Conduct a federal audit of ADA adherence within Connecticut's federally funded programs, including DSS's administration of the ABI Waiver Program.



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Federal Oversight to Enforce Accountability

Assign a Federal Monitor: Appoint an independent federal monitor to oversee the actions of Connecticut agencies, ensuring compliance with constitutional and statutory obligations.

Investigate Retaliatory Practices: Launch a federal investigation into retaliatory actions by Connecticut state officials against David Medeiros, holding violators accountable.

Restorative Justice for David Medeiros

Public Acknowledgment: Require Connecticut agencies to publicly acknowledge their violations of David's rights and take corrective action.

Financial Restitution: Compensate David for the personal, professional, and financial harm caused by the systemic violations and retaliatory practices.

Reinstatement of Advocacy Rights: Ensure David's ability to advocate for vulnerable populations, including individuals with disabilities, is fully restored without obstruction or exclusion.

Set a National Precedent

Protect All Whistleblowers: Use David's case to establish stronger federal protections for whistleblowers, ensuring no individual faces similar violations or retaliation in the future.

Strengthen Constitutional Safeguards: Reinforce federal mechanisms to prevent states from undermining constitutional and civil rights.

Systemic Reform Across States: Mandate reforms ensuring all states comply with federal laws protecting taxpayers, individuals with disabilities, and whistleblowers.

Conclusion

David Medeiros has endured severe constitutional violations, systemic discrimination, and targeted retaliation as a whistleblower and disability advocate. The federal government has a moral and legal obligation to represent and protect him, ensuring that his rights are fully restored and upheld.

By providing federal representation and enforcing constitutional and statutory protections, OSC can not only deliver justice for David but also set an enduring example for safeguarding the rights of all Americans, particularly those most vulnerable to systemic failures.

WHERE ELSE DID YOU REPORT THIS MATTER?

I have also disclosed this information to:



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Other Action Type	Action Taken Date

Additional information about reports to Inspectors General, if applicable.

First Name:

Last Name:

Title:

Address:

Email Address:

Telephone Number:

Case ID #:

a. **What is the status of the matter?**

NOTE: MATTERS INVESTIGATED BY AN OFFICE OF INSPECTOR GENERAL

It is the general policy of OSC not to transmit allegations of wrongdoing to the head of the agency involved if the agency's Office of Inspector General has fully investigated, or is currently investigating, the same allegations.

ATTACHMENTS

Please note that the space available for attachments is limited. Therefore, DO NOT attach every document and email that may be relevant to your claim. You will have an opportunity to make additional submissions at a later date. We recommend limiting attachments to official forms and correspondence that document the action(s) at issue in your disclosure if these documents are relevant to your allegations.

I have attached the following documents to my filing:

File Name
Federal Representation for Justice DB.42.131.Inf. Medeiros Connecticut 11.28.2024 .pdf
DAVID MEDEIROS VS CONNECTICUT DEPARTMENT OF SOCIAL SERVICES DSS CT GOV 10.30.2024 .PDF
10.24.2024 DOJ complaint Submission complete.pdf
DAVID MEDEIROS VS CONNECTICUT DEPARTMENT OF SOCIAL SERVICES DSS CT GOV 10.30.2024 (1).PDF
October 30, 2024 - David Medeiros VS Connecticut Department of Social Services DSS CT gov.docx



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CHRO CASE DSS 24 4 Filed Complaint Against Connecticut DSS Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
CHRO CASE DSS 24 3 Filed Complaint Against Connecticut DSS Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
CHRO CASE DSS 24 2 Filed Complaint Against Connecticut DSS Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
CHRO CASE DSS 24 Filed Complaint Against Connecticut DSS Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
OSCFiling-MedeirosDavid-DI-112620241121.pdf
requests (9).csv
requests (8).csv
requests (7).csv
11.27.2024 Escalated Complaint FOIA Non-Compliance ADA Violations Constitutional Violations and Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
11.27.2024 Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
090620247088 cms No Records Response Letter (1).pdf
01.02.2024 COMPLAINT LETTER.docx
11.23.2024 Binder1.pdf
09.24.2024
Federal Intervention HHS_OIG_CMS_GAO_DOJ_OCR_Whistleblower_Report_2024.pdf
Comprehensive Grievance Report and Request for Clarity Whistleblower Report Mediciad ABI Waiver Programs.pdf
11.27.2024 ALL MUCKROCK TO DATE Binder1 .pdf
FOIA .zip
01.04.2024 CHRO AUDITS Binder2.pdf
000_2024-10-29 17_24_21.003990+00_00_comm.txt
01.01.2024 2nd FOIA.gov - Freedom of Information Act_ Create a request.pdf
Medeiros Response.pdf
Governor Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
12.14.2023 Dear Matthew S. Antonetti CT DSS .pdf
01.02.2024 COMPLAINT LETTER.docx
2410220 CAR Dismissal .pdf
10.22.2024 10.39 am CHRO Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
2410220 CP Email with Documents 2.4.24.msg
2410220 CAR Dismissal .pdf
2410220 Release of Jurisdiction.pdf



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2410220 CAR Dismissal .pdf
2410220 Answer Part 1 of 2.pdf
2410220 Affidavit.pdf
12.23.2023 CHRO COMPLAINT .docx
Admin-CL (1).pdf
01.26.2024 Binder1.pdf
dss foia ghewtfrg Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
ABI Forum 2024.pdf
12.23.2023 Governor Ned Lamont. David Medeiros ABI Resources Call for Systemic Reform in Response to ADA Accommodation Failures and Disability Discrimination Whistleblower Retaliation Compliance CT DSS COU CHRO .pdf
11.27.2024 ALL MUCKROCK TO DATE Binder1 .pdf

CONSENT

Do you consent to the disclosure of your identify to others outside OSC if it becomes necessary in taking further action on this matter?*

I consent to disclosure of my identity.

Yes

I do not consent to disclosure of my identity. (Even if you do not consent, OSC may disclose your identity if necessary due to an imminent danger to public health or safety or imminent violation of any criminal law. See 5 U.S.C. § 1213(h).)

No

CERTIFICATION

I certify that all of the statements made in this complaint are true, complete, and correct to the best of my knowledge and belief. I understand that a false statement or concealment of a material fact is a criminal offense punishable by a fine, imprisonment, or both. 18 U.S.C. § 1001.*

Yes



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BURDEN: The burden for this collection of information (including the time for reviewing instructions, searching existing data sources, gathering the data needed, and completing and reviewing the form) is estimated to be an average of one hour to submit a disclosure of information alleging agency wrongdoing, one hour and fifteen minutes to submit a complaint alleging a prohibited personnel practice or other prohibited activity, or 30 minutes to submit a complaint alleging prohibited political activity. Please send any comments about this burden estimate, and suggestions for reducing the burden, to the U.S. Office of Special Counsel, General Counsel's Office, 1730 M Street, NW, Suite 218, Washington, DC 20036-4505.

This Disclosure of Information was Received by OSC on: 11/28/2024

PLEASE KEEP A COPY OF YOUR COMPLAINT, ANY SUPPORTING DOCUMENTATION, AND ANY ADDITIONAL ALLEGATIONS THAT YOU SEND TO OSC NOW OR AT ANY TIME WHILE YOUR COMPLAINT IS PENDING. REPRODUCTION CHARGES UNDER THE FREEDOM OF INFORMATION ACT MAY APPLY TO ANY REQUEST YOU MAKE FOR COPIES OF MATERIALS THAT YOU PROVIDED TO OSC.



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IMPORTANT INFORMATION ABOUT FILING A DISCLOSURE

OSC WHISTLEBLOWER DISCLOSURE CHANNEL

Under 5 U.S.C. § 1213 and related provisions, the Office of Special Counsel (OSC) serves as a secure channel for federal employees, former federal employees, and applicants for federal employment with reliable knowledge of the wrongdoing to disclose:

- a violation of law, rule or regulation;
- gross mismanagement;
- gross waste of funds;
- an abuse of authority;
- a substantial and specific danger to public health or safety; and/or
- censorship related to scientific research.

OSC JURISDICTION

OSC has no jurisdiction over disclosures filed by:

- employees of the U.S. Postal Service and the Postal Regulatory Commission;
- members of the armed forces of the United States (*i.e.*, non-civilian military employees);
- state employees operating under federal grants;
- employees of federal contractors;
- other employees or federal agencies that are exempt under federal law; and
- Congressional or judicial branch employees.

ANONYMOUS SOURCES

While OSC will protect the identity of persons who make disclosures, it will not consider anonymous disclosures. If a disclosure is filed by an anonymous source, the disclosure will be referred to the Office of Inspector General in the appropriate agency. OSC will take no further action.

RETALIATION

Do you believe you suffered retaliation by your agency for disclosing wrongdoing? If yes, you may file a complaint of retaliation by navigating back to "My Cases" and selecting "New Complaint." Select Option 1 to complete and submit a Complaint of Prohibited Personnel Practice or other Prohibited Activity (PPPs). *If you have already completed the Complaint of Prohibited Personnel Practice or other Prohibited Activity above, please continue with this Disclosure.* PPPs are employment-related activities that are banned in the federal workforce.



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PPPs generally involve some type of personnel decision or action and may result in personal relief for people who have been subject to a PPP. For example, if we find that you were removed from federal service in retaliation for whistleblowing, OSC may act to get your job back. PPPs can also include allegations of harassment, failure to issue appraisals, and improper hiring. Do not file a disclosure to report retaliation or other PPPs.

CONTACT INFORMATION

Title:

First Name:* David

Middle Initial:

Last Name:* Medeiros

International Address?: No

Address:*

215 Mountain St
Willimantic, CT 06226

Cell Phone Number:

Home Phone Number:

Office Phone Number:

Ext.

Email Address:* aabiwr@live.com

Preferred means of contact:

Email: Yes

Cell phone: No

Home phone: No

Office phone: No

REPRESENTATIVE INFORMATION

Do you have representation? No

Information about representative, if applicable.

First Name:*

Middle Initial:

Last Name:*

International Address?:

Address: *



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*Denotes required fields.

Office Phone Number:

Ext.

Cell Phone Number:

Home Phone Number:

Email Address:

EMPLOYMENT INFORMATION

Name of Department/Agency about which you are making a disclosure.

Department:* Justice

Agency:* Office Of The Inspector General

Agency subcomponent: Office of the Inspector General (OIG) For DOJ: Disability Rights
Section For HHS: Office for Civil R

Street Address: 950 Pennsylvania Avenue NW

City: Washington

State: DC

Zip Code: 20201

Employment Status:* Non-Federal Employee (please specify)

Title	Series	Grade

Please provide your dates of employment in this position.

Employment Service Type	Employment Service Subtype	If Other (specify)
Excepted Service	Other	Private Citizen, Advocate, and Whistleblower
Other	Other	Private Citizen, Advocate, and Whistleblower

Are you covered by a collective bargaining agreement?



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DETAILS OF YOUR DISCLOSURES

Please identify the type of wrongdoing that you are alleging. You can make multiple disclosures, but you **MUST** choose one option. If you check "violation of law, rule, or regulation," specify, if you can, the particular law, rule or regulation violated (by name, subject, and/or legal citation). For each allegation, please answer the following questions (be as specific as possible). Please keep in mind that you will have an opportunity to provide more information and someone from OSC will contact you.

If OSC determines there is a substantial likelihood of wrongdoing, OSC will refer your disclosures to the involved agency for an investigation and report. To meet the substantial likelihood standard, there must be a significant probability that the information reveals wrongdoing that falls within one or more of the categories above. In its evaluation, OSC considers the strength, reliability, and credibility of the disclosures. If the substantial likelihood determination cannot be made, OSC will determine whether there is sufficient information to exercise its discretion to refer the allegations.

DISCLOSURES

Allegation	Violation of Law, Rule or Regulation
What action did they take?	Actions Taken by the Involved Parties 1. Connecticut Department of Social Services (DSS): - Publicly ridiculed and excluded David Medeiros during ABI Waiver forums, violating ADA and First Amendment protections. - Refused to provide ADA-mandated accommodations, including accessible communication formats and simplified processes. - Obstructed access to critical information about Medicaid programs, including ABI Waiver policies, in violation of FOIA. - Retaliated against David Medeiros for whistleblowing on systemic Medicaid mismanagement. 2. Connecticut Commission on Human Rights and Opportunities (CHRO): - Refused to assign a case number or investigate David's notarized complaint alleging ADA violations and discrimination by DSS. - Ignored follow-up inquiries regarding the status of the complaint, denying due process and perpetuating



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	discrimination. 3. Connecticut Attorney General's Office: • Failed to act on evidence submitted by David Medeiros regarding DSS misconduct and CHRO's inaction. • Neglected its statutory duty to uphold constitutional and civil rights protections in Connecticut, effectively enabling systemic violations. 4. U.S. Department of Justice (DOJ), Civil Rights Division: • Ignored David's formal complaints regarding ADA violations, whistleblower retaliation, and systemic corruption within Connecticut's Medicaid program. • Failed to investigate or enforce federal protections, allowing violations to persist unchecked. 5. U.S. Department of Health and Human Services (HHS), Office for Civil Rights (OCR): • Did not investigate systemic ADA violations in Connecticut's Medicaid program, despite clear evidence of non-compliance and harm to individuals with disabilities. 6. Connecticut Governor's Office: • Failed to intervene or provide oversight of DSS and CHRO despite being alerted to systemic violations and retaliation against David Medeiros. 7. Centers for Medicare & Medicaid Services (CMS): • Did not enforce federal Medicaid oversight to ensure that Connecticut DSS complies with federal regulations and ADA mandates. Summary of Actions: • Exclusion: Agencies excluded David from forums and processes critical to his advocacy and whistleblower activities. • Retaliation: State and federal actors retaliated against David for exposing Medicaid mismanagement, violating whistleblower protections. • Non-Compliance: Agencies failed to uphold ADA requirements and constitutional rights, creating systemic barriers and procedural delays. • Neglect: Federal oversight bodies deferred action, enabling Connecticut agencies to act with impunity. Constitutional Violations and Crimes Committed 12. First Amendment Violations • Suppression of Petition Rights: By ignoring David Medeiros' complaints and failing to investigate or act on his claims, Connecticut state agencies and federal oversight bodies have



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	suppressed his constitutional right to petition the government for redress of grievances. • Retaliation Against Free Speech: Retaliatory actions, such a
When did this occur?	Timeline of Events October 24, 2024 – Filing of CHRO Complaint David Medeiros submitted a notarized complaint to the Connecticut Commission on Human Rights and Opportunities (CHRO), detailing ADA violations, systemic discrimination, and retaliation by the Connecticut Department of Social Services (DSS). October 30, 2024 – Follow-Up with CHRO David requested a status update and assignment of a case number for his complaint. CHRO failed to respond, creating procedural barriers to justice. November 1, 2024 – Appeal to Connecticut Attorney General David escalated his complaints to the Connecticut Attorney General's Office, providing evidence of systemic violations and requesting oversight of DSS and CHRO. The Attorney General's Office did not respond or take any action. November 10, 2024 – Submission to DOJ David submitted a comprehensive complaint to the U.S. Department of Justice (DOJ), detailing ADA violations, constitutional breaches, whistleblower retaliation, and systemic mismana
How did you discover this action?	3. When did this occur? ChatGPT said: Timeline of Events October 24, 2024 – Filing of CHRO Complaint David Medeiros submitted a notarized complaint to the Connecticut Commission on Human Rights and Opportunities (CHRO), detailing ADA violations, systemic discrimination, and retaliation by the Connecticut Department of Social Services (DSS). October 30, 2024 – Follow-Up with CHRO David requested a status update and assignment of a case number for his complaint. CHRO failed to respond, creating procedural barriers to justice. November 1, 2024 – Appeal to Connecticut Attorney General David escalated his complaints to the Connecticut Attorney General's Office, providing evidence of systemic violations and requesting oversight of DSS and CHRO. The Attorney General's Office did not respond or take any action. November 10, 2024 –



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	Submission to DOJ David submitted a comprehensive complaint to the U.S. Department of Justice (DOJ), detailing ADA violations, constitutional breaches, whistleblower retaliation, and systemic mismanagement by Connecticut agencies. Despite the urgency, the DOJ failed to initiate an investigation or enforce compliance. November 28, 2024 – Current Status CHRO: Refuses to assign a case number or act on David’s complaint, obstructing due process. Connecticut Attorney General: Has ignored all communications, abdicating responsibility for overseeing state agency compliance. DOJ: Has not taken substantive action to investigate federal violations or ensure ADA compliance. HHS OCR: Remains unresponsive despite its mandate to enforce ADA compliance and Medicaid program integrity. These violations and inactions have created a continuous pattern of systemic neglect and retaliation against David Medeiros, with no resolution or accountability to date. You said: 4. How did you discover this action? ChatGPT said: How the Action Was Discovered David Medeiros, as a whistleblower and disability advocate, discovered the actions through direct personal experience and documentation, which include: Personal Experience with Discrimination and Retaliation David experienced firsthand acts of exclusion, public ridicule, and procedural barriers during interactions with Connecticut Department of Social Services (DSS) officials. For example: He was excluded from critical discussions related to the ABI Waiver Program. He was subjected to public ridicule during forums, despite being a known advocate for individuals with disabilities and a whistleblower exposing Medicaid mismanagement. Documented Failures of State Agencies David submitted a notarized complaint to the Connecticut Commission on Human Rights and Opportunities (CHRO) detailing ADA violations and retaliation. However, CHRO failed to acknowledge the complaint, assign a case number, or investigate the allegations, creating procedural obstacles. Evidence of Inaction by the Connecticut Attorney General Despite



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	escalating the matter and providing comprehensive evidence of systemic failure
What additional facts support your allegation?	Additional Facts Supporting the Allegation Documented Failures by State Agencies Connecticut Commission on Human Rights and Opportunities (CHRO): David Medeiros submitted a notarized complaint to CHRO on October 24, 2024, detailing ADA violations and systemic retaliation by DSS. CHRO failed to: Assign a case number. Investigate the allegations. Provide any substantive acknowledgment or response, violating its statutory mandate to investigate discrimination complaints. This procedural inaction obstructs justice and denies David's right to due process. Connecticut Department of Social Services (DSS) Retaliation: DSS officials publicly ridiculed David during ABI Waiver forums and excluded him from critical discussions, despite his role as a whistleblower and disability advocate. DSS has refused to provide reasonable ADA accommodations, including accessible communication formats (e.g., email-only correspondence), in direct violation of the ADA and Section 504 of the Rehabilitation Act. Inaction by the Connecticut Attorney General's Office: Despite receiving evidence of systemic ADA violations, whistleblower retaliation, and Medicaid mismanagement, the Attorney General's Office failed to investigate or respond, abdicating its responsibility to enforce state and federal laws. Federal Oversight Failures: The U.S. Department of Justice (DOJ) and the Department of Health and Human Services Office for Civil Rights (HHS OCR) were notified of systemic ADA violations, whistleblower retaliation, and constitutional breaches in November 2024. Despite this, no federal investigations or enforcement actions have been initiated, perpetuating state agency misconduct. Evidence of ADA Non-Compliance: DSS repeatedly refused David's requests for ADA-compliant communication, such as screen-reader-compatible documents and simplified processes, exacerbating the challenges he faces as a traumatic brain injury (TBI) survivor. Mismanagement of Public Funds: DSS has



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	obstructed transparency regarding Medicaid fund usage, particularly funds allocated to the ABI Waiver Program. This raises significant concerns about potential misuse or mismanagement of taxpayer dollars. Exploitation of Disability: State and federal officials are aware of David's brain injury and cognitive challenges, yet they have exploited his disability by creating procedural barriers and denying accommodations, effectively excluding him from advocacy and justice processes. Pattern of Systemic Corruption and Retaliation: Agencies at both the state and federal levels have demonstrated a clear pattern of protecting their leadership and shielding systemic inefficiencies, corruption, and discrimination, rather than addressing legitimate complaints. By refusing to act on whistleblower disclosures, these agencies have enabled misconduct, eroded public trust, and fostered an environment where accountability is absent. Violation of Transparency Laws: DSS and CHRO have failed to comply with Freedom of Information
Allegation	Gross Mismanagement
What action did they take?	The listed individuals and entities engaged in or facilitated actions that collectively constitute systemic violations of constitutional rights, ADA non-compliance, whistleblower retaliation, and mismanagement of public funds. These actions include: 1. Suppression of Whistleblower Rights and Retaliation DSS (Connecticut Department of Social Services): Publicly ridiculed and excluded David Medeiros from critical forums related to Medicaid and the ABI Waiver Program. Obstructed David's advocacy efforts by withholding ADA-mandated accommodations, such as accessible communication formats and email-only correspondence. Refused to provide requested records or updates, effectively silencing his whistleblowing efforts and suppressing public accountability. CHRO (Commission on Human Rights and Opportunities): Refused to assign a case number to David's notarized complaint, delaying and obstructing justice. Failed to investigate claims of systemic discrimination and retaliation, despite statutory



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	mandates. Connecticut Attorney General's Office: Ignored multiple submissions of evidence regarding DSS misconduct and CHRO's failure to act. Failed to intervene or provide oversight to enforce transparency, ADA compliance, and whistleblower protections. 2. Violations of ADA Protections and Disability Rights DSS: Denied reasonable accommodations to David Medeiros, a traumatic brain injury (TBI) survivor, making it impossible for him to meaningfully participate in public processes. Weaponized David's disability by exploiting his cognitive challenges to create procedural delays, obstruct communication, and undermine his advocacy. CHRO: Failed to enforce ADA and anti-discrimination statutes by not investigating documented violations or taking any corrective actions. Federal Agencies (DOJ, HHS OCR, CMS): Neglected oversight responsibilities to ensure ADA compliance and accessibility in Connecticut's Medicaid program, enabling DSS to continue discriminatory practices unchecked. 3. Mismanagement of Public Funds and Lack of Transparency DSS: Withheld public records related to Medicaid fund allocations, including the ABI Waiver Program, violating FOIA and state transparency laws. Mismanaged Medicaid resources by failing to meet federal ADA standards while continuing to receive federal funding. Federal Agencies (CMS, HHS OCR): Failed to audit or investigate the misuse of Medicaid funds in Connecticut, despite whistleblower complaints highlighting systemic issues. 4. Abuse of Authority and Gross Mismanagement Connecticut Leadership (OPM, Governor's Office): Allowed systemic failures in oversight and enforcement by not addressing persistent complaints of corruption, discrimination, and retaliation. Enabled DSS and CHRO's non-compliance with state and federal laws by failing to enact structural reforms. Federal Agencies (DOJ, OSC): Ignored whistleblower reports and failed to initiate investigations into Connecticut's systemic mismanagement of Medicaid and ADA violat



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When did this occur?	Timeline of Events October 24, 2024 – Filing of CHRO Complaint David Medeiros submitted a notarized complaint to the Connecticut Commission on Human Rights and Opportunities (CHRO), detailing ADA violations, systemic discrimination, and retaliation by the Connecticut Department of Social Services (DSS). October 30, 2024 – Follow-Up with CHRO David requested a case number and an update on the status of his complaint. CHRO failed to respond or assign a case number, effectively obstructing the complaint process. November 1, 2024 – Appeal to Connecticut Attorney General David submitted evidence and documentation to the Connecticut Attorney General’s Office, requesting oversight and intervention to address systemic misconduct by DSS and CHRO. The Attorney General’s Office ignored the submission and failed to act. November 10, 2024 – Escalation to DOJ David submitted a detailed whistleblower complaint to the U.S. Department of Justice (DOJ), highlighting ADA violations, FOIA non-compliance
How did you discover this action?	Discovery of Actions David Medeiros discovered these actions through firsthand experience and documented interactions with the involved parties. The following key events and observations provided evidence of the actions taken against him: Refusal to Assign a Case Number by CHRO After submitting a notarized complaint to CHRO on October 24, 2024, David received no acknowledgment or case number, despite following up multiple times. The lack of response signaled procedural obstruction and a failure to fulfill CHRO’s statutory obligations. Exclusion and Ridicule by DSS During public forums related to the ABI Waiver Program, DSS officials publicly ridiculed and excluded David, creating a hostile environment for his advocacy. Witnesses corroborated these incidents, providing evidence of discriminatory practices. Ignored Submissions to the Attorney General’s Office Despite submitting detailed evidence of DSS and CHRO misconduct to the Attorney General on November 1, 2024, no acknowledgment or action was taken. This



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	inaction became apparent when repeated attempts to follow up were ignored. Federal Oversight Failures Complaints to the DOJ and HHS OCR, submitted on November 10, 2024, included comprehensive documentation of ADA violations, whistleblower retaliation, and systemic mismanagement. The absence of substantive action or follow-up from these federal agencies revealed a broader pattern of neglect and inaction. FOIA and ADA Compliance Failures Requests for ADA-compliant communication and public records related to Medicaid funds and the ABI Waiver Program were either ignored or obstructed. These failures were documented through email exchanges, unanswered requests, and a lack of transparent processes. Each discovery is supported by correspondence records, witness testimony, and David's detailed documentation of the systemic barriers and retaliatory practices he encountered. These actions collectively indicate deliberate neglect and systemic discrimination.
What additional facts support your allegation?	Additional Facts Supporting the Allegations Documented Retaliation and Exclusion by DSS: DSS officials publicly ridiculed David Medeiros during ABI Waiver forums, as corroborated by witnesses and documented in communications. These actions created a hostile environment, directly impeding his ability to advocate for Medicaid beneficiaries and individuals with disabilities. DSS failed to provide reasonable accommodations under the ADA, including email-only correspondence and simplified processes, despite David's documented cognitive challenges as a brain injury survivor. CHRO's Failure to Investigate: Despite submitting a notarized complaint on October 24, 2024, and multiple follow-up communications, CHRO refused to assign a case number or initiate an investigation, violating its statutory obligation to investigate discrimination complaints. CHRO's inaction effectively denied David due process and equal protection under the law, prolonging systemic discrimination and retaliation. Attorney General's Office Inaction: Submissions to the Connecticut Attorney



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	General included detailed evidence of DSS's ADA violations and whistleblower retaliation. Despite the compelling nature of the evidence, the office failed to respond, investigate, or intervene. This neglect demonstrates a disregard for its duty to ensure state agency compliance with federal and state laws. Federal Oversight Failures (DOJ and HHS OCR): The Department of Justice and the Office for Civil Rights at HHS were notified of systemic ADA violations, misuse of Medicaid funds, and whistleblower retaliation. Despite comprehensive documentation, neither agency initiated a substantive investigation or provided updates. Federal inaction perpetuates the culture of impunity within Connecticut's state agencies. FOIA and Transparency Failures: DSS obstructed transparency by refusing to provide records related to Medicaid fund usage and ABI Waiver operations, despite FOIA and state FOIA laws mandating timely responses. Requests for ADA-compliant documents and communication were ignored, compounding David's inability to access critical information. Pattern of Systemic Neglect and Corruption: Connecticut's financial reliance on Medicaid creates an incentive to suppress transparency and accountability. The refusal to investigate whistleblower complaints, accommodate disabilities, or ensure compliance highlights a coordinated effort to shield systemic mismanagement. David Medeiros' Vulnerability as a Brain Injury Survivor: Agencies weaponized David's cognitive challenges to create procedural barriers, delay responses, and obstruct justice, further exacerbating the discrimination and retaliation he faced. The refusal to accommodate his needs constitutes a violation of the ADA and Rehabilitation Act, underscoring the systemic failure to protect vulnerable individuals. Summary of Supporting Evidence: Witness testimony from public forums and interactions with DSS officials. Documentation of corresponden
Allegation	Abuse of Authority



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What action did they take?	Actions Taken: Abuse of Authority State-Level Actions Connecticut Department of Social Services (DSS): Public Ridicule and Exclusion: DSS officials publicly ridiculed David Medeiros during ABI Waiver Program forums, excluding him from discussions critical to Medicaid policy and decision-making. Denial of ADA Accommodations: Refused to provide accessible communication methods, such as email-only correspondence and simplified procedural guidelines, despite documented cognitive challenges from a brain injury. Obstruction of Records Requests: Failed to respond to Freedom of Information Act (FOIA) requests, withheld critical Medicaid documentation, and ignored whistleblower complaints. Retaliation for Whistleblowing: Took retaliatory actions, such as exclusion from forums and non-response to inquiries, after David exposed Medicaid mismanagement and systemic corruption. Connecticut Commission on Human Rights and Opportunities (CHRO): Failure to Investigate: Refused to assign a case number to David's notarized ADA complaint, preventing any investigation into DSS's discriminatory practices. Neglect of Statutory Duties: Ignored repeated follow-up requests for updates on the complaint, effectively obstructing access to justice. Complicity in Discrimination: Enabled DSS's retaliatory actions by failing to act on clear evidence of discrimination and ADA non-compliance. Connecticut Attorney General's Office: Neglect of Oversight Responsibilities: Failed to address or intervene in systemic violations by DSS and CHRO, despite receiving substantial evidence of ADA violations, whistleblower retaliation, and constitutional rights breaches. Shielding State Agencies: Refused to investigate or hold state officials accountable for their misconduct. Federal-Level Actions Department of Justice (DOJ): Failure to Act: Ignored complaints highlighting systemic ADA violations, retaliation against a whistleblower, and constitutional breaches in state-run programs. Deferred Oversight: Allowed Connecticut agencies to operate with impunity by deferring accountability to state authorities.



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	Department of Health and Human Services (HHS): Neglect of ADA Oversight: Failed to enforce ADA compliance within federally funded Medicaid programs despite clear evidence of systemic violations. Lack of Enforcement by OCR: The Office for Civil Rights (OCR) failed to investigate systemic discrimination within Medicaid programs and the actions of DSS. Centers for Medicare & Medicaid Services (CMS): Failure to Address Mismanagement: Neglected to audit or address Medicaid mismanagement under the ABI Waiver Program, enabling further misuse of federal funds and harm to vulnerable populations. Permitting Retaliation: Did not intervene to protect whistleblowers exposing Medicaid corruption. Key Themes of Abuse of Authority: Systemic Retaliation: Agencies targeted David for exposing Medicaid mismanagement and systemic corruption, denying him access to justice and public forums. Weaponized Bureaucr
When did this occur?	Timeline of Occurrence: Abuse of Authority Key Dates and Events October 24, 2024 – Filing of CHRO Complaint: David Medeiros submitted a notarized complaint to CHRO detailing ADA violations and systemic retaliation by DSS. CHRO failed to assign a case number or acknowledge the complaint. October 30, 2024 – Follow-Up with CHRO: David contacted CHRO requesting an update and reiterating the need for a case number. No substantive response or acknowledgment was provided. November 1, 2024 – Appeal to Connecticut Attorney General: Submitted evidence to the Attorney General's Office highlighting DSS's retaliatory actions, ADA violations, and CHRO's inaction. The Attorney General ignored the submission and took no steps to address the complaints. November 10, 2024 – Escalation to Federal Agencies: Detailed complaints submitted to the Department of Justice (DOJ) and the Department of Health and Human Services (HHS) Office for Civil Rights (OCR), citing whistleblower retaliation, ADA non-compl
How did you discover this action?	How This Action Was Discovered David Medeiros discovered the retaliatory actions and discriminatory



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	practices through his direct interactions with state agencies, including CHRO, DSS, and the Attorney General's Office. These interactions were marked by deliberate inaction, procedural barriers, and public exclusion. Key discoveries include: Retaliatory Actions at Public Forums: During ABI Waiver Program discussions, DSS officials publicly ridiculed David and excluded him from critical decision-making processes. These actions were directly observed and documented by David as clear attempts to undermine his advocacy efforts and credibility as a whistleblower. Failure to Respond to ADA Accommodation Requests: Despite repeated requests for reasonable ADA accommodations, including simplified correspondence and email-only communication, DSS and CHRO refused to comply. This non-compliance became evident through continued procedural delays and inaccessible communication methods. CHRO's Refusal to Acknowledge Complaint: After filing a notarized complaint with CHRO on October 24, 2024, David discovered the agency's refusal to assign a case number or take any investigative action. Follow-ups on October 30, 2024, further confirmed CHRO's neglect of its statutory duties. Attorney General's Silence: Evidence submitted to the Connecticut Attorney General's Office on November 1, 2024, was met with complete inaction. David discovered the lack of accountability through the Attorney General's failure to respond to his submissions. Federal Inaction by DOJ and HHS OCR: Complaints escalated to the DOJ and HHS OCR on November 10, 2024, provided detailed documentation of ADA violations, whistleblower retaliation, and systemic misconduct. The absence of follow-up or enforcement from these federal agencies highlighted their neglect. Obstructed FOIA Requests: DSS and CHRO failed to provide timely responses to FOIA requests, further obstructing David's efforts to obtain transparency regarding Medicaid fund usage and agency accountability. Through these events, David identified a coordinated pattern of retaliation, inaction, and systemic



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	discrimination, underscoring a deliberate effort to suppress his advocacy and whistleblower disclosures.
What additional facts support your allegation?	Additional Facts Supporting the Allegation of Abuse of Authority Documented Retaliation and Public Exclusion: DSS Forum Behavior: During ABI Waiver Program forums, DSS officials publicly ridiculed David Medeiros and excluded him from critical discussions, despite his role as a disability advocate and whistleblower. This retaliation was witnessed by multiple attendees and documented in communication records. Exclusion from Decision-Making Processes: Despite being a key stakeholder and advocate for individuals with disabilities, David was systematically excluded from forums and denied opportunities to provide input on critical Medicaid policies. Failure to Investigate by CHRO: Despite filing a notarized complaint on October 24, 2024, detailing ADA violations and retaliation by DSS, CHRO refused to assign a case number or investigate the allegations. This failure to act highlights CHRO's abdication of its statutory responsibility to protect individuals from discrimination. Attorney General's Refusal to Act: On November 1, 2024, David submitted evidence of misconduct and retaliation to the Connecticut Attorney General's Office. The Attorney General's Office has failed to provide acknowledgment, initiate an investigation, or take any corrective action, enabling ongoing abuses. Pattern of ADA Non-Compliance: Multiple ADA accommodation requests, including email-only correspondence and accessible formats for communication, were systematically denied by DSS and CHRO. This lack of compliance demonstrates a deliberate effort to obstruct David's ability to participate meaningfully in governmental processes. FOIA Obstruction: David submitted FOIA requests to DSS and other agencies to obtain records related to Medicaid fund usage and ABI Waiver Program policies. These requests were either ignored or delayed far beyond statutory deadlines, highlighting a pattern of intentional non-compliance and a lack of transparency. Federal Inaction and Neglect:



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	Complaints escalated to the DOJ and HHS OCR on November 10, 2024, were met with silence. Despite being provided with comprehensive evidence of systemic ADA violations, whistleblower retaliation, and misuse of federal funds, federal agencies failed to investigate or enforce compliance. Exploitation of Disability: Agencies are fully aware of David's traumatic brain injury (TBI) and related cognitive challenges but have weaponized these vulnerabilities by creating procedural barriers, ignoring accommodation requests, and delaying responses. This exploitation underscores the systemic nature of the abuse. Medicaid Mismanagement Concerns: DSS's refusal to disclose Medicaid fund usage, particularly regarding the ABI Waiver Program, raises serious concerns about potential mismanagement or misuse of federal funds. The lack of transparency and retaliatory actions suggest an attempt to shield systemic inefficiencies from public scrutiny. Violation of Whistleblower Protections: David's disclosures of Medicaid mismanagement
Allegation	Danger to Public Health
What action did they take?	Actions Taken by the Individuals and Agencies Connecticut Department of Public Health (DPH) Action: Failed to ensure that public health programs under its jurisdiction comply with ADA standards, particularly for individuals with disabilities accessing Medicaid and ABI Waiver services. Did not intervene or enforce oversight when systemic health access violations were reported. Connecticut Department of Social Services (DSS) Action: Publicly ridiculed and excluded David Medeiros during ABI Waiver forums, violating his constitutional rights to free speech and equal participation. Obstructed transparency by refusing to provide records related to Medicaid policies, ABI Waiver management, and whistleblower reports. Failed to provide legally mandated ADA accommodations, including accessible communication formats and reasonable procedural modifications. Actively retaliated against David Medeiros for whistleblowing on Medicaid mismanagement and



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	systemic corruption. Connecticut Attorney General's Office Action: Ignored formal complaints and evidence of systemic failures, including ADA violations and retaliation against David Medeiros. Declined to intervene or enforce legal obligations despite the evidence provided, effectively enabling state agencies to continue discriminatory and retaliatory practices. Connecticut Commission on Human Rights and Opportunities (CHRO) Action: Refused to assign a case number to David Medeiros' notarized discrimination complaint, obstructing access to justice. Failed to investigate ADA violations and retaliation claims, violating its statutory mandate to uphold anti-discrimination laws. Ignored follow-up communications requesting updates on the status of the complaint. U.S. Department of Health and Human Services (HHS), Office for Civil Rights (OCR) Action: Failed to enforce ADA compliance in federally funded Medicaid programs administered by Connecticut DSS. Did not investigate complaints of systemic discrimination or Medicaid mismanagement despite federal jurisdiction. U.S. Department of Justice (DOJ), Civil Rights Division Action: Neglected to act on formal complaints of ADA violations, whistleblower retaliation, and constitutional rights infringements, despite its federal enforcement responsibilities. Allowed Connecticut agencies to continue operating without accountability for systemic misconduct. Federal Elected Officials (Senators and Representatives) Action: Did not advocate for or initiate federal oversight of Connecticut's Medicaid program or address the systemic discrimination and retaliation against whistleblowers. Summary of Retaliatory and Obstructive Actions Systemic exclusion of David Medeiros from public forums and decision-making processes. Suppression of whistleblower allegations through procedural delays, inaction, and retaliation. Weaponization of David's brain injury by refusing ADA-mandated accommodations, effectively silencing his advocacy. Mismanagement of Medicaid funds and denial of transparen



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When did this occur?	Timeline of Events October 24, 2024 – Filing of CHRO Complaint David Medeiros submitted a notarized complaint to the Connecticut Commission on Human Rights and Opportunities (CHRO) regarding ADA violations, discrimination, and retaliation by DSS. October 30, 2024 – Follow-Up with CHRO David followed up with CHRO to request a case number and a status update on his complaint. CHRO failed to respond or provide the requested case number. November 1, 2024 – Appeal to Connecticut Attorney General's Office David submitted evidence and a formal appeal to the Connecticut Attorney General, outlining DSS misconduct, CHRO inaction, and systemic ADA violations. The Attorney General ignored this submission. November 10, 2024 – Complaint Escalation to Federal Agencies David submitted formal complaints to the U.S. Department of Justice (DOJ) Civil Rights Division and the Office for Civil Rights (OCR) under the Department of Health and Human Services (HHS). These complaints detailed ADA violations,
How did you discover this action?	David Medeiros uncovered these actions through personal experiences as a whistleblower, disability advocate, and Medicaid stakeholder. Key discoveries include: Direct Personal Experience: While engaging with the Connecticut Department of Social Services (DSS) as a whistleblower and advocate for the ABI Waiver Program, David directly experienced public ridicule, exclusion from forums, and systemic retaliation. Documented Evidence: David submitted formal complaints to the Connecticut Commission on Human Rights and Opportunities (CHRO) and other agencies, only to receive no substantive responses or assigned case numbers, highlighting systemic failures. Procedural Barriers: Through attempts to obtain information via the Freedom of Information Act (FOIA) and ADA accommodation requests, David encountered procedural delays, denials, and refusals to provide accessible formats. Patterns of Neglect and Retaliation: The lack of federal enforcement from agencies such as the DOJ and



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	HHS OCR revealed systemic inaction and a pattern of neglect, particularly against individuals with disabilities and whistleblowers. Community Feedback and Advocacy Efforts: David learned of similar patterns of exclusion and systemic failures from other whistleblowers, Medicaid recipients, and disability advocates, further corroborating his findings. These cumulative experiences and observations provided David with irrefutable evidence of systemic wrongdoing, gross mismanagement, and abuse of authority.
What additional facts support your allegation?	5. What Additional Facts Support Your Allegation? Documented Complaints and Correspondence: Multiple formal complaints were submitted to the Connecticut Commission on Human Rights and Opportunities (CHRO), Connecticut Department of Social Services (DSS), Office of the Connecticut Attorney General, and federal agencies like the Department of Justice (DOJ) and Health and Human Services Office for Civil Rights (HHS OCR). These complaints document allegations of ADA violations, whistleblower retaliation, and systemic mismanagement. CHRO's refusal to assign case numbers or investigate further substantiates a pattern of inaction. ADA Violations and Procedural Barriers: Agencies failed to provide ADA-mandated accommodations, such as email-only communication, simplified correspondence, and accessible formats. These violations demonstrate a deliberate disregard for federal disability rights laws, including the Americans with Disabilities Act (ADA) and the Rehabilitation Act (Section 504). Retaliatory Actions: DSS officials publicly ridiculed David Medeiros during ABI Waiver Program forums, excluded him from critical discussions, and obstructed his access to essential records and accommodations. These retaliatory actions were intended to discredit David and suppress his advocacy. FOIA and Transparency Failures: David's FOIA requests seeking information on Medicaid fund usage, including ABI Waiver program details, were ignored or delayed, violating transparency laws under 5 U.S.C. § 552 and Connecticut FOIA statutes (C.G.S. § 1-200 et seq.).



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	Testimonies and Community Evidence: Accounts from other disability advocates, Medicaid recipients, and whistleblowers corroborate systemic issues within Connecticut's state agencies, particularly DSS and CHRO. Patterns of retaliation, neglect, and obstruction have been consistently reported. Systemic Mismanagement of Medicaid Funds: DSS's refusal to disclose Medicaid fund usage, particularly in relation to the ABI Waiver Program, raises concerns about potential misuse or gross mismanagement of public funds intended to serve vulnerable populations. Federal Inaction and Knowledge of Disability: Federal agencies, including the DOJ and HHS OCR, were alerted to the systemic failures and retaliatory practices, but no substantive action has been taken. This inaction, despite full knowledge of David's traumatic brain injury and ADA-related needs, compounds the harm. Impact on Public Health and Safety: Neglecting ADA compliance and whistleblower protections undermines public trust, threatens the integrity of federally funded programs, and endangers Medicaid beneficiaries reliant on these services for health and safety. These facts collectively establish a pattern of systemic neglect, retaliation, and corruption within Connecticut state agencies and the failure of federal oversight bodies to intervene effectively.
Allegation	Gross Waste of Funds
What action did they take?	2. What Action Did They Take? The individuals and entities listed above engaged in actions or failed to act in ways that facilitated or perpetuated gross waste of public funds. Specifically: Connecticut Department of Social Services (DSS): Improper Use of Medicaid Funds: Failed to allocate Medicaid funds appropriately within the Acquired Brain Injury (ABI) Waiver Program. Funds intended for critical care were mismanaged, diverted, or left unaccounted for. Neglected oversight of contracts and services provided to vulnerable populations, resulting in inefficiencies, waste, and potentially fraudulent activity. Inadequate Financial Reporting: Deliberately delayed or withheld accurate financial



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	reports related to Medicaid expenditures, violating transparency and federal compliance obligations. Failure to Conduct Internal Audits: Ignored requirements to investigate and audit financial practices within the ABI Waiver Program and other DSS-administered Medicaid services. Connecticut Office of Policy and Management (OPM): Approval of Questionable Allocations: Authorized state budgets and Medicaid expenditures without proper accountability mechanisms to track the use of funds. Failure to Address Known Inefficiencies: Despite financial distress and known concerns about Medicaid mismanagement, OPM failed to implement corrective measures to reduce waste or increase oversight. Connecticut General Assembly (CGA): Inadequate Legislative Oversight: Failed to hold DSS accountable during budget reviews or Medicaid oversight hearings, enabling wasteful practices to continue unchecked. Refusal to Investigate Complaints: Ignored whistleblower reports and advocacy efforts highlighting systemic Medicaid mismanagement and wasteful spending. State Comptroller's Office: Failure to Monitor Spending: Did not ensure proper documentation or auditing of Medicaid disbursements, including those related to the ABI Waiver Program. Neglect of Transparency Requirements: Omitted mandatory public disclosures that would expose financial mismanagement. Federal Oversight Bodies: Centers for Medicare & Medicaid Services (CMS): Failed to audit or investigate Connecticut's Medicaid program despite clear indicators of mismanagement. U.S. Department of Health and Human Services (HHS): Did not enforce federal requirements for accountability in state-administered Medicaid programs, allowing systemic waste to persist. Office of the Inspector General (OIG), HHS: Neglected its duty to investigate potential fraud, waste, and abuse in Connecticut's use of Medicaid funds, particularly those impacting vulnerable populations. Other Actions Taken: Retaliation Against Whistleblowers: Suppressed complaints and retaliated against individuals, including



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	David Medeiros, who attempted to expose wasteful practices or seek transparency. Deliberate Obfuscation of Records: Withheld or failed to provide critical financial documents and records in response to Freedom of Information Act (FOIA) requests
When did this occur?	When Did This Occur? The gross waste of public funds by the listed individuals and entities occurred over an extended period, spanning several years. Key timeframes include: Ongoing Mismanagement of Medicaid Funds Mismanagement within the Acquired Brain Injury (ABI) Waiver Program and other Medicaid services has persisted for at least the past five years, with notable escalation from 2020 through 2024 as whistleblower reports and advocacy efforts exposed systemic issues. Retaliatory and Obstructive Actions Retaliation against David Medeiros began following his whistleblower activities in 2022 and has continued through 2024. These actions coincided with: Reports submitted to Connecticut DSS regarding Medicaid mismanagement. Complaints filed with the Connecticut Commission on Human Rights and Opportunities (CHRO) in 2023 and 2024. Failure of Oversight Bodies The Centers for Medicare & Medicaid Services (CMS) and the U.S. Department of Health and Human Services (HHS) failed to act on
How did you discover this action?	How Did You Discover This Action? David Medeiros, as a whistleblower, disability advocate, and founder of ABI Resources, uncovered these actions through firsthand involvement, research, and communication with affected populations. The following outlines how these actions were discovered: Direct Involvement in Advocacy and Reporting: As a Medicaid Acquired Brain Injury Waiver (ABI Waiver) provider, David observed consistent mismanagement, delays, and non-compliance with Medicaid policies, impacting vulnerable populations reliant on these services. His firsthand interactions with Connecticut Department of Social Services (DSS) officials revealed systemic failures in the administration of funds, refusal to provide transparency, and retaliatory practices against those raising concerns. Complaints Filed and



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	Ignored: After filing formal complaints with DSS, CHRO, and other state agencies, David noted repeated refusals to assign case numbers, investigate allegations, or address the reported issues, indicating procedural obstructions and systemic retaliation. Follow-ups with state and federal oversight bodies, including HHS OCR and DOJ, yielded no action, further exposing a coordinated effort to suppress whistleblowers. Testimonies from Affected Populations: Through his work with ABI Resources, David received testimonies from individuals and families, highlighting delayed Medicaid services, discriminatory practices, and inaccessible public forums for those with disabilities. These accounts confirmed widespread financial inefficiencies and administrative failures within state programs. Analysis of FOIA Responses and Obstructions: Requests for Medicaid fund records under FOIA (5 U.S.C. § 552) were delayed, denied, or inadequately addressed, further revealing the deliberate suppression of transparency regarding the misuse of federal and state funds. DSS and CHRO's refusal to provide complete, timely, and accurate information raised significant concerns about financial mismanagement. Patterns of Retaliation: Retaliation against David personally—including public ridicule, exclusion from forums, and denial of accommodations—demonstrated a coordinated effort to silence his whistleblower activities. Escalation to Federal Agencies: Escalation to DOJ and HHS OCR in 2023 and 2024 confirmed federal inaction despite substantial evidence of systemic violations, indicating complicit neglect or deferral of oversight.
What additional facts support your allegation?	What Additional Facts Support Your Allegation? The following additional facts substantiate the allegations of gross waste of funds, mismanagement, and retaliatory practices by Connecticut state agencies and the federal inaction that has allowed these violations to persist: Documented FOIA Non-Compliance and Withheld Records: Numerous FOIA requests filed with the Connecticut Department of Social Services (DSS) and



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	other agencies remain unanswered, delayed, or improperly denied. Refusal to disclose Medicaid spending records and program oversight audits has raised concerns about the misallocation of funds and deliberate suppression of accountability. The lack of transparency violates FOIA (5 U.S.C. § 552) and creates a strong presumption of financial mismanagement. Patterns of Financial Irregularities in Medicaid Waiver Programs: Analysis of publicly available records and reports from Medicaid beneficiaries highlights delays and denials in services promised under the ABI Waiver Program, indicating misuse or diversion of federal funds. Families and individuals reliant on Medicaid services have reported prolonged processing times and inadequate resource allocation, suggesting systemic inefficiencies. Unaddressed Whistleblower Retaliation: David Medeiros faced public ridicule, exclusion, and retaliation for raising concerns about Medicaid mismanagement. These actions deter further scrutiny of DSS's practices and reinforce a culture of impunity. State agencies have ignored whistleblower protections outlined in the Whistleblower Protection Act (5 U.S.C. § 2302), further preventing transparency. Testimonies from Affected Individuals: Accounts from Medicaid beneficiaries and families describe delays in essential healthcare services and unexplained denials of claims, which directly contradict the program's intended purpose and funding requirements. Repeated Procedural Obstructions: DSS's refusal to issue detailed responses to formal complaints and case filings obstructs accountability efforts. The CHRO's refusal to assign case numbers prevents investigations into discrimination and non-compliance with ADA standards. Attorney General's Office inaction demonstrates systemic neglect, enabling DSS to continue its harmful practices unchecked. Expert Reports and Audits Ignored: Calls for independent audits of DSS's Medicaid programs have been ignored or dismissed, raising concerns about financial mismanagement and failure to adhere to federal funding regulations. Violation



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	of Federal Oversight Obligations: Federal agencies, including HHS OCR and the DOJ, have failed to enforce ADA compliance or investigate allegations of systemic corruption, allowing ongoing violations to harm vulnerable populations. Exploitation of Disability Challenges: David Medeiros, a brain injury survivor, has faced procedural barriers intentionally designed to exploit his cognitive challenges, such as refusal to provide accessible communication formats or simplified processes requ

DISCLOSURE SUBJECTS

Name of individual you believe is responsible for the wrongdoing disclosed.

First Name	Last Name	Title	Chain of Command
Kristen	Clarke	U.S. Department of Justice (DOJ), Civil Rights Division:	Assistant Attorney General: Kristen Clarke Directly oversees enforcement of civil rights laws, inclu
Melanie Fontes Rainer	Melanie Fontes Rainer	U.S. Department of Health and Human Services (HHS), Office for Civil Rights (OCR): Director:	Responsible for enforcing ADA and Section 504 of the Rehabilitation Act within federally funded heal
William Tong	William Tong	Connecticut Office of the Attorney General:	Primary legal officer for Connecticut, responsible for ensuring state agencies comply with constitut
Andrea Barton Reeves	Andrea Barton Reeves	Connecticut Department of Social Services	Oversees Medicaid administration and implementation of programs



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		(DSS): Commissioner:	such as the ABI Waiver, directly tie
Tanya A. Hughes	Tanya A. Hughes	Connecticut Commission on Human Rights and Opportunities (CHRO): Executive Director:	Investigates discrimination complaints, including ADA violations, but has shown inaction in your cas
Henry J. Kerner	Henry J. Kerner	U.S. Office of Special Counsel (OSC): Special Counsel:	Investigates whistleblower retaliation and reports of government wrongdoing.
Julie Su	Julie Su	U.S. Department of Labor (DOL):	Responsible for oversight of workplace ADA compliance and protections for individuals with disabilit
Chiquita Brooks- LaSure	Chiquita Brooks- LaSure	Centers for Medicare & Medicaid Services (CMS): Administrator:	Responsible for federal oversight of Medicaid programs, including ensuring state compliance with fed
Ned Lamont	Ned Lamont	Governor of Connecticut:	The executive authority overseeing state agencies, including DSS and CHRO, with the power to order r
Dr. Manisha Juthani	Dr. Manisha Juthani	Connecticut Department of Public Health (DPH):	Ensures state compliance with health-related ADA requirements and public health safety.
Gary Winfield	Gary Winfield	Connecticut General Assembly, Judiciary Committee:	Legislative oversight for state agency practices, including transparency, civil rights compliance, a



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*Denotes required fields.

Andrés J. Gallegos	Andrés J. Gallegos	National Council on Disability (NCD): Chair:	Federal agency advising the President and Congress on disability policies, including ADA compliance
Alina M. Semo	Alina M. Semo	Office of Government Information Services (OGIS): Director:	Mediates FOIA disputes and ensures transparency in government operations.
Gene L. Dodaro	Gene L. Dodaro	U.S. Government Accountability Office (GAO): Comptroller General	Investigates misuse of federal funds and systemic inefficiencies in federally funded programs like M
Andrea Barton Reeves	Andrea Barton Reeves	Connecticut Department of Social Services (DSS): Leadership: Commissioner	Connecticut Department of Social Services (DSS): Leadership: Commissioner
Tanya Hughes	Tanya Hughes	Connecticut Commission on Human Rights and Opportunities (CHRO): Leadership: Executive Director	Connecticut Commission on Human Rights and Opportunities (CHRO): Leadership: Executive Director
William Tong	William Tong	Connecticut Attorney General's Office: Leadership: Attorney General	Connecticut Attorney General's Office: Leadership: Attorney General



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Kristen Clarke	Kristen Clarke	U.S. Department of Justice (DOJ), Civil Rights Division: Leadership: Assistant Attorney General	U.S. Department of Justice (DOJ), Civil Rights Division: Leadership: Assistant Attorney General
Melanie Fontes Rainer	Melanie Fontes Rainer	U.S. Department of Health and Human Services (HHS), Office for Civil Rights (OCR): Leadership: Dire	U.S. Department of Health and Human Services (HHS), Office for Civil Rights (OCR): Leadership: Dire
Ned Lamont	Ned Lamont	State of Connecticut Leadership: Governor	State of Connecticut Leadership: Governor
Jeffrey Beckham	Jeffrey Beckham	Connecticut Office of Policy and Management (OPM): Secretary	Oversees budget and funding allocation, including Medicaid funds. Negligence or failure to ensure pr
Dr. Manisha Juthani	Dr. Manisha Juthani	Connecticut Department of Public Health (DPH): Commissioner	Connecticut Department of Public Health (DPH): Commissioner
Colleen M. Murphy	Colleen M. Murphy	Executive Director and General Counsel	Connecticut Freedom of Information Commission (FOIC):



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Martin M. Looney	Martin M. Looney	Connecticut General Assembly (CGA): Senate President Pro Tempore	Responsible for legislative oversight of state agencies like DSS and CHRO. Inaction or failure to in
Matthew Ritter	Matthew Ritter	House Speaker	Responsible for legislative oversight of state agencies like DSS and CHRO. Inaction or failure to in
Chiquita Brooks-LaSure	Chiquita Brooks-LaSure	Centers for Medicare & Medicaid Services (CMS): Administrator	Centers for Medicare & Medicaid Services (CMS): Administrator
Charlotte Burrows	Charlotte Burrows	U.S. Equal Employment Opportunity Commission (EEOC):	U.S. Equal Employment Opportunity Commission (EEOC): Chair
Henry Kerner	Henry Kerner	Office of Special Counsel (OSC):	ederal oversight for whistleblower complaints. If whistleblower disclosures were ignored or mishandl
Gene L. Dodaro	Gene L. Dodaro	U.S. Government Accountability Office (GAO): Comptroller General	U.S. Government Accountability Office (GAO): Comptroller General
Christi A. Grimm	Christi A. Grimm	Office of Inspector General (OIG), Department of Health and Human Services:	OIG is tasked with investigating fraud, waste, and abuse in federally funded programs like Medicaid.



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		Inspector General	
Deidre S. Gifford	Deidre S. Gifford	Commissioner, Connecticut Department of Social Services (DSS)	Oversaw the agency's discriminatory practices, denial of ADA accommodations, and retaliatory actions
Tanya Hughes	Tanya Hughes	Executive Director, Connecticut Commission on Human Rights and Opportunities (CHRO)	Failed to ensure the investigation of complaints, neglected to assign case numbers, and ignored stat
William Tong	William Tong	Connecticut Attorney General	Ignored evidence of systemic failures and violations, failing to intervene or hold DSS and CHRO acco
Merrick B. Garland	Merrick B. Garland	U.S. Attorney General, Department of Justice (DOJ)	U.S. Attorney General, Department of Justice (DOJ)
Xavier Becerra	Xavier Becerra	Secretary, U.S. Department of Health and Human Services (HHS)	Neglected oversight responsibilities related to ADA compliance within Medicaid-funded programs.
Chiquita Brooks-LaSure	Chiquita Brooks-LaSure	Administrator, Centers for Medicare & Medicaid Services (CMS)	Role: Allowed systemic Medicaid mismanagement and misuse of federal funds without intervention.
Lisa J. Pino	Lisa J. Pino	Director, Office for Civil Rights (OCR), HHS	Failed to enforce ADA compliance and investigate systemic discrimination and retaliatory practices w



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Manisha Juthani, MD	Manisha Juthani, MD	Commissioner, Connecticut Department of Public Health (DPH)	Oversees public health policies and programs, potentially involved in Medicaid oversight and ADA com
Deidre S. Gifford, MD, MPH	Deidre S. Gifford, MD, MPH	Commissioner, Connecticut Department of Social Services (DSS)	Commissioner, Connecticut Department of Social Services (DSS)
Andrea	Barton Reeves	Commissioner, Connecticut Department of Social Services (DSS)	Commissioner, Connecticut Department of Social Services (DSS)
William Tong	William Tong	Attorney General, State of Connecticut	Legal oversight of state agencies, failed to act on documented violations and complaints
Tanya Hughes	Tanya Hughes	Executive Director, Connecticut Commission on Human Rights and Opportunities (CHRO)	Executive Director, Connecticut Commission on Human Rights and Opportunities (CHRO)
Xavier Becerra	Xavier Becerra	Secretary, U.S. Department of Health and Human Services (HHS)	Secretary, U.S. Department of Health and Human Services (HHS)
Chiquita Brooks-LaSure	Chiquita Brooks-LaSure	Administrator, Centers for Medicare & Medicaid Services (CMS)	Administrator, Centers for Medicare & Medicaid Services (CMS)



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*Denotes required fields.

Kristen Clarke	Kristen Clarke	Assistant Attorney General, Civil Rights Division, U.S. Department of Justice (DOJ)	Assistant Attorney General, Civil Rights Division, U.S. Department of Justice (DOJ)
Robyn M. Colosimo	Robyn M. Colosimo	Acting Special Counsel, U.S. Office of Special Counsel (OSC)	Acting Special Counsel, U.S. Office of Special Counsel (OSC)
Richard Blumenthal	Richard Blumenthal	U.S. Senator for Connecticut	advocate for federal investigations and legislative oversight of state misconduct.
Chris Murphy	Chris Murphy	U.S. Senator for Connecticut	advocate for ensuring ADA compliance and whistleblower protections.
Rosa DeLauro	Rosa DeLauro	U.S. Representative, Connecticut's 3rd District	Focus on federal Medicaid and social services programs.
Andrea Barton Reeves – Commissioner, DSS	Andrea Barton Reeves – Commissioner, DSS	Andrea Barton Reeves – Commissioner, DSS	Andrea Barton Reeves – Commissioner, DSS
Dr. Deidre S. Gifford – Former Commissioner, DSS	Dr. Deidre S. Gifford – Former Commissioner, DSS	Dr. Deidre S. Gifford – Former Commissioner, DSS	Dr. Deidre S. Gifford – Former Commissioner, DSS
Tanya Hughes – Executive Director, CHRO	Tanya Hughes – Executive Director, CHRO	Tanya Hughes – Executive Director, CHRO	Tanya Hughes – Executive Director, CHRO
William Tong – Attorney General, Connecticut	William Tong – Attorney General, Connecticut	William Tong – Attorney	William Tong – Attorney General, Connecticut



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		General, Connecticut	
Chiquita Brooks-LaSure – Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure – Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure – Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure – Administrator, Centers for Medicare & Medicaid Services (CMS)
Xavier Becerra – Secretary, U.S. Department of Health and Human Services (HHS)	Xavier Becerra – Secretary, U.S. Department of Health and Human Services (HHS)	Xavier Becerra – Secretary, U.S. Department of Health and Human Services (HHS)	Xavier Becerra – Secretary, U.S. Department of Health and Human Services (HHS)
Rebecca Bond – Chief, Disability Rights Section, DOJ Civil Rights Division	Rebecca Bond – Chief, Disability Rights Section, DOJ Civil Rights Division	Rebecca Bond – Chief, Disability Rights Section, DOJ Civil Rights Division	Rebecca Bond – Chief, Disability Rights Section, DOJ Civil Rights Division
Governor Ned Lamont – Governor of Connecticut	Governor Ned Lamont – Governor of Connecticut	Governor Ned Lamont – Governor of Connecticut	Governor Ned Lamont – Governor of Connecticut
Jeffrey Beckham – Secretary, OPM	Jeffrey Beckham – Secretary, OPM	Connecticut Office of Policy and Management (OPM):	Connecticut Office of Policy and Management (OPM):
Matthew Ritter – Speaker of the House	Matthew Ritter – Speaker of the House	Connecticut General Assembly (CGA):	Connecticut General Assembly (CGA):



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Martin M. Looney – Senate President	Martin M. Looney – Senate President	Martin M. Looney – Senate President	Responsible for approving state Medicaid budgets and reforms.
Rob Kane	Rob Kane	State Auditors	Tasked with auditing state agencies for financial mismanagement, including Medicaid funds.
John C. Geragosian	John C. Geragosian	State Auditors	Tasked with auditing state agencies for financial mismanagement, including Medicaid funds.
Sean Scanlon	Sean Scanlon	State Comptroller	Monitors DSS Medicaid- related expenditures and financial reporting.
Chiquita Brooks- LaSure – Administrator, CMS	Chiquita Brooks- LaSure – Administrator, CMS	Chiquita Brooks-LaSure – Administrator, CMS	Chiquita Brooks-LaSure – Administrator, CMS
Xavier Becerra – Secretary, HHS	Xavier Becerra – Secretary, HHS	Xavier Becerra – Secretary, HHS	Responsible for monitoring Medicaid mismanagement in Connecticut.
Gene L. Dodaro – Comptroller General of the United States	Gene L. Dodaro – Comptroller General of the United States	Comptroller General of the United States	Leads federal reviews of wasteful practices involving Medicaid funds.
Christi A. Grimm – Inspector General, HHS	Christi A. Grimm – Inspector General, HHS	Christi A. Grimm – Inspector General, HHS	Conducts investigations into Medicaid fraud, waste, and abuse.
Henry J. Kerner – Special Counsel, U.S. Office of Special Counsel (OSC)	Henry J. Kerner – Special Counsel, U.S. Office of Special Counsel (OSC)	Henry J. Kerner – Special Counsel, U.S. Office of Special Counsel (OSC)	Enforces whistleblower protection for those reporting waste or mismanagement.



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REQUESTED OSC ACTION

What action would you like OSC to take?

Request for Federal Representation and Protection to Restore Constitutional Rights
To the U.S. Office of Special Counsel (OSC):

This complaint requires immediate federal representation to protect David Medeiros, a whistleblower, taxpayer advocate, and person with a disability, whose constitutional rights have been systematically violated by Connecticut state agencies. The federal government must act decisively to ensure that David's rights under the First, Fifth, and Fourteenth Amendments, as well as federal statutes like the Americans with Disabilities Act (ADA) and the Whistleblower Protection Act, are restored and protected.

Specific Actions Requested for Representation and Protection

Immediate Federal Representation

Federal Counsel Appointment: Appoint a federally funded attorney or representative to ensure David's constitutional rights are fully protected and enforced.

Direct Oversight of Legal Proceedings: Federal representatives must oversee all ongoing interactions between David and Connecticut agencies to prevent further violations or retaliation.

Protection from Retaliation: Establish safeguards ensuring David is no longer subjected to exclusion, discrimination, or retaliatory actions by state agencies or officials.

Restoration of Constitutional Rights

First Amendment: Reinforce David's right to petition the government for redress of grievances without fear of retaliation or obstruction.

Fifth Amendment: Ensure due process protections are upheld, requiring transparent and timely responses to David's complaints and FOIA requests.

Fourteenth Amendment: Address systemic discrimination and ensure equal protection under the law, particularly as it pertains to David's disability and whistleblower status.

Mandate ADA Compliance and Accessibility

Guarantee Accommodations: Require Connecticut agencies to provide ADA-compliant accommodations, including accessible communication formats and simplified procedures, tailored to David's cognitive needs as a traumatic brain injury survivor.

Independent Audit of ADA Compliance: Conduct a federal audit of ADA adherence within Connecticut's federally funded programs, including DSS's administration of the ABI Waiver Program.



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Federal Oversight to Enforce Accountability

Assign a Federal Monitor: Appoint an independent federal monitor to oversee the actions of Connecticut agencies, ensuring compliance with constitutional and statutory obligations.

Investigate Retaliatory Practices: Launch a federal investigation into retaliatory actions by Connecticut state officials against David Medeiros, holding violators accountable.

Restorative Justice for David Medeiros

Public Acknowledgment: Require Connecticut agencies to publicly acknowledge their violations of David's rights and take corrective action.

Financial Restitution: Compensate David for the personal, professional, and financial harm caused by the systemic violations and retaliatory practices.

Reinstatement of Advocacy Rights: Ensure David's ability to advocate for vulnerable populations, including individuals with disabilities, is fully restored without obstruction or exclusion.

Set a National Precedent

Protect All Whistleblowers: Use David's case to establish stronger federal protections for whistleblowers, ensuring no individual faces similar violations or retaliation in the future.

Strengthen Constitutional Safeguards: Reinforce federal mechanisms to prevent states from undermining constitutional and civil rights.

Systemic Reform Across States: Mandate reforms ensuring all states comply with federal laws protecting taxpayers, individuals with disabilities, and whistleblowers.

Conclusion

David Medeiros has endured severe constitutional violations, systemic discrimination, and targeted retaliation as a whistleblower and disability advocate. The federal government has a moral and legal obligation to represent and protect him, ensuring that his rights are fully restored and upheld.

By providing federal representation and enforcing constitutional and statutory protections, OSC can not only deliver justice for David but also set an enduring example for safeguarding the rights of all Americans, particularly those most vulnerable to systemic failures.

WHERE ELSE DID YOU REPORT THIS MATTER?

I have also disclosed this information to:



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*Denotes required fields.

Other Action Type	Action Taken Date

Additional information about reports to Inspectors General, if applicable.

First Name:

Last Name:

Title:

Address:

Email Address:

Telephone Number:

Case ID #:

a. **What is the status of the matter?**

NOTE: MATTERS INVESTIGATED BY AN OFFICE OF INSPECTOR GENERAL

It is the general policy of OSC not to transmit allegations of wrongdoing to the head of the agency involved if the agency's Office of Inspector General has fully investigated, or is currently investigating, the same allegations.

ATTACHMENTS

Please note that the space available for attachments is limited. Therefore, DO NOT attach every document and email that may be relevant to your claim. You will have an opportunity to make additional submissions at a later date. We recommend limiting attachments to official forms and correspondence that document the action(s) at issue in your disclosure if these documents are relevant to your allegations.

I have attached the following documents to my filing:

File Name
Federal Representation for Justice DB.42.131.Inf. Medeiros Connecticut 11.28.2024 .pdf
DAVID MEDEIROS VS CONNECTICUT DEPARTMENT OF SOCIAL SERVICES DSS CT GOV 10.30.2024 .PDF
10.24.2024 DOJ complaint Submission complete.pdf
DAVID MEDEIROS VS CONNECTICUT DEPARTMENT OF SOCIAL SERVICES DSS CT GOV 10.30.2024 (1).PDF
October 30, 2024 - David Medeiros VS Connecticut Department of Social Services DSS CT gov.docx



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CHRO CASE DSS 24 4 Filed Complaint Against Connecticut DSS Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
CHRO CASE DSS 24 3 Filed Complaint Against Connecticut DSS Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
CHRO CASE DSS 24 2 Filed Complaint Against Connecticut DSS Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
CHRO CASE DSS 24 Filed Complaint Against Connecticut DSS Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
OSCFiling-MedeirosDavid-DI-112620241121.pdf
requests (9).csv
requests (8).csv
requests (7).csv
11.27.2024 Escalated Complaint FOIA Non-Compliance ADA Violations Constitutional Violations and Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
11.27.2024 Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
090620247088 cms No Records Response Letter (1).pdf
01.02.2024 COMPLAINT LETTER.docx
11.23.2024 Binder1.pdf
09.24.2024
Federal Intervention HHS_OIG_CMS_GAO_DOJ_OCR_Whistleblower_Report_2024.pdf
Comprehensive Grievance Report and Request for Clarity Whistleblower Report Mediciad ABI Waiver Programs.pdf
11.27.2024 ALL MUCKROCK TO DATE Binder1 .pdf
FOIA .zip
01.04.2024 CHRO AUDITS Binder2.pdf
000_2024-10-29 17_24_21.003990+00_00_comm.txt
01.01.2024 2nd FOIA.gov - Freedom of Information Act_ Create a request.pdf
Medeiros Response.pdf
Governor Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
12.14.2023 Dear Matthew S. Antonetti CT DSS .pdf
01.02.2024 COMPLAINT LETTER.docx
2410220 CAR Dismissal .pdf
10.22.2024 10.39 am CHRO Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
2410220 CP Email with Documents 2.4.24.msg
2410220 CAR Dismissal .pdf
2410220 Release of Jurisdiction.pdf



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*Denotes required fields.

2410220 CAR Dismissal .pdf
2410220 Answer Part 1 of 2.pdf
2410220 Affidavit.pdf
12.23.2023 CHRO COMPLAINT .docx
Admin-CL (1).pdf
01.26.2024 Binder1.pdf
dss foia ghewtfrg Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
ABI Forum 2024.pdf
12.23.2023 Governor Ned Lamont. David Medeiros ABI Resources Call for Systemic Reform in Response to ADA Accommodation Failures and Disability Discrimination Whistleblower Retaliation Compliance CT DSS COU CHRO .pdf
11.27.2024 ALL MUCKROCK TO DATE Binder1 .pdf

CONSENT

Do you consent to the disclosure of your identify to others outside OSC if it becomes necessary in taking further action on this matter?*

I consent to disclosure of my identity.

Yes

I do not consent to disclosure of my identity. (Even if you do not consent, OSC may disclose your identity if necessary due to an imminent danger to public health or safety or imminent violation of any criminal law. See 5 U.S.C. § 1213(h).)

No

CERTIFICATION

I certify that all of the statements made in this complaint are true, complete, and correct to the best of my knowledge and belief. I understand that a false statement or concealment of a material fact is a criminal offense punishable by a fine, imprisonment, or both. 18 U.S.C. § 1001.*

Yes



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BURDEN: The burden for this collection of information (including the time for reviewing instructions, searching existing data sources, gathering the data needed, and completing and reviewing the form) is estimated to be an average of one hour to submit a disclosure of information alleging agency wrongdoing, one hour and fifteen minutes to submit a complaint alleging a prohibited personnel practice or other prohibited activity, or 30 minutes to submit a complaint alleging prohibited political activity. Please send any comments about this burden estimate, and suggestions for reducing the burden, to the U.S. Office of Special Counsel, General Counsel's Office, 1730 M Street, NW, Suite 218, Washington, DC 20036-4505.

This Disclosure of Information was Received by OSC on: 11/28/2024

PLEASE KEEP A COPY OF YOUR COMPLAINT, ANY SUPPORTING DOCUMENTATION, AND ANY ADDITIONAL ALLEGATIONS THAT YOU SEND TO OSC NOW OR AT ANY TIME WHILE YOUR COMPLAINT IS PENDING. REPRODUCTION CHARGES UNDER THE FREEDOM OF INFORMATION ACT MAY APPLY TO ANY REQUEST YOU MAKE FOR COPIES OF MATERIALS THAT YOU PROVIDED TO OSC.



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IMPORTANT INFORMATION ABOUT FILING A DISCLOSURE

OSC WHISTLEBLOWER DISCLOSURE CHANNEL

Under 5 U.S.C. § 1213 and related provisions, the Office of Special Counsel (OSC) serves as a secure channel for federal employees, former federal employees, and applicants for federal employment with reliable knowledge of the wrongdoing to disclose:

- a violation of law, rule or regulation;
- gross mismanagement;
- gross waste of funds;
- an abuse of authority;
- a substantial and specific danger to public health or safety; and/or
- censorship related to scientific research.

OSC JURISDICTION

OSC has no jurisdiction over disclosures filed by:

- employees of the U.S. Postal Service and the Postal Regulatory Commission;
- members of the armed forces of the United States (*i.e.*, non-civilian military employees);
- state employees operating under federal grants;
- employees of federal contractors;
- other employees or federal agencies that are exempt under federal law; and
- Congressional or judicial branch employees.

ANONYMOUS SOURCES

While OSC will protect the identity of persons who make disclosures, it will not consider anonymous disclosures. If a disclosure is filed by an anonymous source, the disclosure will be referred to the Office of Inspector General in the appropriate agency. OSC will take no further action.

RETALIATION

Do you believe you suffered retaliation by your agency for disclosing wrongdoing? If yes, you may file a complaint of retaliation by navigating back to "My Cases" and selecting "New Complaint." Select Option 1 to complete and submit a Complaint of Prohibited Personnel Practice or other Prohibited Activity (PPPs). *If you have already completed the Complaint of Prohibited Personnel Practice or other Prohibited Activity above, please continue with this Disclosure.* PPPs are employment-related activities that are banned in the federal workforce.



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PPPs generally involve some type of personnel decision or action and may result in personal relief for people who have been subject to a PPP. For example, if we find that you were removed from federal service in retaliation for whistleblowing, OSC may act to get your job back. PPPs can also include allegations of harassment, failure to issue appraisals, and improper hiring. Do not file a disclosure to report retaliation or other PPPs.

CONTACT INFORMATION

Title:

First Name:* David

Middle Initial:

Last Name:* Medeiros

International Address?: No

Address:*

215 Mountain St
Willimantic, CT 06226

Cell Phone Number:

Home Phone Number:

Office Phone Number:

Ext.

Email Address:* aabiwr@live.com

Preferred means of contact:

Email: Yes

Cell phone: No

Home phone: No

Office phone: No

REPRESENTATIVE INFORMATION

Do you have representation? No

Information about representative, if applicable.

First Name:*

Middle Initial:

Last Name:*

International Address?:

Address: *



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*Denotes required fields.

Office Phone Number:

Ext.

Cell Phone Number:

Home Phone Number:

Email Address:

EMPLOYMENT INFORMATION

Name of Department/Agency about which you are making a disclosure.

Department:* Justice

Agency:* Office Of The Inspector General

Agency subcomponent: Connecticut Attorney General's Office

Street Address: 165 Capitol Avenue

City: Hartford

State: CT

Zip Code: 06106

Employment Status:* Non-Federal Employee (please specify)

Title	Series	Grade

Please provide your dates of employment in this position.

Employment Service Type	Employment Service Subtype	If Other (specify)
Excepted Service	Other	Private Citizen, Advocate, and Whistleblower
Other	Other	Private Citizen, Advocate, and Whistleblower

Are you covered by a collective bargaining agreement?

DETAILS OF YOUR DISCLOSURES



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Please identify the type of wrongdoing that you are alleging. You can make multiple disclosures, but you **MUST** choose one option. If you check "violation of law, rule, or regulation," specify, if you can, the particular law, rule or regulation violated (by name, subject, and/or legal citation). For each allegation, please answer the following questions (be as specific as possible). Please keep in mind that you will have an opportunity to provide more information and someone from OSC will contact you.

If OSC determines there is a substantial likelihood of wrongdoing, OSC will refer your disclosures to the involved agency for an investigation and report. To meet the substantial likelihood standard, there must be a significant probability that the information reveals wrongdoing that falls within one or more of the categories above. In its evaluation, OSC considers the strength, reliability, and credibility of the disclosures. If the substantial likelihood determination cannot be made, OSC will determine whether there is sufficient information to exercise its discretion to refer the allegations.

DISCLOSURES

Allegation	Gross Mismanagement
What action did they take?	Key Individuals and Their Roles in Violations Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS) Responsibilities: Oversee DSS operations, including Medicaid programs such as the Acquired Brain Injury (ABI) Waiver Program, and ensure compliance with FOIA and ADA requirements. Violations: DSS failed to respond to FOIA requests submitted on October 25, 2024, and follow-ups on October 31, November 2, and December 2, violating statutory deadlines under 5 U.S.C. § 552 and Conn. Gen. Stat. § 1-210. Ignored explicit requests for ADA accommodations, including simplified communication formats, violating 42 U.S.C. § 12131 (ADA Title II). Excluded me from accessing critical Medicaid program information, violating Fifth Amendment due process and Fourteenth Amendment equal protection rights. Attorney General William Tong Title: Connecticut Attorney General Responsibilities: Ensure legal compliance across state agencies, uphold transparency laws, and enforce



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	accountability mechanisms. Violations: As head of the Attorney General's Office, William Tong is responsible for the refusal to acknowledge or process FOIA requests. This constitutes a violation of First Amendment rights to petition the government and Fifth Amendment due process protections. Enabled systemic obstruction of transparency, potentially covering mismanagement of federally funded Medicaid programs, violating federal Medicaid regulations (42 U.S.C. § 1396a). Barbara Manning Title: CMS Regional Administrator (Region 1) Responsibilities: Oversee CMS operations in Connecticut and ensure state compliance with federal Medicaid regulations. Violations: Failed to enforce federal oversight of the Medicaid ABI Waiver Program, despite systemic non-compliance with transparency and accountability mandates. By neglecting to investigate Connecticut's violations, CMS contributed to potential misuse of federal Medicaid funds. Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS) Responsibilities: Oversee national Medicaid programs and ensure state compliance with federal funding conditions. Violations: Failed to address systemic issues in Connecticut's Medicaid ABI Waiver Program, despite federal obligations under 42 U.S.C. § 1396a. Oversight failures under her leadership have enabled potential fraud, waste, and abuse of taxpayer funds. Eileen Meskill Title: Deputy Attorney General, Connecticut Office of the Attorney General Responsibilities: Manage FOIA compliance and oversee ADA-related legal matters. Violations: Operationally responsible for ensuring FOIA compliance; her failure to act perpetuated violations of 5 U.S.C. § 552. Enabled systemic denial of ADA accommodations, contributing to discrimination under 42 U.S.C. § 12131. Governor Ned Lamont Title: Governor of Connecticut Responsibilities: Ensure state agencies comply with federal and state laws, including FOIA and ADA, and oversee the performance of agency leadership. Vi



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When did this occur?	When Did This Occur? The violations began with my initial FOIA request, submitted on October 25, 2024, to the Connecticut Attorney General's Office, and are ongoing. Despite explicit statutory obligations under 5 U.S.C. § 552 (FOIA) and Conn. Gen. Stat. § 1-210, no acknowledgment or response has been provided, constituting both procedural and constitutional violations. Key Dates and Events October 25, 2024: Submitted a FOIA request to the Connecticut Attorney General's Office seeking records related to the Medicaid Acquired Brain Injury (ABI) Waiver Program. The request included specific ADA accommodation requests, such as simplified communication formats and accessible records, due to my traumatic brain injury (TBI). October 31, 2024: Sent the first follow-up communication to request acknowledgment of my FOIA submission and an estimated timeline for compliance. No response was received, violating the four-business-day acknowledgment requirement under Connecticut FOIA law (Conn. Gen
How did you discover this action?	How Did You Discover This Action? I discovered the violations through my direct involvement as a whistleblower and advocate for transparency and accountability within Connecticut's Medicaid Acquired Brain Injury (ABI) Waiver Program. My discovery occurred as follows: FOIA Request Submission and Lack of Response: On October 25, 2024, I submitted a FOIA request to the Connecticut Attorney General's Office seeking records related to the Medicaid ABI Waiver Program. When no acknowledgment or response was received, I initiated follow-ups on October 31, 2024, November 2, 2024, and December 2, 2024, all of which were ignored. The failure to respond within the statutory timeframe alerted me to systemic non-compliance with 5 U.S.C. § 552 (FOIA) and Conn. Gen. Stat. § 1-210. ADA Accommodation Requests Ignored: I included explicit requests for reasonable ADA accommodations to address my cognitive challenges as a traumatic brain injury (TBI) survivor, such as simplified communication formats and



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	accessible records. The failure to acknowledge or fulfill these accommodations violated the Americans with Disabilities Act (ADA) and highlighted a pattern of exclusion and discrimination. Ongoing Exclusion from Public Processes: I was excluded from public forums and discussions related to Medicaid oversight, despite being a stakeholder directly impacted by these programs. This exclusion, combined with procedural barriers such as non-responsiveness, demonstrated a deliberate effort to suppress whistleblower advocacy and prevent accountability. Research into Oversight Failures: In investigating the lack of response, I discovered broader systemic issues within the Connecticut Attorney General's Office, the Department of Social Services (DSS), and the Commission on Human Rights and Opportunities (CHRO), including failures to uphold transparency laws, ADA requirements, and federal Medicaid regulations. Corroborating Evidence: The lack of records, unexplained delays, and continued procedural barriers confirm systemic failures in transparency, ADA compliance, and oversight, prompting me to escalate the matter to federal authorities.
What additional facts support your allegation?	Additional Facts Supporting My Allegation The following facts and evidence substantiate my claims of systemic violations, including FOIA non-compliance, ADA discrimination, and gross mismanagement of federally funded Medicaid programs: 1. FOIA Non-Compliance Specific Requests Ignored: I submitted a FOIA request on October 25, 2024, seeking transparency in the Medicaid Acquired Brain Injury (ABI) Waiver Program. Follow-ups on October 31, November 2, and December 2, 2024, were ignored, violating statutory deadlines under 5 U.S.C. § 552(a)(6) and Conn. Gen. Stat. § 1-210. Despite clear statutory requirements for acknowledgment and prompt responses, neither the Connecticut Attorney General's Office nor DSS provided any communication or documentation. Pattern of Obstruction: The lack of acknowledgment and response demonstrates not only procedural failures but a systemic effort to obstruct



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	public access to federally funded program information, raising concerns of fraud or mismanagement. 2. ADA Violations Failure to Provide Reasonable Accommodations: I explicitly requested reasonable ADA accommodations due to my traumatic brain injury (TBI), including simplified communication formats and accessible records. These requests were ignored, violating Title II of the ADA (42 U.S.C. § 12131) and its implementing regulations (28 C.F.R. § 35.130, § 35.160). Exclusion from Public Processes: I was systematically excluded from public forums and discussions related to Medicaid oversight, preventing me from participating meaningfully in decisions that directly impact my well-being and advocacy efforts. This exclusion constitutes discrimination under the Fourteenth Amendment Equal Protection Clause and ADA mandates. 3. Retaliation Against Whistleblower Advocacy Procedural Barriers: The lack of response to my FOIA and ADA requests, coupled with my exclusion from Medicaid oversight processes, is indicative of retaliation aimed at suppressing my advocacy and whistleblower efforts. Public ridicule and procedural barriers imposed by DSS and CHRO further demonstrate a systemic effort to undermine my ability to hold agencies accountable. 4. Gross Mismanagement of Federal Medicaid Funds Lack of Transparency in ABI Waiver Program: Refusal to provide records raises concerns about mismanagement, waste, or fraud in the administration of the Medicaid ABI Waiver Program. These failures jeopardize federal compliance with Medicaid regulations (42 U.S.C. § 1396a) and undermine the integrity of taxpayer-funded programs. No Accountability Measures: DSS has not conducted or disclosed audits, enforcement actions, or disciplinary measures against providers in the ABI Waiver Program, further suggesting systemic neglect. 5. Documentary Evidence FOIA Submission Records: Copies of my FOIA request (submitted October 25, 2024) and follow-ups (October 31, November 2, and December 2, 2024)



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	provide evidence of my efforts to seek transparency. These records show clear violations of statutory
Allegation	Violation of Law, Rule or Regulation
What action did they take?	2. What Action Did They Take? Here is a detailed breakdown of the actions (or inactions) taken by each individual listed, highlighting their role in the violations: 1. Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS) Position in Chain of Command: Head of DSS Actions Taken: Ignored FOIA requests submitted on October 25, 2024, and subsequent follow-ups on October 31, November 2, and December 2, 2024, violating statutory obligations under 5 U.S.C. § 552 and Conn. Gen. Stat. § 1-210. Failed to ensure ADA compliance by denying reasonable accommodations, such as simplified communication formats and accessible records, in violation of Title II of the ADA (42 U.S.C. § 12131). Excluded me from public forums related to Medicaid oversight, violating my constitutional Fourteenth Amendment right to equal protection. 2. Attorney General William Tong Title: Connecticut Attorney General Position in Chain of Command: Head of the Connecticut Office of the Attorney General Actions Taken: Failed to enforce FOIA compliance within his office, allowing requests to go unanswered, violating the First Amendment right to petition and Fifth Amendment due process rights. Oversaw systemic non-compliance with transparency laws, withholding critical records about the Medicaid ABI Waiver Program. Enabled a culture of non-responsiveness and procedural barriers, obstructing my advocacy as a whistleblower. 3. Barbara Manning Title: CMS Regional Administrator (Region 1) Position in Chain of Command: Oversees CMS operations in Connecticut and neighboring states Actions Taken: Failed to enforce oversight of Connecticut's Medicaid ABI Waiver Program, despite federal obligations under 42 U.S.C. § 1396a. Neglected to investigate systemic violations of Medicaid compliance, allowing potential misuse of federal funds. 4. Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services



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	(CMS) Position in Chain of Command: National head of CMS Actions Taken: Failed to address systemic Medicaid mismanagement in Connecticut, allowing violations to persist without accountability. Did not ensure state compliance with federal transparency and oversight requirements, undermining public trust in Medicaid programs. 5. Eileen Meskill Title: Deputy Attorney General Position in Chain of Command: Second-in-command to Attorney General William Tong Actions Taken: Failed to operationalize FOIA compliance or ensure ADA accommodations were provided under the Attorney General's Office. Allowed systemic delays and non-responsiveness, contributing to ongoing violations of transparency and accessibility laws. 6. Governor Ned Lamont Title: Governor of Connecticut Position in Chain of Command: Chief Executive of the State of Connecticut Actions Taken: Failed to intervene or hold DSS, CHRO, and the Attorney General's Office accountable for systemic violations. Allowed continued non-compliance with federal and state laws, including FOIA, ADA, and constitut
When did this occur?	When Did This Occur? The violations began with my initial FOIA request on October 25, 2024, and remain ongoing. Below is a detailed timeline of events tied directly to statutory and constitutional violations, demonstrating a systemic and deliberate pattern of non-compliance. Timeline of Events October 25, 2024: I submitted a FOIA request to the Connecticut Attorney General's Office requesting records related to the Medicaid Acquired Brain Injury (ABI) Waiver Program. This request explicitly included ADA accommodation requests, such as simplified communication formats and accessible records, due to my traumatic brain injury (TBI). Violations: The Attorney General's Office failed to acknowledge the FOIA request within the statutory four-business-day deadline required under Conn. Gen. Stat. § 1-210. Ignoring ADA accommodations violates Title II of the ADA (42 U.S.C. § 12131) and associated regulations



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	(28 C.F.R. § 35.130, § 35.160). October 31, 2024: I submitted a follow-up communicati
How did you discover this action?	How Did You Discover This Action? I discovered the violations through my direct engagement as a whistleblower and advocate for transparency, accountability, and accessibility within Connecticut's Medicaid Acquired Brain Injury (ABI) Waiver Program. My discovery unfolded as follows: Submission of FOIA Requests: On October 25, 2024, I submitted a Freedom of Information Act (FOIA) request to the Connecticut Attorney General's Office seeking transparency into the Medicaid ABI Waiver Program. When the statutory deadlines for acknowledgment and response passed without action, I initiated follow-up communications on October 31, November 2, and December 2, 2024. These requests were ignored, indicating potential non-compliance with 5 U.S.C. § 552 and Conn. Gen. Stat. § 1-210. Denial of ADA Accommodations: Along with my FOIA request, I explicitly requested reasonable accommodations under the Americans with Disabilities Act (ADA) due to my traumatic brain injury (TBI). These accommodations included simplified communication formats and accessible records. The failure to acknowledge or fulfill these accommodation requests alerted me to systemic non-compliance with Title II of the ADA (42 U.S.C. § 12131) and its implementing regulations (28 C.F.R. § 35.130, § 35.160). Repeated Exclusion from Public Processes: My exclusion from public forums and discussions related to Medicaid oversight, despite being directly affected by the Medicaid ABI Waiver Program, further demonstrated systemic discrimination and suppression of my advocacy efforts. These barriers highlighted ongoing violations of my First Amendment right to petition the government, Fifth Amendment due process rights, and Fourteenth Amendment equal protection rights. Research into Broader Failures: As I investigated the lack of response to my FOIA requests and ADA accommodations, I identified broader systemic issues within the Connecticut Attorney General's Office,



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	the Department of Social Services (DSS), and the Commission on Human Rights and Opportunities (CHRO). This included evidence of widespread non-compliance with transparency laws, ADA requirements, and federal Medicaid regulations (42 U.S.C. § 1396a). Corroborating Evidence from Procedural Barriers: The continued lack of transparency, repeated procedural barriers, and exclusionary practices pointed to systemic mismanagement and potential misuse of taxpayer funds. These failures were compounded by the refusal to disclose records critical to Medicaid oversight. Conclusion I discovered these actions through direct engagement as a whistleblower and advocate, uncovering systemic non-compliance with FOIA, ADA, and Medicaid regulations. My efforts to seek transparency and accountability revealed deliberate obstruction, exclusionary practices, and potential fraud or waste of federally allocated Medicaid funds.
What additional facts support your allegation?	What Additional Facts Support Your Allegation? The following facts substantiate my allegations of systemic violations of FOIA, ADA, constitutional rights, Medicaid oversight requirements, and taxpayer protections: 1. FOIA Violations Unanswered Requests: I submitted a FOIA request on October 25, 2024, to the Connecticut Attorney General's Office, followed by additional communications on October 31, November 2, and December 2, 2024. None of these were acknowledged or processed, violating statutory deadlines under 5 U.S.C. § 552(a)(6) and Conn. Gen. Stat. § 1-210. The complete lack of response demonstrates systemic non-compliance and obstruction of transparency. Deliberate Obstruction: The agencies' inaction suggests intentional efforts to suppress information related to the Medicaid ABI Waiver Program, hindering public oversight of federally funded programs. 2. ADA Violations Ignored Accommodation Requests: Along with my FOIA request, I explicitly requested reasonable accommodations under Title II of the ADA (42 U.S.C. § 12131) due to my traumatic brain injury (TBI). These included simplified communication



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	formats and accessible records. The agencies failed to provide accommodations, violating 28 C.F.R. § 35.130 and § 35.160, which require public entities to ensure effective communication and prohibit discrimination based on disability. Exclusion from Public Processes: I was systematically excluded from public forums and discussions related to Medicaid oversight, further marginalizing my voice as a whistleblower and disability advocate. This exclusion violates the Fourteenth Amendment's Equal Protection Clause and ADA protections. 3. Whistleblower Retaliation Procedural Barriers: After raising concerns about systemic failures in Medicaid oversight, I encountered procedural barriers, including delayed responses, public ridicule, and outright exclusion. These actions constitute retaliation, violating federal whistleblower protections aimed at safeguarding individuals who expose fraud, waste, or abuse in federally funded programs. 4. Gross Mismanagement of Federal Medicaid Funds Lack of Transparency: Refusal to disclose records related to the Medicaid ABI Waiver Program raises concerns of fraud, waste, and abuse of taxpayer dollars. Transparency in Medicaid program administration is mandated under 42 U.S.C. § 1396a(a)(30)(A), and failure to provide oversight jeopardizes compliance with federal funding requirements. Absence of Accountability Measures: Despite my FOIA requests, no records of audits, enforcement actions, or disciplinary measures against providers in the ABI Waiver Program have been disclosed. This lack of accountability endangers the program's integrity and the vulnerable populations it serves. 5. Documentary Evidence FOIA Submission Records: Copies of my FOIA request (October 25, 2024) and follow-ups (October 31, November 2, and December 2, 2024) provide a clear timeline of agency non-compliance. These records show repeated viol
Allegation	Abuse of Authority
What action did they take?	2. What Action Did They Take? Here's a detailed, bulletproof breakdown of the actions (or inactions) taken by each key individual that resulted in violations of FOIA,



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	ADA, constitutional rights, and federal Medicaid regulations. This response ensures clarity, legal precision, and actionable details. 1. Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS) Position in Chain of Command: Head of DSS Actions Taken: Ignored FOIA requests submitted on October 25, 2024, and follow-ups on October 31, November 2, and December 2, 2024, violating 5 U.S.C. § 552 and Conn. Gen. Stat. § 1-210. Denied ADA accommodation requests for simplified communication formats and accessible records, violating Title II of the ADA (42 U.S.C. § 12131) and associated regulations (28 C.F.R. § 35.130, § 35.160). Allowed systemic exclusion of individuals with disabilities from public processes, violating the Fourteenth Amendment's Equal Protection Clause. Failed to conduct or disclose audits and accountability measures for Medicaid ABI Waiver Program providers, raising concerns of fraud, waste, and abuse of taxpayer-funded Medicaid programs, violating 42 U.S.C. § 1396a. 2. Attorney General William Tong Title: Connecticut Attorney General Position in Chain of Command: Head of the Connecticut Office of the Attorney General Actions Taken: Refused to acknowledge or process FOIA requests submitted to his office, suppressing transparency and violating the First Amendment's right to petition and Fifth Amendment due process rights. Failed to enforce FOIA compliance and transparency across Connecticut agencies, perpetuating systemic violations of 5 U.S.C. § 552. Neglected to address ADA accommodation failures within his office, enabling discriminatory practices, violating Title II of the ADA. Suppressed whistleblower advocacy by allowing procedural barriers and delays, undermining federal whistleblower protections. 3. Barbara Manning Title: CMS Regional Administrator (Region 1) Position in Chain of Command: Oversees CMS operations in Connecticut and neighboring states Actions Taken: Failed to enforce oversight of Connecticut's Medicaid ABI Waiver Program, despite clear indications of systemic non-compliance,



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	violating 42 U.S.C. § 1396a. Neglected federal responsibilities to investigate and address mismanagement in Medicaid programs, enabling potential fraud, waste, and abuse of taxpayer funds. 4. Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS) Position in Chain of Command: National Administrator of CMS Actions Taken: Allowed systemic issues in Connecticut's Medicaid ABI Waiver Program to persist, failing to enforce federal oversight responsibilities under 42 U.S.C. § 1396a. Neglected to ensure state compliance with transparency, accountability, and effective program administration, jeopardizing public trust and Medicaid beneficiaries. 5. Eileen Meskill Title: Deputy Attorney General Position in Chain of Command
When did this occur?	Timeline of Events October 25, 2024: I submitted a FOIA request to the Connecticut Attorney General's Office, requesting records related to the Medicaid Acquired Brain Injury (ABI) Waiver Program. This request explicitly included ADA accommodation requests for simplified communication formats and accessible records due to my traumatic brain injury (TBI). The Attorney General's Office and DSS failed to acknowledge the request within the statutory four-business-day deadline required under Conn. Gen. Stat. § 1-210, initiating the violation. October 31, 2024: I sent the first follow-up communication to both the Attorney General's Office and DSS, requesting acknowledgment of my FOIA request and compliance with ADA requirements. Both agencies failed to respond, violating statutory FOIA deadlines under 5 U.S.C. § 552 and state law. November 2, 2024: A second follow-up was submitted, emphasizing the urgency of my request for transparency and the legal obligation to accommodate my disability
How did you discover this action?	4. How Did You Discover This Action? I discovered the violations through my direct engagement as a whistleblower and advocate for transparency and accountability in Connecticut's Medicaid Acquired Brain Injury (ABI) Waiver Program. Below is a detailed



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	explanation of how I identified the systemic failures: 1. Submission of FOIA Requests Date: October 25, 2024 I submitted a FOIA request to the Connecticut Attorney General's Office, seeking records related to the Medicaid ABI Waiver Program to evaluate the program's oversight and compliance with federal regulations. Despite statutory deadlines requiring acknowledgment within four business days (Conn. Gen. Stat. § 1-210) and response within 20 business days (5 U.S.C. § 552(a)(6)(A)), no response or acknowledgment was received. 2. Repeated Follow-Ups and Continued Non-Response Dates: October 31, November 2, and December 2, 2024 I sent follow-up communications to the Attorney General's Office and the Connecticut Department of Social Services (DSS), highlighting the lack of acknowledgment and requesting updates. Each follow-up was ignored, which revealed systemic procedural failures and deliberate non-compliance with transparency obligations. 3. Denial of ADA Accommodations Along with my FOIA requests, I explicitly requested reasonable ADA accommodations due to my traumatic brain injury (TBI), including: Simplified communication formats. Accessible records compatible with assistive technologies. The agencies' failure to acknowledge or address these requests revealed violations of Title II of the ADA (42 U.S.C. § 12131) and 28 C.F.R. § 35.130 and § 35.160, further excluding me from public processes. 4. Exclusion from Public Processes My exclusion from public forums and discussions related to Medicaid program oversight—despite being a direct stakeholder—underscored systemic barriers and discriminatory practices. This exclusion revealed constitutional violations, including: First Amendment (right to petition): Suppression of my advocacy efforts. Fifth Amendment (due process): Denial of access to legally mandated processes and information. Fourteenth Amendment (equal protection): Discrimination based on my disability, preventing equitable participation. 5. Broader Investigation and Analysis As I analyzed the lack of response, I uncovered



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	broader systemic issues, including: Lack of Transparency: No publicly available records or disclosures related to Medicaid ABI Waiver Program audits, provider complaints, or enforcement actions. Potential Mismanagement: The absence of accountability measures raised concerns about fraud, waste, and abuse of taxpayer-funded Medicaid resources, violating 42 U.S.C. § 1396a. 6. Corroborating Evidence from Procedural Barriers Procedural barriers, such as non-responsiveness, exclusionary practices, and delays, confirmed deliberate obstruction and systemic failures across the Attorney General's Office, DSS, and other agencies. These actions directly impeded my ability to advocate
What additional facts support your allegation?	5. What Additional Facts Support Your Allegation? Here is a comprehensive response with specific supporting facts tied to the allegations of systemic violations of FOIA, ADA, Medicaid regulations, constitutional rights, and taxpayer protections: 1. FOIA Non-Compliance Unanswered FOIA Requests: I submitted a FOIA request on October 25, 2024, to the Connecticut Attorney General's Office, with follow-ups on October 31, November 2, and December 2, 2024. None of these communications were acknowledged or answered, violating statutory requirements under 5 U.S.C. § 552 (FOIA) and Conn. Gen. Stat. § 1-210. This deliberate inaction reflects a systemic failure to uphold transparency and accountability in Medicaid program oversight. Pattern of Obstruction: The lack of acknowledgment, communication, or documentation in response to lawful FOIA requests demonstrates intentional suppression of public information about the Medicaid ABI Waiver Program. 2. ADA Violations Ignored ADA Accommodation Requests: Along with my FOIA request, I explicitly requested ADA accommodations due to my traumatic brain injury (TBI). These included simplified communication formats and accessible records. The refusal to address these accommodation requests constitutes a violation of Title II of the ADA (42 U.S.C. § 12131) and its implementing regulations (28 C.F.R. §



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	35.130, § 35.160), further excluding me from participating in government processes. Exclusionary Practices: My exclusion from public forums and discussions related to Medicaid oversight underscores systemic discrimination and deliberate marginalization of individuals with disabilities, violating the Fourteenth Amendment Equal Protection Clause. 3. Constitutional Violations First Amendment Violations: By obstructing FOIA requests and suppressing my ability to advocate as a whistleblower, the Connecticut Attorney General's Office and DSS infringed upon my First Amendment right to petition the government for redress of grievances. Fifth Amendment Violations: The refusal to provide access to legally mandated public records and processes denied my due process rights, as guaranteed by the Fifth Amendment. Fourteenth Amendment Violations: The systemic exclusion of individuals with disabilities from public processes constitutes discrimination, violating my Fourteenth Amendment right to equal protection under the law. 4. Whistleblower Retaliation Suppression of Advocacy: Procedural barriers, non-responsiveness, and public exclusion demonstrate retaliation against my efforts to expose systemic failures in Medicaid oversight. These actions violate federal whistleblower protection laws designed to protect individuals advocating for transparency and accountability in federally funded programs. 5. Medicaid Oversight Failures Lack of Transparency: No publicly available records or audits exist detailing the Medicaid ABI Waiver Program's administration, provider oversight, or enforcement actions. This absence of accountability rai
Allegation	Gross Waste of Funds
What action did they take?	Gross Waste of Funds Allegation This allegation focuses on the mismanagement or misallocation of federal Medicaid funds, emphasizing systemic failures to ensure transparency and accountability. Below is the breakdown of how each individual's role and actions (or inactions) contributed to this gross waste of taxpayer dollars: 1. Andrea Barton Reeves Title: Commissioner, Connecticut



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	Department of Social Services (DSS) Role: Oversees DSS operations, including Medicaid programs such as the ABI Waiver Program. Actions Contributing to Gross Waste of Funds: Failed to provide transparency into Medicaid ABI Waiver Program administration, violating 42 U.S.C. § 1396a. Neglected to ensure oversight of providers, including audits, accountability measures, and responses to complaints, increasing the risk of fraud, waste, and abuse. Refused to disclose requested records through FOIA, preventing public accountability for the program's expenditures and operations. Enabled systemic inefficiency by ignoring ADA accommodation requests, creating barriers to stakeholder advocacy and oversight. 2. Attorney General William Tong Title: Connecticut Attorney General Role: Responsible for ensuring legal compliance and transparency across state agencies, including Medicaid program operations. Actions Contributing to Gross Waste of Funds: Oversaw the obstruction of FOIA requests, suppressing public access to information necessary for holding DSS and Medicaid programs accountable. Failed to enforce transparency and accountability laws, enabling potential misuse of Medicaid funds allocated to the ABI Waiver Program. Allowed systemic non-compliance, risking financial mismanagement of taxpayer-funded programs. 3. Barbara Manning Title: CMS Regional Administrator (Region 1) Role: Oversees CMS operations in Connecticut and neighboring states, ensuring compliance with federal Medicaid regulations. Actions Contributing to Gross Waste of Funds: Failed to investigate systemic failures in Connecticut's Medicaid ABI Waiver Program, despite ongoing non-compliance and lack of transparency. Neglected oversight responsibilities, allowing the potential misallocation of federally allocated Medicaid funds. 4. Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS) Role: National Administrator of Medicaid programs. Actions Contributing to Gross Waste of Funds: Allowed systemic issues in Medicaid program oversight in Connecticut to



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	persist without intervention. Failed to ensure Connecticut adhered to federal Medicaid regulations, enabling potential misuse or mismanagement of funds. 5. Eileen Meskill Title: Deputy Attorney General Role: Second-in-command to the Connecticut Attorney General, responsible for operational oversight of transparency laws. Actions Contributing to Gross Waste of Funds: Failed to enforce FOIA compliance within the Attorney General's Office, contributing to a lack of transparency in Medicaid program expenditures. Enabled procedural barriers
When did this occur?	3. When Did This Occur? The violations began on October 25, 2024, with the submission of my initial FOIA request to the Connecticut Attorney General's Office and continue to this day. Below is a detailed timeline of key events: Timeline of Events October 25, 2024: I submitted a FOIA request to the Connecticut Attorney General's Office, requesting records related to the Medicaid Acquired Brain Injury (ABI) Waiver Program. This request explicitly included ADA accommodation requests for simplified communication formats and accessible records due to my traumatic brain injury (TBI). The Attorney General's Office and the Department of Social Services (DSS) failed to acknowledge the request within the statutory four-business-day deadline required under Conn. Gen. Stat. § 1-210, initiating the first violation. October 31, 2024: I sent the first follow-up communication to the Attorney General's Office and DSS, requesting acknowledgment of my FOIA request and compliance with ADA requirements. N
How did you discover this action?	4. How Did You Discover This Action? I discovered these violations through direct engagement with the Freedom of Information Act (FOIA) process, my role as a whistleblower advocating for transparency in the Medicaid Acquired Brain Injury (ABI) Waiver Program, and repeated attempts to secure reasonable ADA accommodations. Below is a detailed account of how I uncovered these systemic issues: 1. Submission of FOIA Requests Date: October 25, 2024 I submitted a FOIA



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	request to the Connecticut Attorney General's Office, seeking records related to the Medicaid ABI Waiver Program. This request was intended to ensure transparency and accountability in a federally funded program. The agency's failure to meet statutory deadlines for acknowledgment and response alerted me to a potential systemic issue with transparency and FOIA compliance. 2. Follow-Up Communications Dates: October 31, November 2, and December 2, 2024 I sent follow-up communications to both the Attorney General's Office and the Department of Social Services (DSS), highlighting their failure to acknowledge or respond to my request. The consistent lack of response, combined with procedural delays, suggested deliberate non-compliance with transparency laws, violating 5 U.S.C. § 552 and Conn. Gen. Stat. § 1-210. 3. Denial of ADA Accommodations I included requests for reasonable ADA accommodations, such as simplified communication formats and accessible records, due to my traumatic brain injury (TBI). The agencies ignored these requests, which revealed systemic non-compliance with Title II of the ADA (42 U.S.C. § 12131) and its implementing regulations (28 C.F.R. § 35.130, § 35.160). The denial of accommodations further excluded me from participating in oversight processes, underscoring a pattern of discrimination and systemic barriers. 4. Exclusion from Public Processes Despite being a direct stakeholder in the Medicaid ABI Waiver Program, I was excluded from public forums and decision-making processes critical to Medicaid program oversight. This exclusion revealed violations of my: First Amendment right to petition the government. Fifth Amendment due process rights, as I was denied access to legally mandated processes. Fourteenth Amendment right to equal protection, as a person with disabilities. 5. Broader Investigations and Findings As I sought to understand the lack of response to my FOIA requests and ADA accommodations, I uncovered broader systemic issues, including: Lack of Transparency: No publicly available records on Medicaid



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	program oversight, provider accountability, or program audits. Potential Mismanagement: Absence of disclosures about enforcement actions against providers or corrective measures raises concerns about fraud, waste, and abuse of taxpayer-funded resources. 6. Corroborating Evidence FOIA Submission Records: Copies of my FOIA request and follow-up communications provide evidence of agency non-compliance. ADA Accommodation Requests: Documented requests for accommodation
What additional facts support your allegation?	5. What Additional Facts Support Your Allegation? The following facts substantiate the systemic violations of FOIA, ADA, Medicaid regulations, constitutional rights, and taxpayer protections. These facts highlight a pattern of non-compliance, gross waste of funds, and deliberate exclusion of individuals with disabilities from public processes. 1. FOIA Non-Compliance Ignored FOIA Requests: My initial FOIA request, submitted on October 25, 2024, and follow-ups on October 31, November 2, and December 2, 2024, were ignored by the Connecticut Attorney General's Office and the Department of Social Services (DSS). Both agencies violated statutory deadlines under 5 U.S.C. § 552 (FOIA) and Conn. Gen. Stat. § 1-210, failing to acknowledge or respond to legally submitted requests. Pattern of Obstruction: The refusal to disclose public records related to the Medicaid Acquired Brain Injury (ABI) Waiver Program reveals systemic suppression of transparency, violating federal and state laws designed to ensure public accountability. 2. ADA Violations Denied Accommodation Requests: Along with my FOIA request, I submitted explicit requests for reasonable accommodations due to my traumatic brain injury (TBI). These included simplified communication formats and accessible records, as mandated under Title II of the ADA (42 U.S.C. § 12131). The agencies failed to provide these accommodations, violating 28 C.F.R. § 35.130 and § 35.160, which require public entities to ensure effective communication and equitable access. Exclusionary Practices: By ignoring ADA accommodation requests,



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	DSS and the Attorney General's Office excluded me from participating in Medicaid program oversight processes. This exclusion violates the Fourteenth Amendment's Equal Protection Clause and perpetuates systemic discrimination against individuals with disabilities. 3. Constitutional Violations First Amendment (Right to Petition): FOIA non-compliance obstructed my ability to petition the government for redress of grievances, violating my constitutional right to advocate for transparency and accountability. Fifth Amendment (Due Process): The agencies' refusal to provide public records and accommodations denied me access to public processes mandated by law, violating my procedural due process rights. Fourteenth Amendment (Equal Protection): Systemic exclusion from public forums and decision-making processes due to my disability constitutes discrimination, violating my equal protection rights under the law. 4. Medicaid Oversight Failures Lack of Transparency: No publicly available records or audits exist detailing the Medicaid ABI Waiver Program's administration, provider accountability, or enforcement actions. This absence of oversight violates 42 U.S.C. § 1396a, which requires Medicaid programs to operate transparently and effectively. Potential Mismanagement: The lack of disclosure regarding complaints, violations, or corrective actions against Medicaid providers raises concerns about
Allegation	Danger to Public Health
What action did they take?	Danger to Public Health or Safety The lack of transparency, accountability, and oversight in Connecticut's Medicaid programs, specifically the Acquired Brain Injury (ABI) Waiver Program, poses a significant danger to public health and safety. Vulnerable populations, including individuals with acquired brain injuries, rely on these services for essential care, and systemic failures jeopardize their well-being. Below is a breakdown of how each individual contributed to this danger: 1. Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS) Role:



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	Oversees DSS operations, including the Medicaid ABI Waiver Program. Actions Contributing to Danger: Lack of Oversight: Failed to ensure transparency in program operations, including audits, complaints, and enforcement actions, increasing risks of substandard care. FOIA Non-Compliance: Refused to disclose information critical to evaluating the program's effectiveness and safety, violating 5 U.S.C. § 552 and Conn. Gen. Stat. § 1-210. Impact on Vulnerable Populations: Without accountability, Medicaid beneficiaries, including those with acquired brain injuries, face risks of neglect, mistreatment, or inadequate care. 2. Attorney General William Tong Title: Connecticut Attorney General Role: Responsible for ensuring legal compliance across state agencies. Actions Contributing to Danger: FOIA Obstruction: Suppressed transparency efforts by ignoring FOIA requests, obstructing access to vital Medicaid oversight information. Failure to Enforce Accountability: Did not hold DSS or other agencies accountable for systemic non-compliance, perpetuating unsafe practices in Medicaid programs. 3. Barbara Manning Title: CMS Regional Administrator (Region 1) Role: Oversees CMS operations in Connecticut and other New England states. Actions Contributing to Danger: Lack of Federal Oversight: Neglected to investigate or address systemic failures in Connecticut's Medicaid ABI Waiver Program, despite its federally funded nature. Risk to Public Health: By failing to ensure program accountability, Barbara Manning allowed unsafe conditions and risks to persist for vulnerable Medicaid populations. 4. Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS) Role: National Administrator of Medicaid programs. Actions Contributing to Danger: Failure to Intervene: Did not address ongoing issues in Connecticut's Medicaid program, allowing risks to public health and safety to escalate. Jeopardized Beneficiary Care: Lax oversight contributed to systemic failures that directly impact the quality and accessibility of care for Medicaid beneficiaries. 5. Eileen Meskill Title: Deputy



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	Attorney General Role: Second-in-command to Attorney General William Tong. Actions Contributing to Danger: Neglected Legal Oversight: Failed to enforce transparency and ADA compliance, preventing stakeholders from ensuring the safety and efficacy of Medicaid programs. 6. Governor Ned Lamont Title: Go
When did this occur?	3. When Did This Occur? The violations began on October 25, 2024, with my initial FOIA request to the Connecticut Attorney General's Office, and continue to this day. Below is a detailed timeline of events that illustrate the systemic and ongoing nature of these violations: Timeline of Events October 25, 2024: I submitted a FOIA request to the Connecticut Attorney General's Office seeking records related to the Medicaid Acquired Brain Injury (ABI) Waiver Program. This request also included ADA accommodation requests for simplified communication formats and accessible records due to my traumatic brain injury (TBI). The Attorney General's Office and the Department of Social Services (DSS) failed to acknowledge the request within the statutory four-business-day deadline required under Conn. Gen. Stat. § 1-210, initiating the first violation. October 31, 2024: I submitted a follow-up communication to both the Attorney General's Office and DSS, requesting acknowledgment of my FOIA submissi
How did you discover this action?	4. How Did You Discover This Action? I discovered these violations through direct engagement with the Freedom of Information Act (FOIA) process, my role as a whistleblower advocating for transparency in the Medicaid Acquired Brain Injury (ABI) Waiver Program, and repeated attempts to secure reasonable ADA accommodations. Below is a detailed explanation of how I uncovered these systemic failures: 1. Submission of FOIA Requests Date: October 25, 2024 I submitted a FOIA request to the Connecticut Attorney General's Office, seeking records related to the Medicaid ABI Waiver Program to evaluate its oversight and compliance with federal regulations. The agency failed to acknowledge the request within the statutory four-business-day



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	deadline under Conn. Gen. Stat. § 1-210, which was my first indication of potential systemic transparency issues. 2. Follow-Up Communications Dates: October 31, November 2, and December 2, 2024 After receiving no acknowledgment, I sent follow-up communications to both the Attorney General's Office and the Department of Social Services (DSS). The consistent lack of response and failure to meet statutory deadlines under 5 U.S.C. § 552 (FOIA) revealed procedural barriers and deliberate non-compliance with transparency laws. 3. Denial of ADA Accommodations Along with my FOIA request, I submitted explicit ADA accommodation requests due to my traumatic brain injury (TBI), including simplified communication formats and accessible records. The agencies' failure to address or fulfill these accommodations exposed systemic non-compliance with Title II of the ADA (42 U.S.C. § 12131) and 28 C.F.R. § 35.130 and § 35.160. This denial of accommodations excluded me from participating in public processes and advocacy efforts, further confirming institutional barriers and discriminatory practices. 4. Exclusion from Public Processes Despite being a direct stakeholder in the Medicaid ABI Waiver Program, I was excluded from public forums and decision-making processes critical to Medicaid oversight. This exclusion revealed violations of my: First Amendment right to petition the government for redress. Fifth Amendment due process rights, as I was denied access to legally mandated processes. Fourteenth Amendment right to equal protection, as a person with disabilities. 5. Broader Investigation and Findings As I sought to understand the lack of response and accommodations, I uncovered broader systemic issues, including: Lack of Transparency: No publicly available records on Medicaid program oversight, provider accountability, or program audits. Potential Mismanagement: The absence of disclosures about enforcement actions against providers or corrective measures raised concerns about fraud, waste, and abuse of taxpayer-funded resources. 6. Corroborating Evidence



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	FOIA Submission Records: Copies of my FOIA request and follow-up communications provide evidence of non-compliance. ADA Accommodation Requests: Documented requests for accommodations highligh
What additional facts support your allegation?	5. What Additional Facts Support Your Allegation? The following facts substantiate my allegations of systemic violations of FOIA, ADA, Medicaid oversight regulations, constitutional rights, and taxpayer protections. These facts illustrate a pattern of non-compliance, mismanagement, and deliberate exclusion of individuals with disabilities from public processes. 1. FOIA Non-Compliance Ignored FOIA Requests: My FOIA request, submitted on October 25, 2024, and follow-ups on October 31, November 2, and December 2, 2024, were ignored by the Connecticut Attorney General's Office and the Department of Social Services (DSS). Both agencies failed to meet statutory deadlines under 5 U.S.C. § 552 (FOIA) and Conn. Gen. Stat. § 1-210, reflecting a deliberate pattern of suppression of public information. Systemic Suppression of Transparency: The lack of acknowledgment or response to lawful FOIA requests demonstrates systemic efforts to obstruct access to critical records regarding the Medicaid Acquired Brain Injury (ABI) Waiver Program. 2. ADA Violations Ignored ADA Accommodation Requests: Along with my FOIA request, I submitted explicit ADA accommodation requests due to my traumatic brain injury (TBI). These included simplified communication formats and accessible records. The agencies failed to acknowledge or fulfill these requests, violating Title II of the ADA (42 U.S.C. § 12131) and associated regulations (28 C.F.R. § 35.130 and § 35.160). Exclusionary Practices: By denying ADA accommodations, the agencies excluded me from participating in oversight processes related to Medicaid programs. This constitutes discrimination and violates the Fourteenth Amendment Equal Protection Clause. 3. Constitutional Violations First Amendment (Right to Petition): FOIA non-compliance obstructed my ability to petition the government for redress of grievances,



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	violating my constitutional right to advocate for transparency and accountability. Fifth Amendment (Due Process): The agencies' refusal to provide access to public records and ADA accommodations denied me access to processes required by law, violating my procedural due process rights. Fourteenth Amendment (Equal Protection): Systemic exclusion from public forums and decision-making processes constitutes discrimination, violating my right to equal protection as an individual with disabilities. 4. Medicaid Oversight Failures Lack of Transparency in Program Operations: No publicly available records or audits exist detailing the Medicaid ABI Waiver Program's administration, provider accountability, or enforcement actions. This lack of oversight violates federal Medicaid regulations under 42 U.S.C. § 1396a, which require states to operate Medicaid programs transparently and efficiently. Potential Mismanagement: The absence of records about complaints, provider violations, or corrective actions raises concerns about fraud, waste, and abuse of taxpayer-funded Medicaid resources. 5. Whistleblower Retaliation Suppress
Allegation	Danger to Public Safety
What action did they take?	Constitutional Rights Violations Contributing to Danger to Public Safety The systemic failures in transparency, ADA compliance, and oversight within Connecticut's Medicaid programs, particularly the ABI Waiver Program, violate multiple constitutional rights and significantly endanger public safety. Below are the specific constitutional violations linked to key individuals' actions or inactions. 1. First Amendment Violations Right to Petition the Government: What Happened: FOIA non-compliance obstructed my right to petition the government for redress of grievances. The Attorney General's Office and DSS suppressed my advocacy efforts by ignoring lawful FOIA requests, preventing me from addressing systemic Medicaid oversight failures. Constitutional Violation: Suppressing my ability to request information and advocate for transparency



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	violates the First Amendment. 2. Fifth Amendment Violations Right to Due Process: What Happened: Denied access to public records mandated by FOIA and state law. Ignored ADA accommodations, effectively excluding me from participating in Medicaid-related public processes. Procedural barriers and non-responsiveness blocked my access to legal remedies. Constitutional Violation: These actions violate the Fifth Amendment, which guarantees procedural due process rights when engaging with government processes. 3. Fourteenth Amendment Violations Equal Protection Under the Law: What Happened: Denial of ADA accommodations excluded me, as a person with a disability, from critical forums and decision-making processes concerning Medicaid oversight. Systemic neglect disproportionately impacts individuals with acquired brain injuries and disabilities, creating unequal access to public services. Constitutional Violation: This exclusion constitutes discrimination, violating the Fourteenth Amendment's Equal Protection Clause. Due Process (State-Level Applications): What Happened: Lack of transparency and accountability in Medicaid programs directly affects beneficiaries' ability to access safe, effective care. DSS and the Attorney General's Office ignored FOIA requests and procedural requirements, bypassing due process obligations. Constitutional Violation: These actions also violate the Fourteenth Amendment's Due Process Clause, which requires fairness in government actions impacting individuals' rights. Specific Violations Linked to Danger to Public Safety Denial of Transparency (First and Fifth Amendments): FOIA violations obstruct public accountability, preventing timely identification of safety risks in Medicaid programs, which jeopardizes beneficiaries' lives and well-being. Exclusion of Stakeholders (Fourteenth Amendment): The exclusion of individuals with disabilities from public processes weakens program accountability and oversight, increasing risks of harm to vulnerable populations. Suppression of Advocacy (First Amendment): Retaliatory



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	procedural barriers discourage whistleblower advocacy, allowing dangerous conditions
When did this occur?	3. When Did This Occur? The violations began on October 25, 2024, with the submission of my initial FOIA request to the Connecticut Attorney General's Office, and continue to this day. Below is a detailed timeline of events, demonstrating systemic and ongoing failures. Timeline of Events October 25, 2024: I submitted a FOIA request to the Connecticut Attorney General's Office, seeking records related to the Medicaid Acquired Brain Injury (ABI) Waiver Program. This request explicitly included ADA accommodation requests for simplified communication formats and accessible records, as required under Title II of the ADA (42 U.S.C. § 12131). The Attorney General's Office and the Department of Social Services (DSS) failed to acknowledge this request within the statutory four-business-day deadline required under Conn. Gen. Stat. § 1-210, initiating the first violation. October 31, 2024: I sent a follow-up communication to the Attorney General's Office and DSS, requesting acknowledgment of my
How did you discover this action?	4. How Did You Discover This Action? I discovered these violations through direct engagement with the Freedom of Information Act (FOIA) process, my role as a whistleblower advocating for transparency in the Medicaid Acquired Brain Injury (ABI) Waiver Program, and repeated attempts to secure reasonable ADA accommodations. Below is a detailed explanation of how I uncovered these systemic failures: 1. Submission of FOIA Requests Date: October 25, 2024 I submitted a FOIA request to the Connecticut Attorney General's Office, seeking records related to the Medicaid ABI Waiver Program to evaluate its oversight, compliance with federal Medicaid regulations, and effectiveness in serving vulnerable populations. The lack of acknowledgment or response to this request, required under Conn. Gen. Stat. § 1-210 and 5 U.S.C. § 552(a)(6)(A), indicated potential transparency failures and non-compliance with statutory obligations. 2. Follow-Up Communications Dates:



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	October 31, November 2, and December 2, 2024 After receiving no acknowledgment, I sent multiple follow-up communications to both the Attorney General's Office and the Department of Social Services (DSS). The continued lack of response revealed systemic procedural failures and deliberate suppression of transparency, as required under state and federal FOIA laws. 3. Denial of ADA Accommodations Along with my FOIA request, I submitted explicit ADA accommodation requests due to my traumatic brain injury (TBI). These accommodations included: Simplified communication formats. Accessible records compatible with assistive technologies. The agencies' failure to fulfill these reasonable accommodation requests demonstrated non-compliance with Title II of the ADA (42 U.S.C. § 12131) and its implementing regulations (28 C.F.R. § 35.130 and § 35.160). This exclusion from participating in critical oversight processes further revealed systemic discrimination and procedural barriers. 4. Exclusion from Public Processes Despite being a direct stakeholder in the Medicaid ABI Waiver Program, I was excluded from public forums, discussions, and decision-making processes critical to Medicaid program oversight. This exclusion revealed violations of my: First Amendment right to petition the government for redress of grievances. Fifth Amendment due process rights, as I was denied access to legally mandated processes. Fourteenth Amendment right to equal protection, as a person with disabilities. 5. Broader Investigation and Findings Through my advocacy efforts, I uncovered broader systemic issues, including: Lack of Transparency: No publicly available records, audits, or enforcement actions exist detailing the Medicaid ABI Waiver Program's operations or accountability mechanisms. Potential Mismanagement: Absence of records about complaints, violations, or corrective actions raises concerns about fraud, waste, and abuse of taxpayer-funded Medicaid resources. Barriers to Accountability: Systemic delays and exclusionary practices obst



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What additional facts support your allegation?	5. What Additional Facts Support Your Allegation? The following facts substantiate my allegations of systemic violations of FOIA, ADA, Medicaid regulations, constitutional rights, and taxpayer protections. These facts highlight systemic non-compliance, potential mismanagement, and a deliberate exclusion of individuals with disabilities from public processes. 1. FOIA Non-Compliance Ignored FOIA Requests: My FOIA request, submitted on October 25, 2024, and follow-ups on October 31, November 2, and December 2, 2024, were ignored by the Connecticut Attorney General's Office and the Department of Social Services (DSS). Both agencies failed to meet statutory deadlines under 5 U.S.C. § 552 (FOIA) and Conn. Gen. Stat. § 1-210, reflecting deliberate non-compliance with federal and state transparency laws. Systemic Suppression of Transparency: The refusal to disclose public records regarding the Medicaid Acquired Brain Injury (ABI) Waiver Program prevents public accountability, perpetuating risks to vulnerable populations. 2. ADA Violations Ignored ADA Accommodation Requests: Along with my FOIA request, I submitted explicit ADA accommodation requests due to my traumatic brain injury (TBI). These included simplified communication formats and accessible records compatible with assistive technologies. The agencies failed to acknowledge or fulfill these requests, violating Title II of the ADA (42 U.S.C. § 12131) and 28 C.F.R. § 35.130 and § 35.160. Exclusionary Practices: By denying ADA accommodations, the agencies excluded me from participating in Medicaid program oversight. This exclusion violates the Fourteenth Amendment Equal Protection Clause and perpetuates systemic discrimination against individuals with disabilities. 3. Constitutional Violations First Amendment Violations: FOIA non-compliance obstructed my right to petition the government for redress of grievances, violating the First Amendment. Fifth Amendment Violations: The agencies' refusal to provide access to public records and accommodations denied me procedural due process,



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	violating the Fifth Amendment. Fourteenth Amendment Violations: Excluding individuals with disabilities from public processes constitutes discrimination and violates the Fourteenth Amendment Equal Protection Clause. 4. Medicaid Oversight Failures Lack of Transparency in Program Operations: No publicly available records or audits exist detailing the Medicaid ABI Waiver Program's provider accountability, complaint investigations, or enforcement actions. The lack of transparency violates 42 U.S.C. § 1396a, which requires states to operate Medicaid programs transparently and effectively. Potential Mismanagement: The absence of publicly disclosed records about provider violations, complaints, or corrective actions raises concerns about fraud, waste, and abuse of taxpayer-funded Medicaid resources. 5. Whistleblower Retaliation Procedural Barriers: The agencies imposed procedural barriers, such as non-responsiveness and e

DISCLOSURE SUBJECTS

Name of individual you believe is responsible for the wrongdoing disclosed.

First Name	Last Name	Title	Chain of Command
Attorney General William Tong	Attorney General William Tong	Connecticut Attorney General William Tong	Connecticut Attorney General William Tong
Andrea Barton Reeves	Andrea Barton Reeves	Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS)	Andrea Barton Reeves: Appointed as Commissioner of DSS in early 2023, she oversees the department's
Governor Ned Lamont	Governor Ned Lamont	Governor Ned Lamont	Governor Ned Lamont



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Chiquita Brooks-LaSure	Chiquita Brooks-LaSure	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS)
Eileen Meskill	Eileen Meskill	Eileen Meskill Deputy Attorney General for the Connecticut Office of the Attorney General.	Deputy Attorney General for the Connecticut Office of the Attorney General.
Barbara Manning	Barbara Manning	CMS Regional Administrator Role: Oversees CMS operations	CMS Regional Administrator Role: Oversees CMS operations
Tanya Hughes (CHRO Executive Director)	Tanya Hughes (CHRO Executive Director)	Tanya Hughes (CHRO Executive Director)	Tanya Hughes (CHRO Executive Director)
Matthew Brokman serves as the Chief of Staff to Connecticut Governor	Matthew Brokman serves as the Chief of Staff to Connecticut Governor	Matthew Brokman serves as the Chief of Staff to Connecticut Governor	Matthew Brokman serves as the Chief of Staff to Connecticut Governor
Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS)	Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS)	Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS)	Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS)



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William Tong Connecticut Attorney General	William Tong Connecticut Attorney General	William Tong Connecticut Attorney General	William Tong Connecticut Attorney General
Barbara Manning CMS Regional Administrator Role: Oversees CMS operations	Barbara Manning CMS Regional Administrator Role: Oversees CMS operations	Barbara Manning CMS Regional Administrator Role: Oversees CMS operations	Barbara Manning CMS Regional Administrator Role: Oversees CMS operations
Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS)
Eileen Meskill Deputy Attorney General for the Connecticut Office of the Attorney General.	Eileen Meskill Deputy Attorney General for the Connecticut Office of the Attorney General.	Eileen Meskill Deputy Attorney General for the Connecticut Office of the Attorney General.	Eileen Meskill Deputy Attorney General for the Connecticut Office of the Attorney General.
Governor Ned Lamont	Governor Ned Lamont	Governor Ned Lamont	Governor Ned Lamont
Matthew Brokman serves as the Chief of Staff to Connecticut Governor	Matthew Brokman serves as the Chief of Staff to Connecticut Governor	Matthew Brokman serves as the Chief of Staff to Connecticut Governor	Matthew Brokman serves as the Chief of Staff to Connecticut Governor



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Tanya Hughes (CHRO Executive Director)	Tanya Hughes (CHRO Executive Director)	Tanya Hughes (CHRO Executive Director)	Tanya Hughes (CHRO Executive Director)
Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS)	Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS)	Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS)	Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS)
William Tong Connecticut Attorney General	William Tong Connecticut Attorney General	William Tong Connecticut Attorney General	William Tong Connecticut Attorney General
Barbara Manning CMS Regional Administrator	Barbara Manning CMS Regional Administrator	Barbara Manning CMS Regional Administrator	Barbara Manning CMS Regional Administrator
Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS)
Eileen Meskill Deputy Attorney General for the Connecticut	Eileen Meskill Deputy Attorney General for the Connecticut	Eileen Meskill Deputy Attorney General for the Connecticut	Eileen Meskill Deputy Attorney General for the Connecticut
Governor Ned Lamont	Governor Ned Lamont	Governor Ned Lamont	Governor Ned Lamont



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Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS)	Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS)	Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS)	Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS)
William Tong – Attorney General, Connecticut	William Tong – Attorney General, Connecticut	William Tong – Attorney General, Connecticut	William Tong – Attorney General, Connecticut
Barbara Manning CMS Regional Administrator	Barbara Manning CMS Regional Administrator	Barbara Manning CMS Regional Administrator	Barbara Manning CMS Regional Administrator
Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS)
Eileen Meskill Title: Deputy Attorney General	Eileen Meskill Title: Deputy Attorney General	Eileen Meskill Title: Deputy Attorney General	Eileen Meskill Title: Deputy Attorney General



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Matthew Brokman Title: Chief of Staff to Governor Ned Lamont	Matthew Brokman Title: Chief of Staff to Governor Ned Lamont	Matthew Brokman Title: Chief of Staff to Governor Ned Lamont	Matthew Brokman Title: Chief of Staff to Governor Ned Lamont
Tanya Hughes Title: Executive Director, Commission on Human Rights and Opportunities (CHRO)	Tanya Hughes Title: Executive Director, Commission on Human Rights and Opportunities (CHRO)	Tanya Hughes Title: Executive Director, Commission on Human Rights and Opportunities (CHRO)	Tanya Hughes Title: Executive Director, Commission on Human Rights and Opportunities (CHRO)
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William Tong – Attorney General, Connecticut	William Tong – Attorney General, Connecticut	William Tong – Attorney General, Connecticut	William Tong – Attorney General, Connecticut
Barbara Manning CMS Regional Administrator	Barbara Manning CMS Regional Administrator	Barbara Manning CMS Regional Administrator	Barbara Manning CMS Regional Administrator
Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare &	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS)



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		Medicaid Services (CMS)	
Eileen Meskill Deputy Attorney General for the Connecticut Office of the Attorney General.	Eileen Meskill Deputy Attorney General for the Connecticut Office of the Attorney General.	Eileen Meskill Deputy Attorney General for the Connecticut Office of the Attorney General.	Eileen Meskill Deputy Attorney General for the Connecticut Office of the Attorney General.
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William Tong – Attorney General, Connecticut	William Tong – Attorney General, Connecticut	William Tong – Attorney General, Connecticut	William Tong – Attorney General, Connecticut
Barbara Manning CMS Regional Administrator	Barbara Manning CMS Regional Administrator	Barbara Manning CMS Regional Administrator	Barbara Manning CMS Regional Administrator



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REQUESTED OSC ACTION

What action would you like OSC to take?

Document attached Request for Federal Representation

The Office of Special Counsel (OSC) and other relevant federal agencies, including the Department of Justice (DOJ), the Department of Health and Human Services (HHS), and the Centers for Medicare & Medicaid Services (CMS), must represent both myself as a whistleblower and the broader public in addressing these systemic violations. These actions should include:



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1. Representing Whistleblower Rights

Protect My Advocacy Efforts:

Enforce whistleblower protections under the Whistleblower Protection Act to safeguard my rights and ensure that my efforts to expose systemic failures are not met with retaliation.

Act as a federal intermediary to hold state agencies accountable for obstructing transparency and ADA compliance.

Provide Legal and Procedural Representation:

Advocate for my access to records, ADA accommodations, and participation in oversight processes as required under FOIA, ADA, and constitutional rights provisions.

Assist in ensuring that state agencies, including DSS and the Connecticut Attorney General's Office, comply with federal laws and policies.

2. Representing the Broader Public Interest

Ensure Accountability for Medicaid Mismanagement:

Represent the interests of taxpayers and Medicaid beneficiaries by investigating systemic mismanagement and potential misuse of federal funds under 42 U.S.C. § 1396a.

Address gross waste of federal and state resources allocated to the Medicaid ABI Waiver Program, ensuring that these funds serve their intended purpose of supporting vulnerable populations.

Protect Public Safety:

Act on behalf of individuals who rely on Medicaid services, ensuring program integrity and preventing harm to public health and safety caused by lack of oversight, transparency, or accountability.

Address the exclusion of stakeholders with disabilities from decision-making processes, which creates inequitable systems that endanger lives and erode public trust.

3. Federal Oversight of State Agencies

Hold State Agencies Accountable:

Represent federal authority in addressing Connecticut's systemic failures, ensuring that state agencies comply with federal laws, including FOIA, ADA, and Medicaid oversight regulations.

Require the Connecticut Department of Social Services (DSS), the Connecticut Attorney



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General's Office, and CHRO to implement federal-mandated corrective actions.

Demand Systemic Reforms:

Advocate for the establishment of independent oversight bodies to monitor ADA compliance, Medicaid program transparency, and whistleblower protections in Connecticut.

4. Advocating for Constitutional Protections

First Amendment:

Ensure my right to petition the government for redress of grievances is fully protected by holding state agencies accountable for suppressing FOIA requests and obstructing advocacy efforts.

Fifth Amendment:

Guarantee procedural due process in accessing public records, participating in Medicaid oversight, and ensuring equitable treatment under the law.

Fourteenth Amendment:

Demand equal protection for individuals with disabilities who are excluded from public forums, decision-making processes, and oversight roles due to systemic ADA violations.

5. Supporting Restorative Justice

Advocate for Compensation and Acknowledgment:

Request compensation for the harm caused to myself and others affected by these systemic violations, including delays, barriers to advocacy, and exclusion from public processes.

Seek a public acknowledgment of failures by Connecticut state agencies to ensure accountability and transparency for the public.

Mandate Public Reforms:

Represent the public interest by ensuring systemic reforms that guarantee transparency, accountability, and compliance with federal laws in all future Medicaid operations.

Conclusion

This request explicitly asks the federal government, through OSC and related agencies, to act on behalf of both myself as a whistleblower and the broader public interest, ensuring transparency, equity, and accountability in federally funded programs. The federal government's role is essential to restoring trust in public institutions and protecting the rights of whistleblowers and vulnerable populations.

WHERE ELSE DID YOU REPORT THIS MATTER?



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I have also disclosed this information to:

Other Action Type	Action Taken Date

Additional information about reports to Inspectors General, if applicable.

First Name:

Last Name:

Title:

Address:

Email Address:

Telephone Number:

Case ID #:

a. **What is the status of the matter?**

NOTE: MATTERS INVESTIGATED BY AN OFFICE OF INSPECTOR GENERAL

It is the general policy of OSC not to transmit allegations of wrongdoing to the head of the agency involved if the agency's Office of Inspector General has fully investigated, or is currently investigating, the same allegations.

ATTACHMENTS

Please note that the space available for attachments is limited. Therefore, DO NOT attach every document and email that may be relevant to your claim. You will have an opportunity to make additional submissions at a later date. We recommend limiting attachments to official forms and correspondence that document the action(s) at issue in your disclosure if these documents are relevant to your allegations.

I have attached the following documents to my filing:

File Name
State and Federal FOIA Request for Medicaid Acquired Brain Injury (ABI) Waiver Program Provider Registry _ Connecticut (Office of the Attorney General - Connecticut) (2).zip
599875 download.pdf
09.24.2024
Federal_Intervention_HHS_OIG_CMS_GAO_DOJ_OCR_Whistleblower_Report_2024.pdf



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Federal Representation for Justice DB.42.131.Inf. Medeiros Connecticut 11.28.2024 .pdf
Request for Federal Action Constitutional Rights ADA Non-Compliance Whistleblower Retaliation and Gross Mismanagement of Medicaid FundsFederal Representation for Justice DB.42.131.Inf. Medeiros Connecticut 12.02.2024 .pdf
State and Federal FOIA Request for Medicaid Acquired Brain Injury (ABI) Waiver Program Provider Registry _ Connecticut (Office of the Attorney General - Connecticut) (2).zip

CONSENT

Do you consent to the disclosure of your identify to others outside OSC if it becomes necessary in taking further action on this matter?*

I consent to disclosure of my identity.

Yes

I do not consent to disclosure of my identity. (Even if you do not consent, OSC may disclose your identity if necessary due to an imminent danger to public health or safety or imminent violation of any criminal law. See 5 U.S.C. § 1213(h).)

No

CERTIFICATION

I certify that all of the statements made in this complaint are true, complete, and correct to the best of my knowledge and belief. I understand that a false statement or concealment of a material fact is a criminal offense punishable by a fine, imprisonment, or both. 18 U.S.C. § 1001.*

Yes

BURDEN: The burden for this collection of information (including the time for reviewing instructions, searching existing data sources, gathering the data needed, and completing and reviewing the form) is estimated to be an average of one hour to submit a disclosure of information alleging agency wrongdoing, one hour and fifteen minutes to submit a complaint alleging a prohibited personnel practice or other prohibited activity, or 30



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minutes to submit a complaint alleging prohibited political activity. Please send any comments about this burden estimate, and suggestions for reducing the burden, to the U.S. Office of Special Counsel, General Counsel's Office, 1730 M Street, NW, Suite 218, Washington, DC 20036-4505.

This Disclosure of Information was Received by OSC on: 12/2/2024

PLEASE KEEP A COPY OF YOUR COMPLAINT, ANY SUPPORTING DOCUMENTATION, AND ANY ADDITIONAL ALLEGATIONS THAT YOU SEND TO OSC NOW OR AT ANY TIME WHILE YOUR COMPLAINT IS PENDING. REPRODUCTION CHARGES UNDER THE FREEDOM OF INFORMATION ACT MAY APPLY TO ANY REQUEST YOU MAKE FOR COPIES OF MATERIALS THAT YOU PROVIDED TO OSC.



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IMPORTANT INFORMATION ABOUT FILING A DISCLOSURE

OSC WHISTLEBLOWER DISCLOSURE CHANNEL

Under 5 U.S.C. § 1213 and related provisions, the Office of Special Counsel (OSC) serves as a secure channel for federal employees, former federal employees, and applicants for federal employment with reliable knowledge of the wrongdoing to disclose:

- a violation of law, rule or regulation;
- gross mismanagement;
- gross waste of funds;
- an abuse of authority;
- a substantial and specific danger to public health or safety; and/or
- censorship related to scientific research.

OSC JURISDICTION

OSC has no jurisdiction over disclosures filed by:

- employees of the U.S. Postal Service and the Postal Regulatory Commission;
- members of the armed forces of the United States (*i.e.*, non-civilian military employees);
- state employees operating under federal grants;
- employees of federal contractors;
- other employees or federal agencies that are exempt under federal law; and
- Congressional or judicial branch employees.

ANONYMOUS SOURCES

While OSC will protect the identity of persons who make disclosures, it will not consider anonymous disclosures. If a disclosure is filed by an anonymous source, the disclosure will be referred to the Office of Inspector General in the appropriate agency. OSC will take no further action.

RETALIATION

Do you believe you suffered retaliation by your agency for disclosing wrongdoing? If yes, you may file a complaint of retaliation by navigating back to "My Cases" and selecting "New Complaint." Select Option 1 to complete and submit a Complaint of Prohibited Personnel Practice or other Prohibited Activity (PPPs). *If you have already completed the Complaint of Prohibited Personnel Practice or other Prohibited Activity above, please continue with this Disclosure.* PPPs are employment-related activities that are banned in the federal workforce.



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PPPs generally involve some type of personnel decision or action and may result in personal relief for people who have been subject to a PPP. For example, if we find that you were removed from federal service in retaliation for whistleblowing, OSC may act to get your job back. PPPs can also include allegations of harassment, failure to issue appraisals, and improper hiring. Do not file a disclosure to report retaliation or other PPPs.

CONTACT INFORMATION

Title:

First Name:* David

Middle Initial:

Last Name:* Medeiros

International Address?: No

Address:*

215 Mountain St
Willimantic, CT 06226

Cell Phone Number:

Home Phone Number:

Office Phone Number:

Ext.

Email Address:* aabiwr@live.com

Preferred means of contact:

Email: Yes

Cell phone: No

Home phone: No

Office phone: No

REPRESENTATIVE INFORMATION

Do you have representation? No

Information about representative, if applicable.

First Name:*

Middle Initial:

Last Name:*

International Address?:

Address: *



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Office Phone Number:

Ext.

Cell Phone Number:

Home Phone Number:

Email Address:

EMPLOYMENT INFORMATION

Name of Department/Agency about which you are making a disclosure.

Department:* Justice

Agency:* Office Of The Inspector General

Agency subcomponent: Connecticut Attorney General's Office

Street Address: 165 Capitol Avenue

City: Hartford

State: CT

Zip Code: 06106

Employment Status:* Non-Federal Employee (please specify)

Title	Series	Grade

Please provide your dates of employment in this position.

Employment Service Type	Employment Service Subtype	If Other (specify)
Excepted Service	Other	Private Citizen, Advocate, and Whistleblower
Other	Other	Private Citizen, Advocate, and Whistleblower

Are you covered by a collective bargaining agreement?

DETAILS OF YOUR DISCLOSURES



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Please identify the type of wrongdoing that you are alleging. You can make multiple disclosures, but you **MUST** choose one option. If you check "violation of law, rule, or regulation," specify, if you can, the particular law, rule or regulation violated (by name, subject, and/or legal citation). For each allegation, please answer the following questions (be as specific as possible). Please keep in mind that you will have an opportunity to provide more information and someone from OSC will contact you.

If OSC determines there is a substantial likelihood of wrongdoing, OSC will refer your disclosures to the involved agency for an investigation and report. To meet the substantial likelihood standard, there must be a significant probability that the information reveals wrongdoing that falls within one or more of the categories above. In its evaluation, OSC considers the strength, reliability, and credibility of the disclosures. If the substantial likelihood determination cannot be made, OSC will determine whether there is sufficient information to exercise its discretion to refer the allegations.

DISCLOSURES

Allegation	Gross Mismanagement
What action did they take?	Key Individuals and Their Roles in Violations Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS) Responsibilities: Oversee DSS operations, including Medicaid programs such as the Acquired Brain Injury (ABI) Waiver Program, and ensure compliance with FOIA and ADA requirements. Violations: DSS failed to respond to FOIA requests submitted on October 25, 2024, and follow-ups on October 31, November 2, and December 2, violating statutory deadlines under 5 U.S.C. § 552 and Conn. Gen. Stat. § 1-210. Ignored explicit requests for ADA accommodations, including simplified communication formats, violating 42 U.S.C. § 12131 (ADA Title II). Excluded me from accessing critical Medicaid program information, violating Fifth Amendment due process and Fourteenth Amendment equal protection rights. Attorney General William Tong Title: Connecticut Attorney General Responsibilities: Ensure legal compliance across state agencies, uphold transparency laws, and enforce



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	accountability mechanisms. Violations: As head of the Attorney General's Office, William Tong is responsible for the refusal to acknowledge or process FOIA requests. This constitutes a violation of First Amendment rights to petition the government and Fifth Amendment due process protections. Enabled systemic obstruction of transparency, potentially covering mismanagement of federally funded Medicaid programs, violating federal Medicaid regulations (42 U.S.C. § 1396a). Barbara Manning Title: CMS Regional Administrator (Region 1) Responsibilities: Oversee CMS operations in Connecticut and ensure state compliance with federal Medicaid regulations. Violations: Failed to enforce federal oversight of the Medicaid ABI Waiver Program, despite systemic non-compliance with transparency and accountability mandates. By neglecting to investigate Connecticut's violations, CMS contributed to potential misuse of federal Medicaid funds. Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS) Responsibilities: Oversee national Medicaid programs and ensure state compliance with federal funding conditions. Violations: Failed to address systemic issues in Connecticut's Medicaid ABI Waiver Program, despite federal obligations under 42 U.S.C. § 1396a. Oversight failures under her leadership have enabled potential fraud, waste, and abuse of taxpayer funds. Eileen Meskill Title: Deputy Attorney General, Connecticut Office of the Attorney General Responsibilities: Manage FOIA compliance and oversee ADA-related legal matters. Violations: Operationally responsible for ensuring FOIA compliance; her failure to act perpetuated violations of 5 U.S.C. § 552. Enabled systemic denial of ADA accommodations, contributing to discrimination under 42 U.S.C. § 12131. Governor Ned Lamont Title: Governor of Connecticut Responsibilities: Ensure state agencies comply with federal and state laws, including FOIA and ADA, and oversee the performance of agency leadership. Vi



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When did this occur?	When Did This Occur? The violations began with my initial FOIA request, submitted on October 25, 2024, to the Connecticut Attorney General's Office, and are ongoing. Despite explicit statutory obligations under 5 U.S.C. § 552 (FOIA) and Conn. Gen. Stat. § 1-210, no acknowledgment or response has been provided, constituting both procedural and constitutional violations. Key Dates and Events October 25, 2024: Submitted a FOIA request to the Connecticut Attorney General's Office seeking records related to the Medicaid Acquired Brain Injury (ABI) Waiver Program. The request included specific ADA accommodation requests, such as simplified communication formats and accessible records, due to my traumatic brain injury (TBI). October 31, 2024: Sent the first follow-up communication to request acknowledgment of my FOIA submission and an estimated timeline for compliance. No response was received, violating the four-business-day acknowledgment requirement under Connecticut FOIA law (Conn. Gen
How did you discover this action?	How Did You Discover This Action? I discovered the violations through my direct involvement as a whistleblower and advocate for transparency and accountability within Connecticut's Medicaid Acquired Brain Injury (ABI) Waiver Program. My discovery occurred as follows: FOIA Request Submission and Lack of Response: On October 25, 2024, I submitted a FOIA request to the Connecticut Attorney General's Office seeking records related to the Medicaid ABI Waiver Program. When no acknowledgment or response was received, I initiated follow-ups on October 31, 2024, November 2, 2024, and December 2, 2024, all of which were ignored. The failure to respond within the statutory timeframe alerted me to systemic non-compliance with 5 U.S.C. § 552 (FOIA) and Conn. Gen. Stat. § 1-210. ADA Accommodation Requests Ignored: I included explicit requests for reasonable ADA accommodations to address my cognitive challenges as a traumatic brain injury (TBI) survivor, such as simplified communication formats and



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	accessible records. The failure to acknowledge or fulfill these accommodations violated the Americans with Disabilities Act (ADA) and highlighted a pattern of exclusion and discrimination. Ongoing Exclusion from Public Processes: I was excluded from public forums and discussions related to Medicaid oversight, despite being a stakeholder directly impacted by these programs. This exclusion, combined with procedural barriers such as non-responsiveness, demonstrated a deliberate effort to suppress whistleblower advocacy and prevent accountability. Research into Oversight Failures: In investigating the lack of response, I discovered broader systemic issues within the Connecticut Attorney General's Office, the Department of Social Services (DSS), and the Commission on Human Rights and Opportunities (CHRO), including failures to uphold transparency laws, ADA requirements, and federal Medicaid regulations. Corroborating Evidence: The lack of records, unexplained delays, and continued procedural barriers confirm systemic failures in transparency, ADA compliance, and oversight, prompting me to escalate the matter to federal authorities.
What additional facts support your allegation?	Additional Facts Supporting My Allegation The following facts and evidence substantiate my claims of systemic violations, including FOIA non-compliance, ADA discrimination, and gross mismanagement of federally funded Medicaid programs: 1. FOIA Non-Compliance Specific Requests Ignored: I submitted a FOIA request on October 25, 2024, seeking transparency in the Medicaid Acquired Brain Injury (ABI) Waiver Program. Follow-ups on October 31, November 2, and December 2, 2024, were ignored, violating statutory deadlines under 5 U.S.C. § 552(a)(6) and Conn. Gen. Stat. § 1-210. Despite clear statutory requirements for acknowledgment and prompt responses, neither the Connecticut Attorney General's Office nor DSS provided any communication or documentation. Pattern of Obstruction: The lack of acknowledgment and response demonstrates not only procedural failures but a systemic effort to obstruct



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	public access to federally funded program information, raising concerns of fraud or mismanagement. 2. ADA Violations Failure to Provide Reasonable Accommodations: I explicitly requested reasonable ADA accommodations due to my traumatic brain injury (TBI), including simplified communication formats and accessible records. These requests were ignored, violating Title II of the ADA (42 U.S.C. § 12131) and its implementing regulations (28 C.F.R. § 35.130, § 35.160). Exclusion from Public Processes: I was systematically excluded from public forums and discussions related to Medicaid oversight, preventing me from participating meaningfully in decisions that directly impact my well-being and advocacy efforts. This exclusion constitutes discrimination under the Fourteenth Amendment Equal Protection Clause and ADA mandates. 3. Retaliation Against Whistleblower Advocacy Procedural Barriers: The lack of response to my FOIA and ADA requests, coupled with my exclusion from Medicaid oversight processes, is indicative of retaliation aimed at suppressing my advocacy and whistleblower efforts. Public ridicule and procedural barriers imposed by DSS and CHRO further demonstrate a systemic effort to undermine my ability to hold agencies accountable. 4. Gross Mismanagement of Federal Medicaid Funds Lack of Transparency in ABI Waiver Program: Refusal to provide records raises concerns about mismanagement, waste, or fraud in the administration of the Medicaid ABI Waiver Program. These failures jeopardize federal compliance with Medicaid regulations (42 U.S.C. § 1396a) and undermine the integrity of taxpayer-funded programs. No Accountability Measures: DSS has not conducted or disclosed audits, enforcement actions, or disciplinary measures against providers in the ABI Waiver Program, further suggesting systemic neglect. 5. Documentary Evidence FOIA Submission Records: Copies of my FOIA request (submitted October 25, 2024) and follow-ups (October 31, November 2, and December 2, 2024)



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	provide evidence of my efforts to seek transparency. These records show clear violations of statutory
Allegation	Violation of Law, Rule or Regulation
What action did they take?	2. What Action Did They Take? Here is a detailed breakdown of the actions (or inactions) taken by each individual listed, highlighting their role in the violations: 1. Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS) Position in Chain of Command: Head of DSS Actions Taken: Ignored FOIA requests submitted on October 25, 2024, and subsequent follow-ups on October 31, November 2, and December 2, 2024, violating statutory obligations under 5 U.S.C. § 552 and Conn. Gen. Stat. § 1-210. Failed to ensure ADA compliance by denying reasonable accommodations, such as simplified communication formats and accessible records, in violation of Title II of the ADA (42 U.S.C. § 12131). Excluded me from public forums related to Medicaid oversight, violating my constitutional Fourteenth Amendment right to equal protection. 2. Attorney General William Tong Title: Connecticut Attorney General Position in Chain of Command: Head of the Connecticut Office of the Attorney General Actions Taken: Failed to enforce FOIA compliance within his office, allowing requests to go unanswered, violating the First Amendment right to petition and Fifth Amendment due process rights. Oversaw systemic non-compliance with transparency laws, withholding critical records about the Medicaid ABI Waiver Program. Enabled a culture of non-responsiveness and procedural barriers, obstructing my advocacy as a whistleblower. 3. Barbara Manning Title: CMS Regional Administrator (Region 1) Position in Chain of Command: Oversees CMS operations in Connecticut and neighboring states Actions Taken: Failed to enforce oversight of Connecticut's Medicaid ABI Waiver Program, despite federal obligations under 42 U.S.C. § 1396a. Neglected to investigate systemic violations of Medicaid compliance, allowing potential misuse of federal funds. 4. Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services



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	(CMS) Position in Chain of Command: National head of CMS Actions Taken: Failed to address systemic Medicaid mismanagement in Connecticut, allowing violations to persist without accountability. Did not ensure state compliance with federal transparency and oversight requirements, undermining public trust in Medicaid programs. 5. Eileen Meskill Title: Deputy Attorney General Position in Chain of Command: Second-in-command to Attorney General William Tong Actions Taken: Failed to operationalize FOIA compliance or ensure ADA accommodations were provided under the Attorney General's Office. Allowed systemic delays and non-responsiveness, contributing to ongoing violations of transparency and accessibility laws. 6. Governor Ned Lamont Title: Governor of Connecticut Position in Chain of Command: Chief Executive of the State of Connecticut Actions Taken: Failed to intervene or hold DSS, CHRO, and the Attorney General's Office accountable for systemic violations. Allowed continued non-compliance with federal and state laws, including FOIA, ADA, and constitut
When did this occur?	When Did This Occur? The violations began with my initial FOIA request on October 25, 2024, and remain ongoing. Below is a detailed timeline of events tied directly to statutory and constitutional violations, demonstrating a systemic and deliberate pattern of non-compliance. Timeline of Events October 25, 2024: I submitted a FOIA request to the Connecticut Attorney General's Office requesting records related to the Medicaid Acquired Brain Injury (ABI) Waiver Program. This request explicitly included ADA accommodation requests, such as simplified communication formats and accessible records, due to my traumatic brain injury (TBI). Violations: The Attorney General's Office failed to acknowledge the FOIA request within the statutory four-business-day deadline required under Conn. Gen. Stat. § 1-210. Ignoring ADA accommodations violates Title II of the ADA (42 U.S.C. § 12131) and associated regulations



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	(28 C.F.R. § 35.130, § 35.160). October 31, 2024: I submitted a follow-up communicati
How did you discover this action?	How Did You Discover This Action? I discovered the violations through my direct engagement as a whistleblower and advocate for transparency, accountability, and accessibility within Connecticut's Medicaid Acquired Brain Injury (ABI) Waiver Program. My discovery unfolded as follows: Submission of FOIA Requests: On October 25, 2024, I submitted a Freedom of Information Act (FOIA) request to the Connecticut Attorney General's Office seeking transparency into the Medicaid ABI Waiver Program. When the statutory deadlines for acknowledgment and response passed without action, I initiated follow-up communications on October 31, November 2, and December 2, 2024. These requests were ignored, indicating potential non-compliance with 5 U.S.C. § 552 and Conn. Gen. Stat. § 1-210. Denial of ADA Accommodations: Along with my FOIA request, I explicitly requested reasonable accommodations under the Americans with Disabilities Act (ADA) due to my traumatic brain injury (TBI). These accommodations included simplified communication formats and accessible records. The failure to acknowledge or fulfill these accommodation requests alerted me to systemic non-compliance with Title II of the ADA (42 U.S.C. § 12131) and its implementing regulations (28 C.F.R. § 35.130, § 35.160). Repeated Exclusion from Public Processes: My exclusion from public forums and discussions related to Medicaid oversight, despite being directly affected by the Medicaid ABI Waiver Program, further demonstrated systemic discrimination and suppression of my advocacy efforts. These barriers highlighted ongoing violations of my First Amendment right to petition the government, Fifth Amendment due process rights, and Fourteenth Amendment equal protection rights. Research into Broader Failures: As I investigated the lack of response to my FOIA requests and ADA accommodations, I identified broader systemic issues within the Connecticut Attorney General's Office,



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	the Department of Social Services (DSS), and the Commission on Human Rights and Opportunities (CHRO). This included evidence of widespread non-compliance with transparency laws, ADA requirements, and federal Medicaid regulations (42 U.S.C. § 1396a). Corroborating Evidence from Procedural Barriers: The continued lack of transparency, repeated procedural barriers, and exclusionary practices pointed to systemic mismanagement and potential misuse of taxpayer funds. These failures were compounded by the refusal to disclose records critical to Medicaid oversight. Conclusion I discovered these actions through direct engagement as a whistleblower and advocate, uncovering systemic non-compliance with FOIA, ADA, and Medicaid regulations. My efforts to seek transparency and accountability revealed deliberate obstruction, exclusionary practices, and potential fraud or waste of federally allocated Medicaid funds.
What additional facts support your allegation?	What Additional Facts Support Your Allegation? The following facts substantiate my allegations of systemic violations of FOIA, ADA, constitutional rights, Medicaid oversight requirements, and taxpayer protections: 1. FOIA Violations Unanswered Requests: I submitted a FOIA request on October 25, 2024, to the Connecticut Attorney General's Office, followed by additional communications on October 31, November 2, and December 2, 2024. None of these were acknowledged or processed, violating statutory deadlines under 5 U.S.C. § 552(a)(6) and Conn. Gen. Stat. § 1-210. The complete lack of response demonstrates systemic non-compliance and obstruction of transparency. Deliberate Obstruction: The agencies' inaction suggests intentional efforts to suppress information related to the Medicaid ABI Waiver Program, hindering public oversight of federally funded programs. 2. ADA Violations Ignored Accommodation Requests: Along with my FOIA request, I explicitly requested reasonable accommodations under Title II of the ADA (42 U.S.C. § 12131) due to my traumatic brain injury (TBI). These included simplified communication



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	formats and accessible records. The agencies failed to provide accommodations, violating 28 C.F.R. § 35.130 and § 35.160, which require public entities to ensure effective communication and prohibit discrimination based on disability. Exclusion from Public Processes: I was systematically excluded from public forums and discussions related to Medicaid oversight, further marginalizing my voice as a whistleblower and disability advocate. This exclusion violates the Fourteenth Amendment's Equal Protection Clause and ADA protections. 3. Whistleblower Retaliation Procedural Barriers: After raising concerns about systemic failures in Medicaid oversight, I encountered procedural barriers, including delayed responses, public ridicule, and outright exclusion. These actions constitute retaliation, violating federal whistleblower protections aimed at safeguarding individuals who expose fraud, waste, or abuse in federally funded programs. 4. Gross Mismanagement of Federal Medicaid Funds Lack of Transparency: Refusal to disclose records related to the Medicaid ABI Waiver Program raises concerns of fraud, waste, and abuse of taxpayer dollars. Transparency in Medicaid program administration is mandated under 42 U.S.C. § 1396a(a)(30)(A), and failure to provide oversight jeopardizes compliance with federal funding requirements. Absence of Accountability Measures: Despite my FOIA requests, no records of audits, enforcement actions, or disciplinary measures against providers in the ABI Waiver Program have been disclosed. This lack of accountability endangers the program's integrity and the vulnerable populations it serves. 5. Documentary Evidence FOIA Submission Records: Copies of my FOIA request (October 25, 2024) and follow-ups (October 31, November 2, and December 2, 2024) provide a clear timeline of agency non-compliance. These records show repeated viol
Allegation	Abuse of Authority
What action did they take?	2. What Action Did They Take? Here's a detailed, bulletproof breakdown of the actions (or inactions) taken by each key individual that resulted in violations of FOIA,



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	ADA, constitutional rights, and federal Medicaid regulations. This response ensures clarity, legal precision, and actionable details. 1. Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS) Position in Chain of Command: Head of DSS Actions Taken: Ignored FOIA requests submitted on October 25, 2024, and follow-ups on October 31, November 2, and December 2, 2024, violating 5 U.S.C. § 552 and Conn. Gen. Stat. § 1-210. Denied ADA accommodation requests for simplified communication formats and accessible records, violating Title II of the ADA (42 U.S.C. § 12131) and associated regulations (28 C.F.R. § 35.130, § 35.160). Allowed systemic exclusion of individuals with disabilities from public processes, violating the Fourteenth Amendment's Equal Protection Clause. Failed to conduct or disclose audits and accountability measures for Medicaid ABI Waiver Program providers, raising concerns of fraud, waste, and abuse of taxpayer-funded Medicaid programs, violating 42 U.S.C. § 1396a. 2. Attorney General William Tong Title: Connecticut Attorney General Position in Chain of Command: Head of the Connecticut Office of the Attorney General Actions Taken: Refused to acknowledge or process FOIA requests submitted to his office, suppressing transparency and violating the First Amendment's right to petition and Fifth Amendment due process rights. Failed to enforce FOIA compliance and transparency across Connecticut agencies, perpetuating systemic violations of 5 U.S.C. § 552. Neglected to address ADA accommodation failures within his office, enabling discriminatory practices, violating Title II of the ADA. Suppressed whistleblower advocacy by allowing procedural barriers and delays, undermining federal whistleblower protections. 3. Barbara Manning Title: CMS Regional Administrator (Region 1) Position in Chain of Command: Oversees CMS operations in Connecticut and neighboring states Actions Taken: Failed to enforce oversight of Connecticut's Medicaid ABI Waiver Program, despite clear indications of systemic non-compliance,



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	violating 42 U.S.C. § 1396a. Neglected federal responsibilities to investigate and address mismanagement in Medicaid programs, enabling potential fraud, waste, and abuse of taxpayer funds. 4. Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS) Position in Chain of Command: National Administrator of CMS Actions Taken: Allowed systemic issues in Connecticut's Medicaid ABI Waiver Program to persist, failing to enforce federal oversight responsibilities under 42 U.S.C. § 1396a. Neglected to ensure state compliance with transparency, accountability, and effective program administration, jeopardizing public trust and Medicaid beneficiaries. 5. Eileen Meskill Title: Deputy Attorney General Position in Chain of Command
When did this occur?	Timeline of Events October 25, 2024: I submitted a FOIA request to the Connecticut Attorney General's Office, requesting records related to the Medicaid Acquired Brain Injury (ABI) Waiver Program. This request explicitly included ADA accommodation requests for simplified communication formats and accessible records due to my traumatic brain injury (TBI). The Attorney General's Office and DSS failed to acknowledge the request within the statutory four-business-day deadline required under Conn. Gen. Stat. § 1-210, initiating the violation. October 31, 2024: I sent the first follow-up communication to both the Attorney General's Office and DSS, requesting acknowledgment of my FOIA request and compliance with ADA requirements. Both agencies failed to respond, violating statutory FOIA deadlines under 5 U.S.C. § 552 and state law. November 2, 2024: A second follow-up was submitted, emphasizing the urgency of my request for transparency and the legal obligation to accommodate my disability
How did you discover this action?	4. How Did You Discover This Action? I discovered the violations through my direct engagement as a whistleblower and advocate for transparency and accountability in Connecticut's Medicaid Acquired Brain Injury (ABI) Waiver Program. Below is a detailed



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	explanation of how I identified the systemic failures: 1. Submission of FOIA Requests Date: October 25, 2024 I submitted a FOIA request to the Connecticut Attorney General's Office, seeking records related to the Medicaid ABI Waiver Program to evaluate the program's oversight and compliance with federal regulations. Despite statutory deadlines requiring acknowledgment within four business days (Conn. Gen. Stat. § 1-210) and response within 20 business days (5 U.S.C. § 552(a)(6)(A)), no response or acknowledgment was received. 2. Repeated Follow-Ups and Continued Non-Response Dates: October 31, November 2, and December 2, 2024 I sent follow-up communications to the Attorney General's Office and the Connecticut Department of Social Services (DSS), highlighting the lack of acknowledgment and requesting updates. Each follow-up was ignored, which revealed systemic procedural failures and deliberate non-compliance with transparency obligations. 3. Denial of ADA Accommodations Along with my FOIA requests, I explicitly requested reasonable ADA accommodations due to my traumatic brain injury (TBI), including: Simplified communication formats. Accessible records compatible with assistive technologies. The agencies' failure to acknowledge or address these requests revealed violations of Title II of the ADA (42 U.S.C. § 12131) and 28 C.F.R. § 35.130 and § 35.160, further excluding me from public processes. 4. Exclusion from Public Processes My exclusion from public forums and discussions related to Medicaid program oversight—despite being a direct stakeholder—underscored systemic barriers and discriminatory practices. This exclusion revealed constitutional violations, including: First Amendment (right to petition): Suppression of my advocacy efforts. Fifth Amendment (due process): Denial of access to legally mandated processes and information. Fourteenth Amendment (equal protection): Discrimination based on my disability, preventing equitable participation. 5. Broader Investigation and Analysis As I analyzed the lack of response, I uncovered



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	broader systemic issues, including: Lack of Transparency: No publicly available records or disclosures related to Medicaid ABI Waiver Program audits, provider complaints, or enforcement actions. Potential Mismanagement: The absence of accountability measures raised concerns about fraud, waste, and abuse of taxpayer-funded Medicaid resources, violating 42 U.S.C. § 1396a. 6. Corroborating Evidence from Procedural Barriers Procedural barriers, such as non-responsiveness, exclusionary practices, and delays, confirmed deliberate obstruction and systemic failures across the Attorney General's Office, DSS, and other agencies. These actions directly impeded my ability to advocate
What additional facts support your allegation?	5. What Additional Facts Support Your Allegation? Here is a comprehensive response with specific supporting facts tied to the allegations of systemic violations of FOIA, ADA, Medicaid regulations, constitutional rights, and taxpayer protections: 1. FOIA Non-Compliance Unanswered FOIA Requests: I submitted a FOIA request on October 25, 2024, to the Connecticut Attorney General's Office, with follow-ups on October 31, November 2, and December 2, 2024. None of these communications were acknowledged or answered, violating statutory requirements under 5 U.S.C. § 552 (FOIA) and Conn. Gen. Stat. § 1-210. This deliberate inaction reflects a systemic failure to uphold transparency and accountability in Medicaid program oversight. Pattern of Obstruction: The lack of acknowledgment, communication, or documentation in response to lawful FOIA requests demonstrates intentional suppression of public information about the Medicaid ABI Waiver Program. 2. ADA Violations Ignored ADA Accommodation Requests: Along with my FOIA request, I explicitly requested ADA accommodations due to my traumatic brain injury (TBI). These included simplified communication formats and accessible records. The refusal to address these accommodation requests constitutes a violation of Title II of the ADA (42 U.S.C. § 12131) and its implementing regulations (28 C.F.R. §



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	35.130, § 35.160), further excluding me from participating in government processes. Exclusionary Practices: My exclusion from public forums and discussions related to Medicaid oversight underscores systemic discrimination and deliberate marginalization of individuals with disabilities, violating the Fourteenth Amendment Equal Protection Clause. 3. Constitutional Violations First Amendment Violations: By obstructing FOIA requests and suppressing my ability to advocate as a whistleblower, the Connecticut Attorney General's Office and DSS infringed upon my First Amendment right to petition the government for redress of grievances. Fifth Amendment Violations: The refusal to provide access to legally mandated public records and processes denied my due process rights, as guaranteed by the Fifth Amendment. Fourteenth Amendment Violations: The systemic exclusion of individuals with disabilities from public processes constitutes discrimination, violating my Fourteenth Amendment right to equal protection under the law. 4. Whistleblower Retaliation Suppression of Advocacy: Procedural barriers, non-responsiveness, and public exclusion demonstrate retaliation against my efforts to expose systemic failures in Medicaid oversight. These actions violate federal whistleblower protection laws designed to protect individuals advocating for transparency and accountability in federally funded programs. 5. Medicaid Oversight Failures Lack of Transparency: No publicly available records or audits exist detailing the Medicaid ABI Waiver Program's administration, provider oversight, or enforcement actions. This absence of accountability rai
Allegation	Gross Waste of Funds
What action did they take?	Gross Waste of Funds Allegation This allegation focuses on the mismanagement or misallocation of federal Medicaid funds, emphasizing systemic failures to ensure transparency and accountability. Below is the breakdown of how each individual's role and actions (or inactions) contributed to this gross waste of taxpayer dollars: 1. Andrea Barton Reeves Title: Commissioner, Connecticut



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	Department of Social Services (DSS) Role: Oversees DSS operations, including Medicaid programs such as the ABI Waiver Program. Actions Contributing to Gross Waste of Funds: Failed to provide transparency into Medicaid ABI Waiver Program administration, violating 42 U.S.C. § 1396a. Neglected to ensure oversight of providers, including audits, accountability measures, and responses to complaints, increasing the risk of fraud, waste, and abuse. Refused to disclose requested records through FOIA, preventing public accountability for the program's expenditures and operations. Enabled systemic inefficiency by ignoring ADA accommodation requests, creating barriers to stakeholder advocacy and oversight. 2. Attorney General William Tong Title: Connecticut Attorney General Role: Responsible for ensuring legal compliance and transparency across state agencies, including Medicaid program operations. Actions Contributing to Gross Waste of Funds: Oversaw the obstruction of FOIA requests, suppressing public access to information necessary for holding DSS and Medicaid programs accountable. Failed to enforce transparency and accountability laws, enabling potential misuse of Medicaid funds allocated to the ABI Waiver Program. Allowed systemic non-compliance, risking financial mismanagement of taxpayer-funded programs. 3. Barbara Manning Title: CMS Regional Administrator (Region 1) Role: Oversees CMS operations in Connecticut and neighboring states, ensuring compliance with federal Medicaid regulations. Actions Contributing to Gross Waste of Funds: Failed to investigate systemic failures in Connecticut's Medicaid ABI Waiver Program, despite ongoing non-compliance and lack of transparency. Neglected oversight responsibilities, allowing the potential misallocation of federally allocated Medicaid funds. 4. Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS) Role: National Administrator of Medicaid programs. Actions Contributing to Gross Waste of Funds: Allowed systemic issues in Medicaid program oversight in Connecticut to



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	persist without intervention. Failed to ensure Connecticut adhered to federal Medicaid regulations, enabling potential misuse or mismanagement of funds. 5. Eileen Meskill Title: Deputy Attorney General Role: Second-in-command to the Connecticut Attorney General, responsible for operational oversight of transparency laws. Actions Contributing to Gross Waste of Funds: Failed to enforce FOIA compliance within the Attorney General's Office, contributing to a lack of transparency in Medicaid program expenditures. Enabled procedural barriers
When did this occur?	3. When Did This Occur? The violations began on October 25, 2024, with the submission of my initial FOIA request to the Connecticut Attorney General's Office and continue to this day. Below is a detailed timeline of key events: Timeline of Events October 25, 2024: I submitted a FOIA request to the Connecticut Attorney General's Office, requesting records related to the Medicaid Acquired Brain Injury (ABI) Waiver Program. This request explicitly included ADA accommodation requests for simplified communication formats and accessible records due to my traumatic brain injury (TBI). The Attorney General's Office and the Department of Social Services (DSS) failed to acknowledge the request within the statutory four-business-day deadline required under Conn. Gen. Stat. § 1-210, initiating the first violation. October 31, 2024: I sent the first follow-up communication to the Attorney General's Office and DSS, requesting acknowledgment of my FOIA request and compliance with ADA requirements. N
How did you discover this action?	4. How Did You Discover This Action? I discovered these violations through direct engagement with the Freedom of Information Act (FOIA) process, my role as a whistleblower advocating for transparency in the Medicaid Acquired Brain Injury (ABI) Waiver Program, and repeated attempts to secure reasonable ADA accommodations. Below is a detailed account of how I uncovered these systemic issues: 1. Submission of FOIA Requests Date: October 25, 2024 I submitted a FOIA



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	request to the Connecticut Attorney General's Office, seeking records related to the Medicaid ABI Waiver Program. This request was intended to ensure transparency and accountability in a federally funded program. The agency's failure to meet statutory deadlines for acknowledgment and response alerted me to a potential systemic issue with transparency and FOIA compliance. 2. Follow-Up Communications Dates: October 31, November 2, and December 2, 2024 I sent follow-up communications to both the Attorney General's Office and the Department of Social Services (DSS), highlighting their failure to acknowledge or respond to my request. The consistent lack of response, combined with procedural delays, suggested deliberate non-compliance with transparency laws, violating 5 U.S.C. § 552 and Conn. Gen. Stat. § 1-210. 3. Denial of ADA Accommodations I included requests for reasonable ADA accommodations, such as simplified communication formats and accessible records, due to my traumatic brain injury (TBI). The agencies ignored these requests, which revealed systemic non-compliance with Title II of the ADA (42 U.S.C. § 12131) and its implementing regulations (28 C.F.R. § 35.130, § 35.160). The denial of accommodations further excluded me from participating in oversight processes, underscoring a pattern of discrimination and systemic barriers. 4. Exclusion from Public Processes Despite being a direct stakeholder in the Medicaid ABI Waiver Program, I was excluded from public forums and decision-making processes critical to Medicaid program oversight. This exclusion revealed violations of my: First Amendment right to petition the government. Fifth Amendment due process rights, as I was denied access to legally mandated processes. Fourteenth Amendment right to equal protection, as a person with disabilities. 5. Broader Investigations and Findings As I sought to understand the lack of response to my FOIA requests and ADA accommodations, I uncovered broader systemic issues, including: Lack of Transparency: No publicly available records on Medicaid



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	program oversight, provider accountability, or program audits. Potential Mismanagement: Absence of disclosures about enforcement actions against providers or corrective measures raises concerns about fraud, waste, and abuse of taxpayer-funded resources. 6. Corroborating Evidence FOIA Submission Records: Copies of my FOIA request and follow-up communications provide evidence of agency non-compliance. ADA Accommodation Requests: Documented requests for accommodation
What additional facts support your allegation?	5. What Additional Facts Support Your Allegation? The following facts substantiate the systemic violations of FOIA, ADA, Medicaid regulations, constitutional rights, and taxpayer protections. These facts highlight a pattern of non-compliance, gross waste of funds, and deliberate exclusion of individuals with disabilities from public processes. 1. FOIA Non-Compliance Ignored FOIA Requests: My initial FOIA request, submitted on October 25, 2024, and follow-ups on October 31, November 2, and December 2, 2024, were ignored by the Connecticut Attorney General's Office and the Department of Social Services (DSS). Both agencies violated statutory deadlines under 5 U.S.C. § 552 (FOIA) and Conn. Gen. Stat. § 1-210, failing to acknowledge or respond to legally submitted requests. Pattern of Obstruction: The refusal to disclose public records related to the Medicaid Acquired Brain Injury (ABI) Waiver Program reveals systemic suppression of transparency, violating federal and state laws designed to ensure public accountability. 2. ADA Violations Denied Accommodation Requests: Along with my FOIA request, I submitted explicit requests for reasonable accommodations due to my traumatic brain injury (TBI). These included simplified communication formats and accessible records, as mandated under Title II of the ADA (42 U.S.C. § 12131). The agencies failed to provide these accommodations, violating 28 C.F.R. § 35.130 and § 35.160, which require public entities to ensure effective communication and equitable access. Exclusionary Practices: By ignoring ADA accommodation requests,



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	DSS and the Attorney General's Office excluded me from participating in Medicaid program oversight processes. This exclusion violates the Fourteenth Amendment's Equal Protection Clause and perpetuates systemic discrimination against individuals with disabilities. 3. Constitutional Violations First Amendment (Right to Petition): FOIA non-compliance obstructed my ability to petition the government for redress of grievances, violating my constitutional right to advocate for transparency and accountability. Fifth Amendment (Due Process): The agencies' refusal to provide public records and accommodations denied me access to public processes mandated by law, violating my procedural due process rights. Fourteenth Amendment (Equal Protection): Systemic exclusion from public forums and decision-making processes due to my disability constitutes discrimination, violating my equal protection rights under the law. 4. Medicaid Oversight Failures Lack of Transparency: No publicly available records or audits exist detailing the Medicaid ABI Waiver Program's administration, provider accountability, or enforcement actions. This absence of oversight violates 42 U.S.C. § 1396a, which requires Medicaid programs to operate transparently and effectively. Potential Mismanagement: The lack of disclosure regarding complaints, violations, or corrective actions against Medicaid providers raises concerns about
Allegation	Danger to Public Health
What action did they take?	Danger to Public Health or Safety The lack of transparency, accountability, and oversight in Connecticut's Medicaid programs, specifically the Acquired Brain Injury (ABI) Waiver Program, poses a significant danger to public health and safety. Vulnerable populations, including individuals with acquired brain injuries, rely on these services for essential care, and systemic failures jeopardize their well-being. Below is a breakdown of how each individual contributed to this danger: 1. Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS) Role:



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	Oversees DSS operations, including the Medicaid ABI Waiver Program. Actions Contributing to Danger: Lack of Oversight: Failed to ensure transparency in program operations, including audits, complaints, and enforcement actions, increasing risks of substandard care. FOIA Non-Compliance: Refused to disclose information critical to evaluating the program's effectiveness and safety, violating 5 U.S.C. § 552 and Conn. Gen. Stat. § 1-210. Impact on Vulnerable Populations: Without accountability, Medicaid beneficiaries, including those with acquired brain injuries, face risks of neglect, mistreatment, or inadequate care. 2. Attorney General William Tong Title: Connecticut Attorney General Role: Responsible for ensuring legal compliance across state agencies. Actions Contributing to Danger: FOIA Obstruction: Suppressed transparency efforts by ignoring FOIA requests, obstructing access to vital Medicaid oversight information. Failure to Enforce Accountability: Did not hold DSS or other agencies accountable for systemic non-compliance, perpetuating unsafe practices in Medicaid programs. 3. Barbara Manning Title: CMS Regional Administrator (Region 1) Role: Oversees CMS operations in Connecticut and other New England states. Actions Contributing to Danger: Lack of Federal Oversight: Neglected to investigate or address systemic failures in Connecticut's Medicaid ABI Waiver Program, despite its federally funded nature. Risk to Public Health: By failing to ensure program accountability, Barbara Manning allowed unsafe conditions and risks to persist for vulnerable Medicaid populations. 4. Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS) Role: National Administrator of Medicaid programs. Actions Contributing to Danger: Failure to Intervene: Did not address ongoing issues in Connecticut's Medicaid program, allowing risks to public health and safety to escalate. Jeopardized Beneficiary Care: Lax oversight contributed to systemic failures that directly impact the quality and accessibility of care for Medicaid beneficiaries. 5. Eileen Meskill Title: Deputy



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	Attorney General Role: Second-in-command to Attorney General William Tong. Actions Contributing to Danger: Neglected Legal Oversight: Failed to enforce transparency and ADA compliance, preventing stakeholders from ensuring the safety and efficacy of Medicaid programs. 6. Governor Ned Lamont Title: Go
When did this occur?	3. When Did This Occur? The violations began on October 25, 2024, with my initial FOIA request to the Connecticut Attorney General's Office, and continue to this day. Below is a detailed timeline of events that illustrate the systemic and ongoing nature of these violations: Timeline of Events October 25, 2024: I submitted a FOIA request to the Connecticut Attorney General's Office seeking records related to the Medicaid Acquired Brain Injury (ABI) Waiver Program. This request also included ADA accommodation requests for simplified communication formats and accessible records due to my traumatic brain injury (TBI). The Attorney General's Office and the Department of Social Services (DSS) failed to acknowledge the request within the statutory four-business-day deadline required under Conn. Gen. Stat. § 1-210, initiating the first violation. October 31, 2024: I submitted a follow-up communication to both the Attorney General's Office and DSS, requesting acknowledgment of my FOIA submissi
How did you discover this action?	4. How Did You Discover This Action? I discovered these violations through direct engagement with the Freedom of Information Act (FOIA) process, my role as a whistleblower advocating for transparency in the Medicaid Acquired Brain Injury (ABI) Waiver Program, and repeated attempts to secure reasonable ADA accommodations. Below is a detailed explanation of how I uncovered these systemic failures: 1. Submission of FOIA Requests Date: October 25, 2024 I submitted a FOIA request to the Connecticut Attorney General's Office, seeking records related to the Medicaid ABI Waiver Program to evaluate its oversight and compliance with federal regulations. The agency failed to acknowledge the request within the statutory four-business-day



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	deadline under Conn. Gen. Stat. § 1-210, which was my first indication of potential systemic transparency issues. 2. Follow-Up Communications Dates: October 31, November 2, and December 2, 2024 After receiving no acknowledgment, I sent follow-up communications to both the Attorney General's Office and the Department of Social Services (DSS). The consistent lack of response and failure to meet statutory deadlines under 5 U.S.C. § 552 (FOIA) revealed procedural barriers and deliberate non-compliance with transparency laws. 3. Denial of ADA Accommodations Along with my FOIA request, I submitted explicit ADA accommodation requests due to my traumatic brain injury (TBI), including simplified communication formats and accessible records. The agencies' failure to address or fulfill these accommodations exposed systemic non-compliance with Title II of the ADA (42 U.S.C. § 12131) and 28 C.F.R. § 35.130 and § 35.160. This denial of accommodations excluded me from participating in public processes and advocacy efforts, further confirming institutional barriers and discriminatory practices. 4. Exclusion from Public Processes Despite being a direct stakeholder in the Medicaid ABI Waiver Program, I was excluded from public forums and decision-making processes critical to Medicaid oversight. This exclusion revealed violations of my: First Amendment right to petition the government for redress. Fifth Amendment due process rights, as I was denied access to legally mandated processes. Fourteenth Amendment right to equal protection, as a person with disabilities. 5. Broader Investigation and Findings As I sought to understand the lack of response and accommodations, I uncovered broader systemic issues, including: Lack of Transparency: No publicly available records on Medicaid program oversight, provider accountability, or program audits. Potential Mismanagement: The absence of disclosures about enforcement actions against providers or corrective measures raised concerns about fraud, waste, and abuse of taxpayer-funded resources. 6. Corroborating Evidence



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	FOIA Submission Records: Copies of my FOIA request and follow-up communications provide evidence of non-compliance. ADA Accommodation Requests: Documented requests for accommodations highligh
What additional facts support your allegation?	5. What Additional Facts Support Your Allegation? The following facts substantiate my allegations of systemic violations of FOIA, ADA, Medicaid oversight regulations, constitutional rights, and taxpayer protections. These facts illustrate a pattern of non-compliance, mismanagement, and deliberate exclusion of individuals with disabilities from public processes. 1. FOIA Non-Compliance Ignored FOIA Requests: My FOIA request, submitted on October 25, 2024, and follow-ups on October 31, November 2, and December 2, 2024, were ignored by the Connecticut Attorney General's Office and the Department of Social Services (DSS). Both agencies failed to meet statutory deadlines under 5 U.S.C. § 552 (FOIA) and Conn. Gen. Stat. § 1-210, reflecting a deliberate pattern of suppression of public information. Systemic Suppression of Transparency: The lack of acknowledgment or response to lawful FOIA requests demonstrates systemic efforts to obstruct access to critical records regarding the Medicaid Acquired Brain Injury (ABI) Waiver Program. 2. ADA Violations Ignored ADA Accommodation Requests: Along with my FOIA request, I submitted explicit ADA accommodation requests due to my traumatic brain injury (TBI). These included simplified communication formats and accessible records. The agencies failed to acknowledge or fulfill these requests, violating Title II of the ADA (42 U.S.C. § 12131) and associated regulations (28 C.F.R. § 35.130 and § 35.160). Exclusionary Practices: By denying ADA accommodations, the agencies excluded me from participating in oversight processes related to Medicaid programs. This constitutes discrimination and violates the Fourteenth Amendment Equal Protection Clause. 3. Constitutional Violations First Amendment (Right to Petition): FOIA non-compliance obstructed my ability to petition the government for redress of grievances,



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	violating my constitutional right to advocate for transparency and accountability. Fifth Amendment (Due Process): The agencies' refusal to provide access to public records and ADA accommodations denied me access to processes required by law, violating my procedural due process rights. Fourteenth Amendment (Equal Protection): Systemic exclusion from public forums and decision-making processes constitutes discrimination, violating my right to equal protection as an individual with disabilities. 4. Medicaid Oversight Failures Lack of Transparency in Program Operations: No publicly available records or audits exist detailing the Medicaid ABI Waiver Program's administration, provider accountability, or enforcement actions. This lack of oversight violates federal Medicaid regulations under 42 U.S.C. § 1396a, which require states to operate Medicaid programs transparently and efficiently. Potential Mismanagement: The absence of records about complaints, provider violations, or corrective actions raises concerns about fraud, waste, and abuse of taxpayer-funded Medicaid resources. 5. Whistleblower Retaliation Suppress
Allegation	Danger to Public Safety
What action did they take?	Constitutional Rights Violations Contributing to Danger to Public Safety The systemic failures in transparency, ADA compliance, and oversight within Connecticut's Medicaid programs, particularly the ABI Waiver Program, violate multiple constitutional rights and significantly endanger public safety. Below are the specific constitutional violations linked to key individuals' actions or inactions. 1. First Amendment Violations Right to Petition the Government: What Happened: FOIA non-compliance obstructed my right to petition the government for redress of grievances. The Attorney General's Office and DSS suppressed my advocacy efforts by ignoring lawful FOIA requests, preventing me from addressing systemic Medicaid oversight failures. Constitutional Violation: Suppressing my ability to request information and advocate for transparency



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	violates the First Amendment. 2. Fifth Amendment Violations Right to Due Process: What Happened: Denied access to public records mandated by FOIA and state law. Ignored ADA accommodations, effectively excluding me from participating in Medicaid-related public processes. Procedural barriers and non-responsiveness blocked my access to legal remedies. Constitutional Violation: These actions violate the Fifth Amendment, which guarantees procedural due process rights when engaging with government processes. 3. Fourteenth Amendment Violations Equal Protection Under the Law: What Happened: Denial of ADA accommodations excluded me, as a person with a disability, from critical forums and decision-making processes concerning Medicaid oversight. Systemic neglect disproportionately impacts individuals with acquired brain injuries and disabilities, creating unequal access to public services. Constitutional Violation: This exclusion constitutes discrimination, violating the Fourteenth Amendment's Equal Protection Clause. Due Process (State-Level Applications): What Happened: Lack of transparency and accountability in Medicaid programs directly affects beneficiaries' ability to access safe, effective care. DSS and the Attorney General's Office ignored FOIA requests and procedural requirements, bypassing due process obligations. Constitutional Violation: These actions also violate the Fourteenth Amendment's Due Process Clause, which requires fairness in government actions impacting individuals' rights. Specific Violations Linked to Danger to Public Safety Denial of Transparency (First and Fifth Amendments): FOIA violations obstruct public accountability, preventing timely identification of safety risks in Medicaid programs, which jeopardizes beneficiaries' lives and well-being. Exclusion of Stakeholders (Fourteenth Amendment): The exclusion of individuals with disabilities from public processes weakens program accountability and oversight, increasing risks of harm to vulnerable populations. Suppression of Advocacy (First Amendment): Retaliatory



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	procedural barriers discourage whistleblower advocacy, allowing dangerous conditions
When did this occur?	3. When Did This Occur? The violations began on October 25, 2024, with the submission of my initial FOIA request to the Connecticut Attorney General's Office, and continue to this day. Below is a detailed timeline of events, demonstrating systemic and ongoing failures. Timeline of Events October 25, 2024: I submitted a FOIA request to the Connecticut Attorney General's Office, seeking records related to the Medicaid Acquired Brain Injury (ABI) Waiver Program. This request explicitly included ADA accommodation requests for simplified communication formats and accessible records, as required under Title II of the ADA (42 U.S.C. § 12131). The Attorney General's Office and the Department of Social Services (DSS) failed to acknowledge this request within the statutory four-business-day deadline required under Conn. Gen. Stat. § 1-210, initiating the first violation. October 31, 2024: I sent a follow-up communication to the Attorney General's Office and DSS, requesting acknowledgment of my
How did you discover this action?	4. How Did You Discover This Action? I discovered these violations through direct engagement with the Freedom of Information Act (FOIA) process, my role as a whistleblower advocating for transparency in the Medicaid Acquired Brain Injury (ABI) Waiver Program, and repeated attempts to secure reasonable ADA accommodations. Below is a detailed explanation of how I uncovered these systemic failures: 1. Submission of FOIA Requests Date: October 25, 2024 I submitted a FOIA request to the Connecticut Attorney General's Office, seeking records related to the Medicaid ABI Waiver Program to evaluate its oversight, compliance with federal Medicaid regulations, and effectiveness in serving vulnerable populations. The lack of acknowledgment or response to this request, required under Conn. Gen. Stat. § 1-210 and 5 U.S.C. § 552(a)(6)(A), indicated potential transparency failures and non-compliance with statutory obligations. 2. Follow-Up Communications Dates:



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	October 31, November 2, and December 2, 2024 After receiving no acknowledgment, I sent multiple follow-up communications to both the Attorney General's Office and the Department of Social Services (DSS). The continued lack of response revealed systemic procedural failures and deliberate suppression of transparency, as required under state and federal FOIA laws. 3. Denial of ADA Accommodations Along with my FOIA request, I submitted explicit ADA accommodation requests due to my traumatic brain injury (TBI). These accommodations included: Simplified communication formats. Accessible records compatible with assistive technologies. The agencies' failure to fulfill these reasonable accommodation requests demonstrated non-compliance with Title II of the ADA (42 U.S.C. § 12131) and its implementing regulations (28 C.F.R. § 35.130 and § 35.160). This exclusion from participating in critical oversight processes further revealed systemic discrimination and procedural barriers. 4. Exclusion from Public Processes Despite being a direct stakeholder in the Medicaid ABI Waiver Program, I was excluded from public forums, discussions, and decision-making processes critical to Medicaid program oversight. This exclusion revealed violations of my: First Amendment right to petition the government for redress of grievances. Fifth Amendment due process rights, as I was denied access to legally mandated processes. Fourteenth Amendment right to equal protection, as a person with disabilities. 5. Broader Investigation and Findings Through my advocacy efforts, I uncovered broader systemic issues, including: Lack of Transparency: No publicly available records, audits, or enforcement actions exist detailing the Medicaid ABI Waiver Program's operations or accountability mechanisms. Potential Mismanagement: Absence of records about complaints, violations, or corrective actions raises concerns about fraud, waste, and abuse of taxpayer-funded Medicaid resources. Barriers to Accountability: Systemic delays and exclusionary practices obst



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What additional facts support your allegation?	5. What Additional Facts Support Your Allegation? The following facts substantiate my allegations of systemic violations of FOIA, ADA, Medicaid regulations, constitutional rights, and taxpayer protections. These facts highlight systemic non-compliance, potential mismanagement, and a deliberate exclusion of individuals with disabilities from public processes. 1. FOIA Non-Compliance Ignored FOIA Requests: My FOIA request, submitted on October 25, 2024, and follow-ups on October 31, November 2, and December 2, 2024, were ignored by the Connecticut Attorney General's Office and the Department of Social Services (DSS). Both agencies failed to meet statutory deadlines under 5 U.S.C. § 552 (FOIA) and Conn. Gen. Stat. § 1-210, reflecting deliberate non-compliance with federal and state transparency laws. Systemic Suppression of Transparency: The refusal to disclose public records regarding the Medicaid Acquired Brain Injury (ABI) Waiver Program prevents public accountability, perpetuating risks to vulnerable populations. 2. ADA Violations Ignored ADA Accommodation Requests: Along with my FOIA request, I submitted explicit ADA accommodation requests due to my traumatic brain injury (TBI). These included simplified communication formats and accessible records compatible with assistive technologies. The agencies failed to acknowledge or fulfill these requests, violating Title II of the ADA (42 U.S.C. § 12131) and 28 C.F.R. § 35.130 and § 35.160. Exclusionary Practices: By denying ADA accommodations, the agencies excluded me from participating in Medicaid program oversight. This exclusion violates the Fourteenth Amendment Equal Protection Clause and perpetuates systemic discrimination against individuals with disabilities. 3. Constitutional Violations First Amendment Violations: FOIA non-compliance obstructed my right to petition the government for redress of grievances, violating the First Amendment. Fifth Amendment Violations: The agencies' refusal to provide access to public records and accommodations denied me procedural due process,



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	violating the Fifth Amendment. Fourteenth Amendment Violations: Excluding individuals with disabilities from public processes constitutes discrimination and violates the Fourteenth Amendment Equal Protection Clause. 4. Medicaid Oversight Failures Lack of Transparency in Program Operations: No publicly available records or audits exist detailing the Medicaid ABI Waiver Program's provider accountability, complaint investigations, or enforcement actions. The lack of transparency violates 42 U.S.C. § 1396a, which requires states to operate Medicaid programs transparently and effectively. Potential Mismanagement: The absence of publicly disclosed records about provider violations, complaints, or corrective actions raises concerns about fraud, waste, and abuse of taxpayer-funded Medicaid resources. 5. Whistleblower Retaliation Procedural Barriers: The agencies imposed procedural barriers, such as non-responsiveness and e

DISCLOSURE SUBJECTS

Name of individual you believe is responsible for the wrongdoing disclosed.

First Name	Last Name	Title	Chain of Command
Attorney General William Tong	Attorney General William Tong	Connecticut Attorney General William Tong	Connecticut Attorney General William Tong
Andrea Barton Reeves	Andrea Barton Reeves	Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS)	Andrea Barton Reeves: Appointed as Commissioner of DSS in early 2023, she oversees the department's
Governor Ned Lamont	Governor Ned Lamont	Governor Ned Lamont	Governor Ned Lamont



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*Denotes required fields.

Chiquita Brooks-LaSure	Chiquita Brooks-LaSure	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS)
Eileen Meskill	Eileen Meskill	Eileen Meskill Deputy Attorney General for the Connecticut Office of the Attorney General.	Deputy Attorney General for the Connecticut Office of the Attorney General.
Barbara Manning	Barbara Manning	CMS Regional Administrator Role: Oversees CMS operations	CMS Regional Administrator Role: Oversees CMS operations
Tanya Hughes (CHRO Executive Director)	Tanya Hughes (CHRO Executive Director)	Tanya Hughes (CHRO Executive Director)	Tanya Hughes (CHRO Executive Director)
Matthew Brokman serves as the Chief of Staff to Connecticut Governor	Matthew Brokman serves as the Chief of Staff to Connecticut Governor	Matthew Brokman serves as the Chief of Staff to Connecticut Governor	Matthew Brokman serves as the Chief of Staff to Connecticut Governor
Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS)	Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS)	Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS)	Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS)



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*Denotes required fields.

William Tong Connecticut Attorney General	William Tong Connecticut Attorney General	William Tong Connecticut Attorney General	William Tong Connecticut Attorney General
Barbara Manning CMS Regional Administrator Role: Oversees CMS operations	Barbara Manning CMS Regional Administrator Role: Oversees CMS operations	Barbara Manning CMS Regional Administrator Role: Oversees CMS operations	Barbara Manning CMS Regional Administrator Role: Oversees CMS operations
Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS)
Eileen Meskill Deputy Attorney General for the Connecticut Office of the Attorney General.	Eileen Meskill Deputy Attorney General for the Connecticut Office of the Attorney General.	Eileen Meskill Deputy Attorney General for the Connecticut Office of the Attorney General.	Eileen Meskill Deputy Attorney General for the Connecticut Office of the Attorney General.
Governor Ned Lamont	Governor Ned Lamont	Governor Ned Lamont	Governor Ned Lamont
Matthew Brokman serves as the Chief of Staff to Connecticut Governor	Matthew Brokman serves as the Chief of Staff to Connecticut Governor	Matthew Brokman serves as the Chief of Staff to Connecticut Governor	Matthew Brokman serves as the Chief of Staff to Connecticut Governor



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Tanya Hughes (CHRO Executive Director)	Tanya Hughes (CHRO Executive Director)	Tanya Hughes (CHRO Executive Director)	Tanya Hughes (CHRO Executive Director)
Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS)	Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS)	Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS)	Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS)
William Tong Connecticut Attorney General	William Tong Connecticut Attorney General	William Tong Connecticut Attorney General	William Tong Connecticut Attorney General
Barbara Manning CMS Regional Administrator	Barbara Manning CMS Regional Administrator	Barbara Manning CMS Regional Administrator	Barbara Manning CMS Regional Administrator
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Eileen Meskill Deputy Attorney General for the Connecticut	Eileen Meskill Deputy Attorney General for the Connecticut	Eileen Meskill Deputy Attorney General for the Connecticut	Eileen Meskill Deputy Attorney General for the Connecticut
Governor Ned Lamont	Governor Ned Lamont	Governor Ned Lamont	Governor Ned Lamont



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William Tong – Attorney General, Connecticut	William Tong – Attorney General, Connecticut	William Tong – Attorney General, Connecticut	William Tong – Attorney General, Connecticut
Barbara Manning CMS Regional Administrator	Barbara Manning CMS Regional Administrator	Barbara Manning CMS Regional Administrator	Barbara Manning CMS Regional Administrator
Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS)
Eileen Meskill Title: Deputy Attorney General	Eileen Meskill Title: Deputy Attorney General	Eileen Meskill Title: Deputy Attorney General	Eileen Meskill Title: Deputy Attorney General



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Governor Ned Lamont	Governor Ned Lamont	Governor Ned Lamont	Governor Ned Lamont
Matthew Brokman Title: Chief of Staff to Governor Ned Lamont	Matthew Brokman Title: Chief of Staff to Governor Ned Lamont	Matthew Brokman Title: Chief of Staff to Governor Ned Lamont	Matthew Brokman Title: Chief of Staff to Governor Ned Lamont
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Barbara Manning CMS Regional Administrator	Barbara Manning CMS Regional Administrator	Barbara Manning CMS Regional Administrator	Barbara Manning CMS Regional Administrator
Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare &	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS)



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		Medicaid Services (CMS)	
Eileen Meskill Deputy Attorney General for the Connecticut Office of the Attorney General.	Eileen Meskill Deputy Attorney General for the Connecticut Office of the Attorney General.	Eileen Meskill Deputy Attorney General for the Connecticut Office of the Attorney General.	Eileen Meskill Deputy Attorney General for the Connecticut Office of the Attorney General.
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William Tong – Attorney General, Connecticut	William Tong – Attorney General, Connecticut	William Tong – Attorney General, Connecticut	William Tong – Attorney General, Connecticut
Barbara Manning CMS Regional Administrator	Barbara Manning CMS Regional Administrator	Barbara Manning CMS Regional Administrator	Barbara Manning CMS Regional Administrator



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REQUESTED OSC ACTION

What action would you like OSC to take?

Document attached Request for Federal Representation

The Office of Special Counsel (OSC) and other relevant federal agencies, including the Department of Justice (DOJ), the Department of Health and Human Services (HHS), and the Centers for Medicare & Medicaid Services (CMS), must represent both myself as a whistleblower and the broader public in addressing these systemic violations. These actions should include:



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1. Representing Whistleblower Rights

Protect My Advocacy Efforts:

Enforce whistleblower protections under the Whistleblower Protection Act to safeguard my rights and ensure that my efforts to expose systemic failures are not met with retaliation.

Act as a federal intermediary to hold state agencies accountable for obstructing transparency and ADA compliance.

Provide Legal and Procedural Representation:

Advocate for my access to records, ADA accommodations, and participation in oversight processes as required under FOIA, ADA, and constitutional rights provisions.

Assist in ensuring that state agencies, including DSS and the Connecticut Attorney General's Office, comply with federal laws and policies.

2. Representing the Broader Public Interest

Ensure Accountability for Medicaid Mismanagement:

Represent the interests of taxpayers and Medicaid beneficiaries by investigating systemic mismanagement and potential misuse of federal funds under 42 U.S.C. § 1396a.

Address gross waste of federal and state resources allocated to the Medicaid ABI Waiver Program, ensuring that these funds serve their intended purpose of supporting vulnerable populations.

Protect Public Safety:

Act on behalf of individuals who rely on Medicaid services, ensuring program integrity and preventing harm to public health and safety caused by lack of oversight, transparency, or accountability.

Address the exclusion of stakeholders with disabilities from decision-making processes, which creates inequitable systems that endanger lives and erode public trust.

3. Federal Oversight of State Agencies

Hold State Agencies Accountable:

Represent federal authority in addressing Connecticut's systemic failures, ensuring that state agencies comply with federal laws, including FOIA, ADA, and Medicaid oversight regulations.

Require the Connecticut Department of Social Services (DSS), the Connecticut Attorney



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General's Office, and CHRO to implement federal-mandated corrective actions.

Demand Systemic Reforms:

Advocate for the establishment of independent oversight bodies to monitor ADA compliance, Medicaid program transparency, and whistleblower protections in Connecticut.

4. Advocating for Constitutional Protections

First Amendment:

Ensure my right to petition the government for redress of grievances is fully protected by holding state agencies accountable for suppressing FOIA requests and obstructing advocacy efforts.

Fifth Amendment:

Guarantee procedural due process in accessing public records, participating in Medicaid oversight, and ensuring equitable treatment under the law.

Fourteenth Amendment:

Demand equal protection for individuals with disabilities who are excluded from public forums, decision-making processes, and oversight roles due to systemic ADA violations.

5. Supporting Restorative Justice

Advocate for Compensation and Acknowledgment:

Request compensation for the harm caused to myself and others affected by these systemic violations, including delays, barriers to advocacy, and exclusion from public processes.

Seek a public acknowledgment of failures by Connecticut state agencies to ensure accountability and transparency for the public.

Mandate Public Reforms:

Represent the public interest by ensuring systemic reforms that guarantee transparency, accountability, and compliance with federal laws in all future Medicaid operations.

Conclusion

This request explicitly asks the federal government, through OSC and related agencies, to act on behalf of both myself as a whistleblower and the broader public interest, ensuring transparency, equity, and accountability in federally funded programs. The federal government's role is essential to restoring trust in public institutions and protecting the rights of whistleblowers and vulnerable populations.

WHERE ELSE DID YOU REPORT THIS MATTER?



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*Denotes required fields.

I have also disclosed this information to:

Other Action Type	Action Taken Date

Additional information about reports to Inspectors General, if applicable.

First Name:

Last Name:

Title:

Address:

Email Address:

Telephone Number:

Case ID #:

a. **What is the status of the matter?**

NOTE: MATTERS INVESTIGATED BY AN OFFICE OF INSPECTOR GENERAL

It is the general policy of OSC not to transmit allegations of wrongdoing to the head of the agency involved if the agency's Office of Inspector General has fully investigated, or is currently investigating, the same allegations.

ATTACHMENTS

Please note that the space available for attachments is limited. Therefore, DO NOT attach every document and email that may be relevant to your claim. You will have an opportunity to make additional submissions at a later date. We recommend limiting attachments to official forms and correspondence that document the action(s) at issue in your disclosure if these documents are relevant to your allegations.

I have attached the following documents to my filing:

File Name
State and Federal FOIA Request for Medicaid Acquired Brain Injury (ABI) Waiver Program Provider Registry _ Connecticut (Office of the Attorney General - Connecticut) (2).zip
599875 download.pdf
09.24.2024
Federal_Intervention_HHS_OIG_CMS_GAO_DOJ_OCR_Whistleblower_Report_2024.pdf



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Federal Representation for Justice DB.42.131.Inf. Medeiros Connecticut 11.28.2024 .pdf
Request for Federal Action Constitutional Rights ADA Non-Compliance Whistleblower Retaliation and Gross Mismanagement of Medicaid FundsFederal Representation for Justice DB.42.131.Inf. Medeiros Connecticut 12.02.2024 .pdf
State and Federal FOIA Request for Medicaid Acquired Brain Injury (ABI) Waiver Program Provider Registry _ Connecticut (Office of the Attorney General - Connecticut) (2).zip

CONSENT

Do you consent to the disclosure of your identify to others outside OSC if it becomes necessary in taking further action on this matter?*

I consent to disclosure of my identity.

Yes

I do not consent to disclosure of my identity. (Even if you do not consent, OSC may disclose your identity if necessary due to an imminent danger to public health or safety or imminent violation of any criminal law. See 5 U.S.C. § 1213(h).)

No

CERTIFICATION

I certify that all of the statements made in this complaint are true, complete, and correct to the best of my knowledge and belief. I understand that a false statement or concealment of a material fact is a criminal offense punishable by a fine, imprisonment, or both. 18 U.S.C. § 1001.*

Yes

BURDEN: The burden for this collection of information (including the time for reviewing instructions, searching existing data sources, gathering the data needed, and completing and reviewing the form) is estimated to be an average of one hour to submit a disclosure of information alleging agency wrongdoing, one hour and fifteen minutes to submit a complaint alleging a prohibited personnel practice or other prohibited activity, or 30



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minutes to submit a complaint alleging prohibited political activity. Please send any comments about this burden estimate, and suggestions for reducing the burden, to the U.S. Office of Special Counsel, General Counsel's Office, 1730 M Street, NW, Suite 218, Washington, DC 20036-4505.

This Disclosure of Information was Received by OSC on: 12/2/2024

PLEASE KEEP A COPY OF YOUR COMPLAINT, ANY SUPPORTING DOCUMENTATION, AND ANY ADDITIONAL ALLEGATIONS THAT YOU SEND TO OSC NOW OR AT ANY TIME WHILE YOUR COMPLAINT IS PENDING. REPRODUCTION CHARGES UNDER THE FREEDOM OF INFORMATION ACT MAY APPLY TO ANY REQUEST YOU MAKE FOR COPIES OF MATERIALS THAT YOU PROVIDED TO OSC.



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IMPORTANT INFORMATION ABOUT FILING A DISCLOSURE

OSC WHISTLEBLOWER DISCLOSURE CHANNEL

Under 5 U.S.C. § 1213 and related provisions, the Office of Special Counsel (OSC) serves as a secure channel for federal employees, former federal employees, and applicants for federal employment with reliable knowledge of the wrongdoing to disclose:

- a violation of law, rule or regulation;
- gross mismanagement;
- gross waste of funds;
- an abuse of authority;
- a substantial and specific danger to public health or safety; and/or
- censorship related to scientific research.

OSC JURISDICTION

OSC has no jurisdiction over disclosures filed by:

- employees of the U.S. Postal Service and the Postal Regulatory Commission;
- members of the armed forces of the United States (*i.e.*, non-civilian military employees);
- state employees operating under federal grants;
- employees of federal contractors;
- other employees or federal agencies that are exempt under federal law; and
- Congressional or judicial branch employees.

ANONYMOUS SOURCES

While OSC will protect the identity of persons who make disclosures, it will not consider anonymous disclosures. If a disclosure is filed by an anonymous source, the disclosure will be referred to the Office of Inspector General in the appropriate agency. OSC will take no further action.

RETALIATION

Do you believe you suffered retaliation by your agency for disclosing wrongdoing? If yes, you may file a complaint of retaliation by navigating back to "My Cases" and selecting "New Complaint." Select Option 1 to complete and submit a Complaint of Prohibited Personnel Practice or other Prohibited Activity (PPPs). *If you have already completed the Complaint of Prohibited Personnel Practice or other Prohibited Activity above, please continue with this Disclosure.* PPPs are employment-related activities that are banned in the federal workforce.



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PPPs generally involve some type of personnel decision or action and may result in personal relief for people who have been subject to a PPP. For example, if we find that you were removed from federal service in retaliation for whistleblowing, OSC may act to get your job back. PPPs can also include allegations of harassment, failure to issue appraisals, and improper hiring. Do not file a disclosure to report retaliation or other PPPs.

CONTACT INFORMATION

Title:

First Name:* David

Middle Initial:

Last Name:* Medeiros

International Address?: No

Address:*

215 Mountain St
Willimantic, CT 06226

Cell Phone Number:

Home Phone Number:

Office Phone Number:

Ext.

Email Address:* aabiwr@live.com

Preferred means of contact:

Email: Yes

Cell phone: No

Home phone: No

Office phone: No

REPRESENTATIVE INFORMATION

Do you have representation? No

Information about representative, if applicable.

First Name:*

Middle Initial:

Last Name:*

International Address?:

Address: *



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Office Phone Number:

Ext.

Cell Phone Number:

Home Phone Number:

Email Address:

EMPLOYMENT INFORMATION

Name of Department/Agency about which you are making a disclosure.

Department:* Health and Human Services

Agency:* Centers For Medicare & Medicaid Services

Agency subcomponent: Office of Program Integrity or Medicaid Integrity Program

Street Address: 7500 Security Boulevard

City: Baltimore

State: MD

Zip Code: 21244

Employment Status:* Non-Federal Employee (please specify)

Title	Series	Grade

Please provide your dates of employment in this position.

Employment Service Type	Employment Service Subtype	If Other (specify)
Excepted Service	Other	Private Citizen, Advocate, and Whistleblower
Other	Other	Private Citizen, Advocate, and Whistleblower

Are you covered by a collective bargaining agreement?

DETAILS OF YOUR DISCLOSURES



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Please identify the type of wrongdoing that you are alleging. You can make multiple disclosures, but you **MUST** choose one option. If you check "violation of law, rule, or regulation," specify, if you can, the particular law, rule or regulation violated (by name, subject, and/or legal citation). For each allegation, please answer the following questions (be as specific as possible). Please keep in mind that you will have an opportunity to provide more information and someone from OSC will contact you.

If OSC determines there is a substantial likelihood of wrongdoing, OSC will refer your disclosures to the involved agency for an investigation and report. To meet the substantial likelihood standard, there must be a significant probability that the information reveals wrongdoing that falls within one or more of the categories above. In its evaluation, OSC considers the strength, reliability, and credibility of the disclosures. If the substantial likelihood determination cannot be made, OSC will determine whether there is sufficient information to exercise its discretion to refer the allegations.

DISCLOSURES

Allegation	Gross Mismanagement
What action did they take?	2. What Action Did They Take? The following details outline the actions—or failures to act—by the individuals and agencies identified, which have resulted in systemic violations of constitutional rights, ADA non-compliance, and mismanagement of taxpayer-funded programs. Connecticut Department of Social Services (DSS): Andrea Barton Reeves (Commissioner): Action: Failed to ensure compliance with federal and state laws, including the Freedom of Information Act (FOIA), by not responding to or improperly denying requests for records related to the Medicaid ABI Waiver Program and whistleblower complaints. Impact: Directly contributed to the lack of transparency and accountability in DSS operations, violating constitutional and statutory rights. Matthew S. Antonetti (Legal Director): Action: Oversaw and/or approved the improper handling of FOIA requests and ADA accommodation requests. Allowed legal barriers to obstruct whistleblower protections and public access to information. Impact: Facilitated DSS's legal non-



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	compliance, obstructing efforts to investigate systemic issues in Medicaid program management. Astread Ferron-Poole (Associate): Action: Coordinated or executed policies that limited access to public records, failed to address program deficiencies, and disregarded ADA accommodation requests. Impact: Excluded individuals with disabilities from participating in program oversight and contributed to the systemic marginalization of vulnerable populations. Centers for Medicare & Medicaid Services (CMS): Michelle A. James (Medicaid Compliance Officer): Action: Did not enforce state compliance with federal Medicaid regulations and failed to address whistleblower reports highlighting deficiencies in the ABI Waiver Program. Impact: Allowed ongoing mismanagement of taxpayer funds and neglect of federally mandated oversight responsibilities. Emmett Nicholson (Senior Administrator): Action: Failed to initiate or ensure federal investigations into reported violations, including ADA non-compliance and Medicaid fraud. Impact: Delayed accountability and perpetuated harm to individuals dependent on Medicaid services. Connecticut State Government Officials: William Tong (Attorney General): Action: Failed to provide legal oversight to enforce DSS compliance with FOIA, ADA, and whistleblower protection laws. Declined to act on or investigate whistleblower complaints effectively. Impact: Undermined public trust in government accountability and allowed constitutional violations to persist. Ned Lamont (Governor): Action: Neglected executive oversight of DSS and CMS operations, failing to ensure that state agencies complied with federal and state laws protecting taxpayers, whistleblowers, and individuals with disabilities. Impact: Facilitated systemic corruption and mismanagement of federally funded programs. Deidre S. Gifford (Former Acting Commissioner): Action: During her tenure, failed to implement effective oversight mechanisms for Medicaid programs, al
When did this occur?	Timeline of Events December 18, 2023 Event: David Medeiros submitted a whistleblower report regarding



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	systemic failures in Medicaid administration, ADA compliance, and misuse of taxpayer funds under the Connecticut Medicaid ABI Waiver Program. Implications: Triggered alleged retaliatory actions against ABI Resources and David Medeiros. March 2024 – Ongoing Event: Multiple FOIA requests were submitted by David Medeiros to Connecticut Department of Social Services (DSS) and other agencies, including CMS and DOJ, to seek transparency and records. Implications: State and federal agencies failed to acknowledge or fully respond to requests, violating FOIA timelines and transparency standards. July 2024 – Present Event: Denials of ADA accommodation requests began, including refusals to provide accessible formats and simplified communication for individuals with disabilities. Implications: Violations of Title II of the ADA and constitutional protections under the Fourteenth Amendment. Octob
How did you discover this action?	4. How Did You Discover This Action? I discovered these actions through a combination of direct experience, formal requests, and subsequent investigations: Firsthand Impact: As the founder of ABI Resources and an individual requiring ADA accommodations, I personally experienced retaliatory actions and systemic barriers when advocating for transparency and accountability within the Connecticut Medicaid Acquired Brain Injury (ABI) Waiver Program. Specific incidents included the abrupt closure of Sandata EVV Ticket #539494 and disruptions to Medicaid billing processes, which directly impacted ABI Resources and the vulnerable populations it serves. Responses to FOIA Requests: I submitted multiple Freedom of Information Act (FOIA) requests to state and federal agencies, including DSS, CMS, and DOJ, to obtain critical documentation related to Medicaid billing actions, ADA compliance, and retaliation. The lack of responses or partial and redacted responses revealed systemic non-compliance with FOIA laws (5 U.S.C. § 552). Patterns of Denial: Requests for ADA accommodations, such as accessible communication formats and simplified documentation, were routinely



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	ignored or denied, in violation of Title II of the ADA (42 U.S.C. § 12131). These denials highlighted a broader pattern of exclusionary practices impacting individuals with disabilities. Testimonies and Advocacy Reports: Testimonies from affected individuals and reports from other advocates confirmed systemic issues, including mismanagement of taxpayer funds and failure to meet federal oversight standards under 42 U.S.C. § 1396a. Public Records and Internal Communications: Limited disclosures obtained through FOIA requests and whistleblower filings exposed gross mismanagement, retaliation, and abuse of authority by state and federal agencies. Specific documents, such as internal memos and correspondence, confirmed efforts to suppress whistleblower advocacy and shield systemic failures. Persistent Escalation Attempts: Multiple attempts to resolve these issues through administrative appeals, direct communication with agency heads, and engagement with oversight bodies like the U.S. Office of Special Counsel (OSC) further revealed institutional resistance and procedural failures. By compiling this evidence, I identified a consistent and systemic failure to comply with constitutional, ADA, and FOIA mandates, directly impacting public trust, vulnerable populations, and the effective use of taxpayer funds.
What additional facts support your allegation?	Additional Facts Supporting the Allegation Documented FOIA Non-Compliance: Multiple FOIA requests submitted to the Connecticut Department of Social Services (DSS), Centers for Medicare & Medicaid Services (CMS), and related agencies have either been ignored, partially fulfilled, or improperly denied. Specific example: FOIA Case No. [Provide Specific Case Number] demonstrates DSS's failure to meet statutory response deadlines under 5 U.S.C. § 552 and Conn. Gen. Stat. § 1-210. Denials and delays were issued without clear explanations or legal citations, violating procedural transparency mandates. ADA Accommodation Failures: Requests for ADA-compliant communication formats, including email-only responses and screen-reader-



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	compatible documentation, were ignored or mishandled, violating Title II of the ADA (42 U.S.C. § 12131) and corresponding regulations (28 C.F.R. § 35.160). Examples of non-compliance include: Responses through inaccessible online portals. Failure to provide simplified summaries for complex documentation. These failures systematically excluded individuals with disabilities from participating in public processes and accessing vital information. Mismanagement of Medicaid Funds: Reports of Medicaid ABI Waiver Program mismanagement include: Arbitrary restrictions on provider billing (e.g., Sandata EVV Ticket #539494). Lack of oversight over Medicaid provider audits, complaints, and enforcement actions. Evidence includes inconsistencies in provider authorizations, unexplained billing suspensions, and non-transparent administrative decisions, potentially violating 42 U.S.C. § 1396a (State Plan Requirements). Retaliation Against Whistleblower Activities: Following the submission of a December 18, 2023, whistleblower report, retaliatory actions included: Premature closure of complaints (e.g., DSS ticketing system records). Denial of legitimate billing and operational requests by ABI Resources, impacting the organization's ability to serve Medicaid clients. Retaliation violates federal whistleblower protections under 5 U.S.C. § 2302(b)(8). Patterns of Gross Mismanagement: Public records and investigative reports reveal systemic failures in transparency and accountability across DSS and CMS. Examples include: Lack of response to multiple public complaints about Medicaid program irregularities. Delays in responding to grievances filed by individuals and organizations advocating for Medicaid accountability. Harm to Vulnerable Populations: Systemic failures disproportionately affect vulnerable groups relying on Medicaid-funded services, including: Individuals with disabilities who face barriers to accessing care and representation. Low-income families and elderly individuals whose Medicaid-supported services are



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	jeopardized by mismanagement. These failures constitute a danger to public health and safety, violating federal Medicaid regulations and broader constitutional protections. Supporting Documentation: Copies of FOIA requests, respon
Allegation	Violation of Law, Rule or Regulation
What action did they take?	What Action Did They Take? The actions taken by the individuals and entities involved demonstrate systemic non-compliance with federal and constitutional laws, causing harm to transparency, accountability, and the rights of individuals with disabilities. The following actions occurred: 1. Failure to Comply with FOIA (Freedom of Information Act) Deliberate Delays and Denials: DSS, CMS, and the Connecticut Attorney General's Office failed to provide timely responses to FOIA requests, including Case No. 25-00044-F and related inquiries. These delays constitute a violation of 5 U.S.C. § 552 and Conn. Gen. Stat. § 1-210. Partial or Non-Responsive Disclosures: Records provided were incomplete, and key documents were withheld without proper statutory justification or explanation for redactions. Misuse of the GovQA System: DSS imposed undue barriers to accessing public information by limiting multi-document FOIA requests, violating principles of transparency. 2. Violations of ADA (Americans with Disabilities Act) Refusal to Provide Reasonable Accommodations: DSS and CMS failed to provide requested ADA accommodations, such as: Accessible formats for communications. Simplified summaries for complex records. Identification of responsible personnel for accountability. Exclusionary Practices: By denying these accommodations, state and federal agencies excluded individuals with disabilities, including David Medeiros, from participating fully in public processes, violating Title II of the ADA (42 U.S.C. § 12131) and 28 C.F.R. § 35.160. 3. Retaliatory Actions Following Whistleblower Disclosures Medicaid Billing Suspension: DSS and CMS imposed unjustified restrictions on ABI Resources' Medicaid billing privileges, including



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	mishandling of Sandata EVV Ticket #539494, directly retaliating against whistleblower activities. Premature Closure of Complaints: State agencies prematurely closed complaints and whistleblower reports without conducting thorough investigations or providing transparent resolutions. Systemic Obstruction: Agencies created structural barriers to whistleblower advocacy, discouraging transparency and accountability. 4. Gross Mismanagement of Medicaid Programs Lack of Oversight: DSS failed to monitor provider compliance and spending in the Medicaid Acquired Brain Injury Waiver Program, leading to concerns about waste, fraud, and abuse of taxpayer funds under 42 U.S.C. § 1396a. Unauthorized Policy Changes: DSS terminated companion authorizations for Medicaid recipients without due process or public input, disproportionately affecting individuals with disabilities. Misuse of Federal Funds: State and federal funds allocated for social services were diverted, potentially contributing to mismanagement and systemic inequities. 5. Violations of Constitutional Rights Suppression of Whistleblower Advocacy: Agencies suppressed whistleblower efforts to expose systemic issues, infringing on First Amendment rights to petition the government. Denial of Due Proce
When did this occur?	When Did This Occur? The actions and violations occurred over a sustained period, beginning in December 2023 and continuing to the present date (December 3, 2024). Key milestones include: December 18, 2023: Whistleblower report was submitted, initiating concerns about potential retaliation, ADA violations, and mismanagement of Medicaid funds. January 2024 – March 2024: Retaliatory actions began to surface, including: Restrictions placed on Medicaid billing. Premature closure of Ticket #539494 in Sandata EVV. Failures to provide ADA accommodations for communication. April 2024 – November 2024: Continuous FOIA delays and non-compliance from Connecticut DSS, CMS, and other agencies. Specific cases include: FOIA Request Case No. 25-00044-F submitted in



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	October 2024, with no timely response or adherence to statutory deadlines. Additional FOIA requests in November 2024 ignored or denied, further compounding transparency issues. Ongoing (2023–2024): Patterns of systemic failures, includi
How did you discover this action?	Expanded Timeline with Key Milestones December 18, 2023: Whistleblower report filed with U.S. Office of Special Counsel and other federal entities regarding systemic ADA violations, FOIA non-compliance, and Medicaid mismanagement. Agencies notified include: Centers for Medicare & Medicaid Services (CMS) U.S. Department of Health and Human Services (HHS) Connecticut Department of Social Services (DSS) Office of Inspector General (OIG) January–March 2024: Agencies failed to acknowledge or act on whistleblower allegations. No responses provided to multiple requests for investigation updates, despite statutory obligations for timely communication under whistleblower protection laws and ADA requirements. April 2024: FOIA request submitted (Case No. 25-00044-F) seeking detailed Medicaid provider records and programmatic oversight documentation for the ABI Waiver Program. Request explicitly includes ADA accommodation requirements and transparency measures. May 2024: FOIA deadlines missed without statutory justification. Initial responses lack substantive information and fail to meet ADA accommodations, violating Title II of the ADA. June–October 2024: Escalation attempts to DSS Commissioner Andrea Barton Reeves and CMS administrators ignored or inadequately addressed. FOIA denials and delays continue, with no explanation or adherence to federal guidelines. November 2024: Submitted whistleblower complaints to the DOJ Civil Rights Division and other oversight entities regarding systemic failures in Connecticut’s Medicaid programs. Further FOIA requests filed for additional documentation regarding Medicaid billing restrictions and policy changes affecting vulnerable populations, including ABI Resources clients. December 2024: DOJ responds to whistleblower



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	complaint (Case No. 540144-VPT), declining action despite extensive documented violations. Federal complaint prepared for submission to the U.S. Office of Special Counsel, including detailed allegations of gross mismanagement, abuse of authority, and ADA violations. Strategic Emphasis for Maximum Impact Human Element: Highlight the suffering caused by these systemic failures. Include anonymized stories of individuals impacted by mismanagement or lack of services, particularly those with disabilities. Scale of the Issue: Frame this as a national problem: Reference over 100 state-managed programs in Connecticut facing similar challenges. Suggest that these failures reflect broader trends across federally funded Medicaid systems. Federal Responsibility: Invoke federal obligations under Medicaid statutes, FOIA, ADA, and the Whistleblower Protection Act to enforce compliance. Appeal to the Office of Special Counsel as a last resort for holding agencies accountable. Financial Stakes: Quantify the potential misuse of federal funds. Include data or estimates of how much taxpayer money has been mismanaged or improperly allocated. Tie financial mismanagement directly to failures in care for vulnerable po
What additional facts support your allegation?	Additional Facts Supporting Allegations To substantiate the allegations further, the following facts are presented with precision and legal grounding, ensuring a comprehensive narrative for your case: 1. Systemic FOIA Non-Compliance Failure to Respond to Requests: Despite submitting multiple FOIA requests (e.g., Case No. 25-00044-F), agencies like DSS and CMS failed to provide timely and complete responses, violating 5 U.S.C. § 552(a)(6)(A) and Connecticut General Statutes § 1-210. Denied ADA Accommodations: Requests for accessible formats and communication via the MuckRock platform were explicitly ignored, constituting non-compliance under 42 U.S.C. § 12131 (ADA Title II). Incomplete and Obstructive Responses: Agencies delayed or denied access to critical Medicaid program documentation,



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	undermining transparency and the public's right to information. 2. ADA Violations and Exclusionary Practices Denial of Equal Access: By failing to provide reasonable ADA accommodations for communication, such as screen-reader-compatible documents and direct email responses, DSS and CMS actively excluded individuals with disabilities from participating in public processes. Impact on Vulnerable Populations: These failures disproportionately harmed individuals reliant on Medicaid services, violating the ADA's mandate for equitable access to government programs and services. 3. Retaliation Against Whistleblowing Actions Taken Against ABI Resources: Medicaid billing restrictions and the abrupt resolution of Sandata EVV Ticket #539494 were implemented after whistleblower disclosures, reflecting a retaliatory pattern. Suppression of Advocacy: ABI Resources' efforts to expose systemic issues were met with obfuscation, delays, and financial restrictions, discouraging further whistleblower activity. 4. Gross Mismanagement of Medicaid Programs Improper Use of Federal Funds: Federal Medicaid funds intended for service delivery were mismanaged, with evidence suggesting potential redirection toward state pension liabilities, violating 42 U.S.C. § 1396a. Lack of Oversight and Audits: DSS failed to provide records of adequate program audits or actions taken against providers for complaints, creating risks of fraud, waste, and abuse. Termination of Companion Authorizations: The abrupt policy change ending companion authorizations under the ABI Waiver Program on December 31, 2023, adversely impacted program participants without proper public notice or justification. 5. Constitutional Violations Suppression of Whistleblower Advocacy: By denying records and retaliating against disclosures, agencies infringed on First Amendment rights to petition the government. Due Process Violations: DSS and CMS failed to follow proper procedures for addressing Medicaid complaints and whistleblower allegations, violating Fifth Amendment protections. Equal Protection Denied:



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	Exclusionary practices under the ADA demonstrated systemic discrimination against individuals with disabilities, contrary to
Allegation	Gross Waste of Funds
What action did they take?	2. What Action Did They Take? The individuals listed in the complaint, representing both state and federal agencies, took the following actions that led to gross waste of taxpayer funds in the Medicaid program: State-Level Actions and Omissions: Andrea Barton Reeves (Commissioner, DSS): Mismanagement of Funds: Failed to oversee the proper allocation and use of Medicaid funds within the ABI Waiver Program and other DSS-administered programs, leading to unaccounted expenditures. Negligence in Addressing Complaints: Ignored whistleblower complaints and reports of systemic inefficiencies, allowing fiscal mismanagement to continue unchecked. Failure to Implement Oversight Mechanisms: Did not enforce or improve existing financial accountability measures within DSS, enabling the misuse of funds. Matthew S. Antonetti (Legal Director, DSS): Inadequate Legal Oversight: Did not initiate or support legal action to address known financial irregularities within Medicaid programs. Complicity in Non-Compliance: Allowed systemic non-compliance with federal Medicaid regulations by failing to enforce corrective actions. Astread Ferron-Poole (Policy and Program Coordinator, DSS): Ineffective Policy Implementation: Introduced or upheld administrative policies that lacked accountability measures for fund allocation. Administrative Inefficiency: Contributed to delays and errors in Medicaid provider payments and program oversight. Federal Oversight Failures: Michelle A. James (Medicaid Compliance Officer, CMS): Failure to Conduct Audits: Neglected to ensure timely and comprehensive audits of Connecticut's Medicaid programs to identify wasteful spending. Inadequate Response to Whistleblower Complaints: Ignored documented evidence of fiscal mismanagement, further enabling the misuse of taxpayer dollars. Emmett



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	Nicholson (Senior Administrator, CMS): Lack of Federal Oversight: Did not enforce federal Medicaid regulations requiring transparency and accountability in the use of funds. Permitted Wasteful Practices: Allowed significant discrepancies in the handling of Medicaid funds to persist without intervention or corrective measures. Higher-Level Negligence: William Tong (Attorney General, State of Connecticut): Failure to Investigate: Did not pursue legal investigations into reported instances of fraud, waste, or abuse within DSS or other state agencies involved in Medicaid program administration. Lack of Enforcement: Failed to hold state officials accountable for non-compliance with federal and state financial management laws. Ned Lamont (Governor, State of Connecticut): Policy Prioritization of Pension Debt Over Social Services: Directed funds meant for vulnerable populations toward resolving state pension obligations, depriving Medicaid programs of necessary resources. Ignored Whistleblower Reports: Did not take meaningful action to address whistleblower concerns regarding financial inefficiencies in state-administered programs. Key Violations: Misappropriation
When did this occur?	3. When Did This Occur? The actions leading to the gross waste of taxpayer funds occurred over a prolonged period, beginning in December 2023 and continuing to the present day. Specific milestones include: December 18, 2023: Whistleblower complaint submitted by David Medeiros to relevant authorities, identifying systemic failures and misuse of Medicaid funds within the ABI Waiver Program. December 2023 – June 2024: Initial evidence of non-compliance with federal Medicaid regulations, including delays in addressing provider complaints and irregularities in fund allocation. March 2024: Repeated failures by state agencies, including DSS, to respond to FOIA requests seeking transparency about Medicaid fund management. Evidence surfaced that funds intended for social services were diverted toward state pension liabilities, violating the purpose of federal Medicaid funding. June 2024 – September 2024: Federal



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	oversight agencies, including CMS, failed to enforce corrective measures or c
How did you discover this action?	4. How Did You Discover This Action? The discovery of gross waste of funds resulted from a combination of direct involvement, diligent investigation, and whistleblower disclosures, including: First-Hand Observations: As the founder of ABI Resources and an active participant in the Connecticut Medicaid Acquired Brain Injury (ABI) Waiver Program, I directly observed systemic inefficiencies, administrative delays, and unexplained denials of services. These issues raised red flags about the program's integrity and management. Whistleblower Insights: Through ABI Resources' advocacy, reports surfaced from affected individuals and providers regarding improper denials of services, delayed reimbursements, and lack of accountability within the program. These issues suggested widespread mismanagement and potential misuse of funds. Freedom of Information Act (FOIA) Requests: Multiple FOIA requests were filed with Connecticut agencies, including the Department of Social Services (DSS), to obtain transparency about Medicaid fund allocations and program administration. The consistent failure to provide complete or timely responses further substantiated concerns about intentional concealment of financial mismanagement. Patterns of ADA Non-Compliance: As an individual with a traumatic brain injury, I encountered repeated failures to provide reasonable ADA accommodations in accessing Medicaid-related information. This exclusionary behavior raised questions about the equitable distribution of funds and compliance with federal regulations. Public Disclosures and Testimonies: Testimonies from other advocates, Medicaid beneficiaries, and providers corroborated widespread systemic failures, including misappropriation of federal funds intended for social services. Documented Financial Irregularities: Analysis of Connecticut's fiscal practices revealed a concerning overlap between federal Medicaid funding and state pension debt. Federal funds



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	intended for vulnerable populations appeared to be diverted to address unrelated state financial obligations, violating Medicaid's statutory purpose. Lack of Federal Oversight: Despite raising these concerns with federal oversight bodies, including the Centers for Medicare & Medicaid Services (CMS) and the U.S. Department of Health and Human Services (HHS), no substantive corrective actions were taken, allowing the wasteful practices to persist.
What additional facts support your allegation?	5. What Additional Facts Support Your Allegation? The allegation of gross waste of funds in Connecticut's Medicaid programs is supported by extensive, documented evidence of mismanagement, non-compliance with federal laws, and patterns of systemic failures. These facts include: 1. Documented FOIA Non-Compliance: Multiple FOIA requests submitted to the Connecticut Department of Social Services (DSS) and other agencies have gone unanswered or were met with incomplete responses. Case Example: FOIA Case No. 25-00044-F sought information about Medicaid provider registry records and compliance practices. DSS failed to provide a complete response, violating FOIA obligations under 5 U.S.C. § 552 and Connecticut's FOIA statutes. This lack of transparency suggests efforts to conceal financial mismanagement or non-compliance with Medicaid regulations. 2. Disparities in Medicaid Service Allocation: Beneficiaries and providers under the Medicaid ABI Waiver Program have reported delayed reimbursements, abrupt terminations of services, and inconsistent authorizations for care. Example: Companion authorizations were terminated without sufficient notice or explanation, depriving individuals with disabilities of necessary support while funds for these services remained unaccounted for. 3. Diversion of Federal Funds to State Pension Obligations: Analysis of Connecticut's budget practices revealed federal Medicaid dollars intended for vulnerable populations were used to offset state employee pension debt. Evidence: Public records and financial reports indicate that billions of dollars in



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	Medicaid allocations were indirectly funneled toward pension liabilities, violating the intended use of these federal funds under Medicaid regulations (42 U.S.C. § 1396a). 4. Widespread ADA Violations: DSS and other state agencies consistently failed to provide legally mandated accommodations for individuals with disabilities seeking to access program information. ADA Non-Compliance Examples: Denial of screen-reader-compatible documents. Refusal to embed response text directly in emails, as required for accessibility. Failure to accommodate requests submitted through platforms like MuckRock, disproportionately burdening individuals with cognitive disabilities. These failures disproportionately excluded individuals with disabilities from accessing Medicaid-funded services. 5. Whistleblower Retaliation: After raising concerns about Medicaid fund mismanagement, whistleblowers, including myself, experienced systemic retaliation. Example: Medicaid billing privileges for ABI Resources were restricted, and Sandata EVV Ticket #539494 was prematurely closed without resolution or justification. This retaliation aimed to suppress advocacy efforts and conceal ongoing wasteful practices. 6. Lack of Oversight and Accountability: Federal oversight agencies such as CMS and HHS failed to enforce compliance despite repeated reports of mismanagement. Evidence: Escalated complaints to the U.S. Department
Allegation	Danger to Public Health
What action did they take?	2. What Action Did They Take? The individuals and agencies in question engaged in systemic actions and inactions that directly endangered public health, violated federal and constitutional laws, and deprived vulnerable populations of their rights and essential services. The actions include but are not limited to: Connecticut Department of Social Services (DSS) Andrea Barton Reeves (Commissioner): Neglected Oversight: Failed to enforce appropriate management of Medicaid programs, particularly the ABI Waiver, allowing systemic inefficiencies and care denials. Denied ADA



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	Accommodations: Refused to implement necessary accommodations, violating the Americans with Disabilities Act (ADA), excluding individuals from accessing critical services. Matthew S. Antonetti (Legal Director): Blocked Transparency: Obstructed Freedom of Information Act (FOIA) requests, withholding records critical to understanding mismanagement within Medicaid programs. Suppressed Whistleblower Disclosures: Ignored reports highlighting systemic violations, allowing the continuation of practices harmful to public health. Astread Ferron-Poole (Associate): Drafted Harmful Policies: Enabled administrative decisions that led to the termination or denial of essential Medicaid services without proper oversight or accountability. Centers for Medicare & Medicaid Services (CMS) Michelle A. James (Medicaid Compliance Officer): Ignored Oversight Responsibilities: Failed to address formal complaints and enforce compliance with federal Medicaid regulations, compromising the welfare of beneficiaries. Allowed Mismanagement: Permitted Connecticut DSS to operate without adequate accountability, resulting in the denial of essential services to vulnerable populations. Emmett Nicholson (Senior Administrator): Facilitated Inefficiencies: Approved practices that undermined Medicaid service delivery, allowing systemic gaps that endangered public health. Connecticut Leadership William Tong (Attorney General): Failed to Act on Violations: Refused to investigate or enforce compliance with FOIA, ADA, and constitutional laws, enabling continued systemic failures. Legal Suppression: Declined to address whistleblower complaints, perpetuating non-compliance and public health risks. Ned Lamont (Governor): Prioritized Fiscal Policy Over Health: Focused state resources on pension liabilities and administrative overhead at the expense of federally funded Medicaid programs, depriving vulnerable populations of their entitled services. Supported Mismanagement: Enabled DSS and CMS to operate without transparency or accountability, leading



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	to service failures and misuse of public funds. Specific Harmful Actions Denial of Critical Services: Terminated Medicaid benefits, including those under the ABI Waiver Program, leaving individuals with disabilities and vulnerable populations without necessary care. Misallocation of Federal Funds: Redirected Medicaid funds intended for care delivery to unrelated state financial
When did this occur?	3. When Did This Occur? The systemic violations began on December 18, 2023, following the whistleblower report submitted to relevant state and federal agencies, including DSS, CMS, and HHS, regarding failures in Medicaid program administration. These violations remain ongoing due to persistent non-compliance with federal and state laws. Key milestones include: December 18, 2023: Submission of the whistleblower report outlining significant deficiencies in ADA compliance, FOIA transparency, and Medicaid mismanagement. January 2024 - November 2024: Subsequent FOIA requests (e.g., Case No. 25-00044-F) submitted to state and federal agencies, including DSS and CMS, detailing requests for specific documents and accommodations under Title II of the ADA (42 U.S.C. § 12131) and FOIA (5 U.S.C. § 552). February 2024: Initial responses received were incomplete, lacked ADA-compliant formats, and omitted required documentation under FOIA standards, violating 5 U.S.C. §
How did you discover this action?	The discovery of these actions occurred through a combination of direct experience, diligent investigation, and responses (or lack thereof) from state and federal agencies. Key events include: Whistleblower Advocacy and Personal Experience: As a whistleblower and advocate for individuals with disabilities, I directly observed systemic barriers, non-compliance, and retaliatory actions within Connecticut's Medicaid Acquired Brain Injury (ABI) Waiver Program. These observations were corroborated through my work with ABI Resources, assisting affected individuals who faced similar challenges in accessing services and



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	accommodations. FOIA Requests and Agency Responses: Through Freedom of Information Act (FOIA) requests (e.g., Case No. 25-00044-F) submitted between December 2023 and December 2024 to state and federal agencies, I sought documentation to verify concerns about Medicaid mismanagement, ADA violations, and retaliatory actions. Responses received from DSS, CMS, and other agencies were incomplete, delayed, or non-compliant with FOIA mandates, raising further concerns about transparency and accountability. Failure to Provide ADA-Compliant Accommodations: In attempting to navigate agency processes as an individual with disabilities, I repeatedly requested reasonable accommodations under Title II of the ADA (42 U.S.C. § 12131), including accessible communication formats and clear justifications for decisions. Agencies failed to comply, denying equitable access to information and participation in public processes. Reports from Affected Populations: Individuals and families reliant on Connecticut's Medicaid programs reported similar barriers, including denial of services, lack of accountability, and procedural delays. Their accounts provided additional evidence of systemic failures and the broader impact of agency actions. Analysis of Retaliatory Actions: Retaliatory actions, including Medicaid billing restrictions, programmatic changes, and unresolved complaints, became evident following my submission of a whistleblower report on December 18, 2023. These actions appeared targeted to suppress advocacy and silence scrutiny, in violation of First Amendment protections. Independent Research and Public Records: Research into Medicaid program audits, public complaints, and agency communications revealed patterns of mismanagement, waste, and potential fraud. These findings were consistent with the systemic issues I encountered. Supporting Evidence: Documentation of FOIA requests and responses demonstrating non-compliance with 5 U.S.C. § 552. Correspondence requesting ADA accommodations, which agencies



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	ignored or denied, violating 42 U.S.C. § 12131. Witness accounts from affected individuals and families corroborating systemic harm and inequities. Records of retaliatory actions following the whistleblower report, further evidencing agency misconduct.
What additional facts support your allegation?	5. What Additional Facts Support Your Allegation? Systemic Non-Compliance with FOIA and ADA FOIA Violations: Numerous FOIA requests submitted to state and federal agencies, including the Connecticut Department of Social Services (DSS), Centers for Medicare & Medicaid Services (CMS), and U.S. Department of Justice (DOJ), have gone unanswered or been responded to inadequately, violating 5 U.S.C. § 552. For example: Case No. 25-00044-F remains unfulfilled, with critical records withheld or delayed beyond statutory timelines. Denials of information have been issued without detailed justifications citing applicable statutory exemptions. ADA Non-Compliance: Requests for ADA accommodations, such as simplified communication formats, screen-reader compatible records, and named points of contact, were ignored. This violates Title II of the ADA (42 U.S.C. § 12131) and 28 C.F.R. § 35.160, effectively excluding individuals with disabilities from accessing public records. Failure to Provide Reasonable Accommodations: Repeated requests for accommodation were either denied or met with vague responses, causing unnecessary barriers for individuals with disabilities and violating the mandate for equal access. Retaliatory Actions and Programmatic Failures Targeted Retaliation: After submitting a whistleblower report on December 18, 2023, the Connecticut Department of Social Services implemented punitive measures, including: Restrictions on Medicaid billing for ABI Resources. Premature closure of Ticket #539494 without resolution or justification. These actions are demonstrably retaliatory and violate whistleblower protections under 5 U.S.C. § 2302. Medicaid Waiver Program Mismanagement: Termination of critical companion authorizations under the ABI Waiver Program



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	disproportionately impacted vulnerable populations. Changes were implemented without transparency, notice, or proper justification. Gross Waste and Mismanagement of Funds Federal Medicaid Funds Misallocated: Federal Medicaid funds appear to have been diverted for purposes unrelated to healthcare, such as funding pension liabilities. This violates 42 U.S.C. § 1396a, which mandates proper use of federal funds for medical assistance. Inefficiencies and Lack of Oversight: Internal audits and public records reveal systemic inefficiencies in Medicaid program administration, resulting in waste, fraud, and misuse of taxpayer dollars. Constitutional Violations First Amendment: Retaliatory actions against whistleblowing efforts directly infringe on First Amendment rights to petition the government and engage in advocacy. Due Process and Equal Protection: Procedural inequities, including denial of access to informat
Allegation	Abuse of Authority
What action did they take?	Abuse of Authority: What Action Did They Take? Targeted Retaliatory Actions: Connecticut Department of Social Services (DSS), under Commissioner Andrea Barton Reeves, implemented billing restrictions and terminated Medicaid program authorizations, particularly targeting ABI Resources. These actions followed David Medeiros' whistleblower reports, suggesting retaliation rather than legitimate regulatory compliance. Non-Compliance with FOIA and ADA: State and federal officials failed to respond to Freedom of Information Act (FOIA) requests within statutory timelines, denying transparency about Medicaid program decisions and fund usage. DSS ignored legally mandated ADA accommodations, excluding individuals with disabilities, including David Medeiros, from accessing critical information and services. Mismanagement of Medicaid Resources: Policies and practices implemented by DSS and CMS officials resulted in systemic inefficiencies, waste, and potential fraud in Medicaid programs. Federal oversight agencies, including CMS and HHS, failed to enforce



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	compliance with Medicaid and ADA regulations, exacerbating harm to vulnerable populations. Neglect of Oversight and Enforcement: Federal officials, including Michelle A. James and Emmett Nicholson at CMS, neglected their responsibilities to monitor state Medicaid operations. State officials failed to conduct meaningful investigations or audits, allowing systemic issues to persist. Suppressing Accountability: The Attorney General's Office actively defended state agencies against credible federal complaints instead of ensuring adherence to laws and addressing systemic abuses. Governor Lamont's administration publicly minimized the impact of these failures, prioritizing other financial commitments over correcting systemic violations in Medicaid programs. Creating Systemic Barriers: Officials implemented policies requiring excessive documentation, burdensome processes, and restrictive parameters for FOIA requests and Medicaid program access, disproportionately impacting individuals with disabilities and whistleblowers. Why These Actions Violate Laws and Protections: Constitutional Violations: Suppression of whistleblower advocacy infringes upon First Amendment rights, while due process and equal protection violations contravene Fifth and Fourteenth Amendments. ADA Non-Compliance: Excluding individuals with disabilities from critical processes violates Title II of the ADA (42 U.S.C. § 12131) and corresponding regulations (28 C.F.R. § 35.160). FOIA Violations: Failure to comply with 5 U.S.C. § 552 undermines transparency and accountability, violating federal public records laws. Medicaid Violations: Mismanagement and non-compliance with 42 U.S.C. § 1396a jeopardize the integrity of Medicaid programs and misuse taxpayer funds.
When did this occur?	3. When Did This Occur? The actions began on December 18, 2023, following the submission of a whistleblower report by David Medeiros to state and federal agencies, including the Connecticut Department of Social Services (DSS), the Centers for Medicare & Medicaid Services (CMS), and the Department of Justice (DOJ). These



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	violations are ongoing and continue to harm individuals and vulnerable populations. Key dates include: December 2023: DSS initiated retaliatory actions against ABI Resources, including restrictions on Medicaid billing and the improper closure of Sandata EVV Ticket #539494. January 2024: ADA accommodations for David Medeiros were denied or ignored, excluding individuals with disabilities from accessing critical information, violating federal obligations. Throughout 2024: FOIA requests, including Case No. 25-00044-F, were either ignored or only partially fulfilled, failing to meet statutory requirements under FOIA. Current: As of December 3, 2024, these systemic violatio
How did you discover this action?	How Did You Discover This Action? This information was uncovered through a combination of direct personal involvement, systematic reporting, and documented evidence gathered over time. The following methods substantiate the claim: Direct Whistleblower Reports: As a whistleblower, I submitted detailed complaints to federal and state agencies, including the Department of Justice (DOJ), the Centers for Medicare & Medicaid Services (CMS), and the U.S. Office of Special Counsel (OSC). These submissions outlined critical issues, including violations of the Americans with Disabilities Act (ADA) and gross mismanagement of taxpayer funds. Freedom of Information Act (FOIA) Requests: Through persistent FOIA requests, I identified a pattern of non-compliance by Connecticut state agencies, including delayed responses, incomplete disclosures, and a refusal to provide records in ADA-compliant formats. These failures directly violate 5 U.S.C. § 552 and state FOIA statutes. Firsthand Advocacy Experience: As the founder of ABI Resources and a disability advocate, I have worked closely with individuals and families reliant on Medicaid programs. Their testimonials reveal systemic neglect, retaliation, and procedural barriers, exacerbating vulnerabilities for those protected under federal law. Data from Official Records and Financial Audits: Publicly available Medicaid reports and budget analyses suggest



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	gross waste of funds, lack of oversight, and diversion of federal resources intended for vulnerable populations. These discrepancies align with the systemic failures reported by program participants. Patterns of Retaliatory Behavior: Evidence includes premature closures of critical Medicaid service tickets (e.g., Sandata EVV Ticket #539494), unexplained termination of service authorizations, and intentional delays in resolving compliance-related issues. Agency Communications and Inconsistencies: Correspondence with key officials in DSS, CMS, and related agencies highlighted evasive practices, lack of accountability, and repeated failures to meet statutory obligations.
What additional facts support your allegation?	What Additional Facts Support Your Allegation? Patterns of Non-Compliance: Freedom of Information Act (FOIA) Violations: Persistent delays, incomplete responses, and lack of ADA-compliant communication from the Connecticut Department of Social Services (DSS), the Centers for Medicare & Medicaid Services (CMS), and other agencies. These failures directly breach federal transparency requirements under 5 U.S.C. § 552 and corresponding state FOIA laws. ADA Violations: Agencies consistently failed to provide reasonable accommodations, such as accessible documentation formats, clear communication, and timely responses. These omissions violate Title II of the ADA (42 U.S.C. § 12131) and related regulations. Mismanagement and Waste of Funds: Medicaid funds intended for vulnerable populations have been mismanaged, as evidenced by incomplete audits, lack of oversight, and misuse of federal funds. Discrepancies in financial reporting and service authorizations raise concerns of fraud and abuse under 42 U.S.C. § 1396a. Service authorizations under the Medicaid ABI Waiver Program were terminated or restricted without proper notice or justification, disproportionately impacting individuals with disabilities. Evidence of Retaliation: Retaliatory actions include premature closure of Sandata EVV Ticket #539494, unexplained denials of service authorizations, and



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	intentional delays in resolving complaints. These actions appear designed to suppress whistleblower advocacy and limit accountability. Human Impact: Vulnerable populations, including individuals with disabilities, seniors, and low-income families, face heightened risks due to systemic failures in Medicaid program administration. Denial of services, lack of transparency, and retaliatory actions exacerbate harm to already at-risk communities. Failure of Oversight and Federal Agencies: Despite detailed whistleblower reports submitted to federal agencies such as the Department of Justice (DOJ), the Office of Special Counsel (OSC), and CMS, these issues remain unresolved. Federal inaction highlights the necessity of immediate and robust intervention. Documentary Evidence: FOIA responses, internal agency communications, financial reports, and documented complaints provide a clear trail of systemic mismanagement, non-compliance, and retaliation. These records substantiate claims of gross misconduct and abuse of authority. Constitutional Violations: The actions (and inactions) of the involved agencies infringe upon fundamental constitutional protections, including: First Amendment: Suppression of whistleblower advocacy. Fifth Amendment: Denial of due process in service terminations and complaint resolutions. Fourteenth Amendment: Unequal treatment of individuals with disabilities, violating equal protection guarantees. National Implications: The issues uncovered in Connecticut's Medicaid programs may reflect broader systemic failures across federally funded healthcare programs. These findings underscore t

DISCLOSURE SUBJECTS

Name of individual you believe is responsible for the wrongdoing disclosed.

First Name	Last Name	Title	Chain of Command



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Andrea Barton Reeves	Andrea Barton Reeves	Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS)	Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS)
Matthew S. Antonetti Title: Legal Director Position in Chain of Command: Senior Legal Officer, DSS	Matthew S. Antonetti Title: Legal Director Position in Chain of Command: Senior Legal Officer, DSS	Matthew S. Antonetti Title: Legal Director Position in Chain of Command: Senior Legal Officer, DSS	Matthew S. Antonetti Title: Legal Director Position in Chain of Command: Senior Legal Officer, DSS
Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and Program Coordinator,	Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and Program Coordinator,	Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and Program Coordinator,	Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and Program Coordinator,
Michelle A. James Title: Medicaid Compliance Officer Position in Chain of Command: Oversight, Cente	Michelle A. James Title: Medicaid Compliance Officer Position in Chain of Command: Oversight, Cente	Michelle A. James Title: Medicaid Compliance Officer Position in Chain of Command: Oversight, Cente	Michelle A. James Title: Medicaid Compliance Officer Position in Chain of Command: Oversight, Cente
Emmett Nicholson Title: Senior Administrator Position in Chain	Emmett Nicholson Title: Senior Administrator Position in Chain	Emmett Nicholson Title: Senior Administrator	Emmett Nicholson Title: Senior Administrator Position in Chain of



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of Command: High-level Administrator	of Command: High-level Administrator	Position in Chain of Command: High-level Administrator	Command: High-level Administrator
William Tong Title: Attorney General Position in Chain of Command: Chief Legal Officer, State of Co	William Tong Title: Attorney General Position in Chain of Command: Chief Legal Officer, State of Co	William Tong Title: Attorney General Position in Chain of Command: Chief Legal Officer, State of Co	William Tong Title: Attorney General Position in Chain of Command: Chief Legal Officer, State of Co
Deidre S. Gifford Title: Commissioner (Former Acting) Position in Chain of Command: Past Commission	Deidre S. Gifford Title: Commissioner (Former Acting) Position in Chain of Command: Past Commission	Deidre S. Gifford Title: Commissioner (Former Acting) Position in Chain of Command: Past Commission	Deidre S. Gifford Title: Commissioner (Former Acting) Position in Chain of Command: Past Commission
Jeffrey Beckham Title: Secretary Position in Chain of Command: Head of the Connecticut Office of Po	Jeffrey Beckham Title: Secretary Position in Chain of Command: Head of the Connecticut Office of Po	Jeffrey Beckham Title: Secretary Position in Chain of Command: Head of the Connecticut Office of Po	Jeffrey Beckham Title: Secretary Position in Chain of Command: Head of the Connecticut Office of Po
Manisha Juthani, MD Title: Commissioner Position in Chain of Command: Head of the	Manisha Juthani, MD Title: Commissioner Position in Chain of Command: Head of the	Manisha Juthani, MD Title: Commissioner Position in Chain of	Manisha Juthani, MD Title: Commissioner Position in Chain of Command: Head of the Connecticut Depar



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*Denotes required fields.

Connecticut Depar	Connecticut Depar	Command: Head of the Connecticut Depar	
Xavier Becerra Title: Secretary Position in Chain of Command: Head of the U.S. Department of Health	Xavier Becerra Title: Secretary Position in Chain of Command: Head of the U.S. Department of Health	Xavier Becerra Title: Secretary Position in Chain of Command: Head of the U.S. Department of Health	Xavier Becerra Title: Secretary Position in Chain of Command: Head of the U.S. Department of Health
Chiquita Brooks- LaSure Title: Administrator Position in Chain of Command: Leader of the Centers for	Chiquita Brooks- LaSure Title: Administrator Position in Chain of Command: Leader of the Centers for	Chiquita Brooks-LaSure Title: Administrator Position in Chain of Command: Leader of the Centers for	Chiquita Brooks-LaSure Title: Administrator Position in Chain of Command: Leader of the Centers for
Sean Scanlon Title: Comptroller Position in Chain of Command: State financial officer, managing bud	Sean Scanlon Title: Comptroller Position in Chain of Command: State financial officer, managing bud	Sean Scanlon Title: Comptroller Position in Chain of Command: State financial officer, managing bud	Sean Scanlon Title: Comptroller Position in Chain of Command: State financial officer, managing bud
Martin Looney Title: Senate President Pro Tempore Position in Chain of Command: Legislative leader	Martin Looney Title: Senate President Pro Tempore Position in Chain of Command: Legislative leader	Martin Looney Title: Senate President Pro Tempore Position in Chain of Command:	Martin Looney Title: Senate President Pro Tempore Position in Chain of Command: Legislative leader



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*Denotes required fields.

		Legislative leader	
Erik Russell Title: Treasurer Position in Chain of Command: Manages Connecticut's finances, includi	Erik Russell Title: Treasurer Position in Chain of Command: Manages Connecticut's finances, includi	Erik Russell Title: Treasurer Position in Chain of Command: Manages Connecticut's finances, includi	Erik Russell Title: Treasurer Position in Chain of Command: Manages Connecticut's finances, includi
Ned Lamont Title: Governor Position in Chain of Command: Chief Executive of the State of Connecticu	Ned Lamont Title: Governor Position in Chain of Command: Chief Executive of the State of Connecticu	Ned Lamont Title: Governor Position in Chain of Command: Chief Executive of the State of Connecticu	Ned Lamont Title: Governor Position in Chain of Command: Chief Executive of the State of Connecticu
Merrick Garland Title: U.S. Attorney General Position in Chain of Command: Oversees the Department	Merrick Garland Title: U.S. Attorney General Position in Chain of Command: Oversees the Department	Merrick Garland Title: U.S. Attorney General Position in Chain of Command: Oversees the Department	Merrick Garland Title: U.S. Attorney General Position in Chain of Command: Oversees the Department
Lisa M. Gomez Title: Assistant Secretary for Employee Benefits Security Administration Position in	Lisa M. Gomez Title: Assistant Secretary for Employee Benefits Security Administration Position in	Lisa M. Gomez Title: Assistant Secretary for Employee Benefits Security Administration Position in	Lisa M. Gomez Title: Assistant Secretary for Employee Benefits Security Administration Position in
Alina M. Semo Title: Director	Alina M. Semo Title: Director	Alina M. Semo Title: Director	Alina M. Semo Title: Director Position in Chain of



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*Denotes required fields.

Position in Chain of Command: Office of Government Information Servic	Position in Chain of Command: Office of Government Information Servic	Position in Chain of Command: Office of Government Information Servic	Command: Office of Government Information Servic
Michael E. Horowitz Title: Inspector General Position in Chain of Command: Department of Justice, o	Michael E. Horowitz Title: Inspector General Position in Chain of Command: Department of Justice, o	Michael E. Horowitz Title: Inspector General Position in Chain of Command: Department of Justice, o	Michael E. Horowitz Title: Inspector General Position in Chain of Command: Department of Justice, o
Christi Grimm Title: Inspector General Position in Chain of Command: Health and Human Services (HHS	Christi Grimm Title: Inspector General Position in Chain of Command: Health and Human Services (HHS	Christi Grimm Title: Inspector General Position in Chain of Command: Health and Human Services (HHS	Christi Grimm Title: Inspector General Position in Chain of Command: Health and Human Services (HHS
Andrea Barton Reeves Title: Commissioner Position in Chain of Command: Head of DSS, responsible for	Andrea Barton Reeves Title: Commissioner Position in Chain of Command: Head of DSS, responsible for	Andrea Barton Reeves Title: Commissioner Position in Chain of Command: Head of DSS, responsible for	Andrea Barton Reeves Title: Commissioner Position in Chain of Command: Head of DSS, responsible for
Matthew S. Antonetti Title: Legal Director Position in Chain of Command:	Matthew S. Antonetti Title: Legal Director Position in Chain of Command:	Matthew S. Antonetti Title: Legal Director Position in	Matthew S. Antonetti Title: Legal Director Position in Chain of Command: Senior legal officer, resp



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*Denotes required fields.

Senior legal officer, resp	Senior legal officer, resp	Chain of Command: Senior legal officer, resp	
Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and program coordinator,	Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and program coordinator,	Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and program coordinator,	Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and program coordinator,
Michelle A. James Title: Medicaid Compliance Officer Position in Chain of Command: Responsible for	Michelle A. James Title: Medicaid Compliance Officer Position in Chain of Command: Responsible for	Michelle A. James Title: Medicaid Compliance Officer Position in Chain of Command: Responsible for	Michelle A. James Title: Medicaid Compliance Officer Position in Chain of Command: Responsible for
Emmett Nicholson Title: Senior Administrator Position in Chain of Command: High-level decision-make	Emmett Nicholson Title: Senior Administrator Position in Chain of Command: High-level decision-make	Emmett Nicholson Title: Senior Administrator Position in Chain of Command: High-level decision-make	Emmett Nicholson Title: Senior Administrator Position in Chain of Command: High-level decision-make
William Tong Title: Attorney General Position in Chain of Command: Chief legal officer of Connecticut	William Tong Title: Attorney General Position in Chain of Command: Chief legal officer of Connecticut	William Tong Title: Attorney General Position in Chain of Command: Chief legal	William Tong Title: Attorney General Position in Chain of Command: Chief legal officer of Connecticut



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*Denotes required fields.

		officer of Connecticu	
Ned Lamont Title: Governor of Connecticut Position in Chain of Command: Chief executive of the stat	Ned Lamont Title: Governor of Connecticut Position in Chain of Command: Chief executive of the stat	Ned Lamont Title: Governor of Connecticut Position in Chain of Command: Chief executive of the stat	Ned Lamont Title: Governor of Connecticut Position in Chain of Command: Chief executive of the stat
Chiquita Brooks- LaSure Title: Administrator of CMS Position in Chain of Command: Federal official o	Chiquita Brooks- LaSure Title: Administrator of CMS Position in Chain of Command: Federal official o	Chiquita Brooks-LaSure Title: Administrator of CMS Position in Chain of Command: Federal official o	Chiquita Brooks-LaSure Title: Administrator of CMS Position in Chain of Command: Federal official o
Xavier Becerra Title: Secretary of Health and Human Services Position in Chain of Command: Responsi	Xavier Becerra Title: Secretary of Health and Human Services Position in Chain of Command: Responsi	Xavier Becerra Title: Secretary of Health and Human Services Position in Chain of Command: Responsi	Xavier Becerra Title: Secretary of Health and Human Services Position in Chain of Command: Responsi
Andrea Barton Reeves Title: Commissioner Position in Chain of Command: Head of the Connecticut Depa	Andrea Barton Reeves Title: Commissioner Position in Chain of Command: Head of the Connecticut Depa	Andrea Barton Reeves Title: Commissioner Position in Chain of Command: Head of the Connecticut Depa	Andrea Barton Reeves Title: Commissioner Position in Chain of Command: Head of the Connecticut Depa



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*Denotes required fields.

Matthew S. Antonetti Title: Legal Director Position in Chain of Command: Senior Legal Officer, DSS	Matthew S. Antonetti Title: Legal Director Position in Chain of Command: Senior Legal Officer, DSS	Matthew S. Antonetti Title: Legal Director Position in Chain of Command: Senior Legal Officer, DSS	Matthew S. Antonetti Title: Legal Director Position in Chain of Command: Senior Legal Officer, DSS
Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and Program Coordinator,	Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and Program Coordinator,	Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and Program Coordinator,	Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and Program Coordinator,
Michelle A. James Title: Medicaid Compliance Officer Position in Chain of Command: Oversight, Cente	Michelle A. James Title: Medicaid Compliance Officer Position in Chain of Command: Oversight, Cente	Michelle A. James Title: Medicaid Compliance Officer Position in Chain of Command: Oversight, Cente	Michelle A. James Title: Medicaid Compliance Officer Position in Chain of Command: Oversight, Cente
Emmett Nicholson Title: Senior Administrator Position in Chain of Command: High-Level Administrator	Emmett Nicholson Title: Senior Administrator Position in Chain of Command: High-Level Administrator	Emmett Nicholson Title: Senior Administrator Position in Chain of Command: High-Level Administrator	Emmett Nicholson Title: Senior Administrator Position in Chain of Command: High-Level Administrator
William Tong Title: Attorney	William Tong Title: Attorney	William Tong Title: Attorney	William Tong Title: Attorney General, State of



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*Denotes required fields.

General, State of Connecticut Position in Chain of Command: Chief Lega	General, State of Connecticut Position in Chain of Command: Chief Lega	General, State of Connecticut Position in Chain of Command: Chief Lega	Connecticut Position in Chain of Command: Chief Lega
Ned Lamont Title: Governor, State of Connecticut Position in Chain of Command: Chief Executive of t	Ned Lamont Title: Governor, State of Connecticut Position in Chain of Command: Chief Executive of t	Ned Lamont Title: Governor, State of Connecticut Position in Chain of Command: Chief Executive of t	Ned Lamont Title: Governor, State of Connecticut Position in Chain of Command: Chief Executive of t
Xavier Becerra Title: Secretary, U.S. Department of Health and Human Services (HHS) Position in Cha	Xavier Becerra Title: Secretary, U.S. Department of Health and Human Services (HHS) Position in Cha	Xavier Becerra Title: Secretary, U.S. Department of Health and Human Services (HHS) Position in Cha	Xavier Becerra Title: Secretary, U.S. Department of Health and Human Services (HHS) Position in Cha
Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS) Positio	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS) Positio	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS) Positio	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS) Positio
Andrea Barton Reeves Title: Commissioner Position in Chain of Command:	Andrea Barton Reeves Title: Commissioner Position in Chain of Command:	Andrea Barton Reeves Title: Commissioner Position in Chain of	Andrea Barton Reeves Title: Commissioner Position in Chain of Command: Head of the Connecticut Depa



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*Denotes required fields.

Head of the Connecticut Depa	Head of the Connecticut Depa	Command: Head of the Connecticut Depa	
Matthew S. Antonetti Title: Legal Director Position in Chain of Command: Senior Legal Officer at DS	Matthew S. Antonetti Title: Legal Director Position in Chain of Command: Senior Legal Officer at DS	Matthew S. Antonetti Title: Legal Director Position in Chain of Command: Senior Legal Officer at DS	Matthew S. Antonetti Title: Legal Director Position in Chain of Command: Senior Legal Officer at DS
Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and Program Coordinator	Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and Program Coordinator	Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and Program Coordinator	Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and Program Coordinator
Michelle A. James Title: Medicaid Compliance Officer Position in Chain of Command: Oversight role w	Michelle A. James Title: Medicaid Compliance Officer Position in Chain of Command: Oversight role w	Michelle A. James Title: Medicaid Compliance Officer Position in Chain of Command: Oversight role w	Michelle A. James Title: Medicaid Compliance Officer Position in Chain of Command: Oversight role w
Emmett Nicholson Title: Senior Administrator Position in Chain of Command: High-ranking official wi	Emmett Nicholson Title: Senior Administrator Position in Chain of Command: High-ranking official wi	Emmett Nicholson Title: Senior Administrator Position in Chain of Command: High-ranking official wi	Emmett Nicholson Title: Senior Administrator Position in Chain of Command: High-ranking official wi



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*Denotes required fields.

		High-ranking official wi	
William Tong Title: Attorney General Position in Chain of Command: Chief Legal Officer for the Stat	William Tong Title: Attorney General Position in Chain of Command: Chief Legal Officer for the Stat	William Tong Title: Attorney General Position in Chain of Command: Chief Legal Officer for the Stat	William Tong Title: Attorney General Position in Chain of Command: Chief Legal Officer for the Stat
Ned Lamont Title: Governor Position in Chain of Command: Chief Executive of Connecticut, with ultim	Ned Lamont Title: Governor Position in Chain of Command: Chief Executive of Connecticut, with ultim	Ned Lamont Title: Governor Position in Chain of Command: Chief Executive of Connecticut, with ultim	Ned Lamont Title: Governor Position in Chain of Command: Chief Executive of Connecticut, with ultim
Xavier Becerra Title: Secretary, U.S. Department of Health and Human Services (HHS) Position in Cha	Xavier Becerra Title: Secretary, U.S. Department of Health and Human Services (HHS) Position in Cha	Xavier Becerra Title: Secretary, U.S. Department of Health and Human Services (HHS) Position in Cha	Xavier Becerra Title: Secretary, U.S. Department of Health and Human Services (HHS) Position in Cha
Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS) Positio	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS) Positio	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS) Positio	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS) Positio



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*Denotes required fields.

Merrick Garland Title: U.S. Attorney General Position in Chain of Command: Heads the Department of	Merrick Garland Title: U.S. Attorney General Position in Chain of Command: Heads the Department of	Merrick Garland Title: U.S. Attorney General Position in Chain of Command: Heads the Department of	Merrick Garland Title: U.S. Attorney General Position in Chain of Command: Heads the Department of
Andrea Barton Reeves Title: Commissioner Position in Chain of Command: Head of the Connecticut Depa	Andrea Barton Reeves Title: Commissioner Position in Chain of Command: Head of the Connecticut Depa	Andrea Barton Reeves Title: Commissioner Position in Chain of Command: Head of the Connecticut Depa	Andrea Barton Reeves Title: Commissioner Position in Chain of Command: Head of the Connecticut Depa
Matthew S. Antonetti Title: Legal Director Position in Chain of Command: Senior Legal Officer, DSS	Matthew S. Antonetti Title: Legal Director Position in Chain of Command: Senior Legal Officer, DSS	Matthew S. Antonetti Title: Legal Director Position in Chain of Command: Senior Legal Officer, DSS	Matthew S. Antonetti Title: Legal Director Position in Chain of Command: Senior Legal Officer, DSS
Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and Program Coordinator,	Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and Program Coordinator,	Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and Program Coordinator,	Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and Program Coordinator,
Michelle A. James Title: Medicaid Compliance	Michelle A. James Title: Medicaid Compliance	Michelle A. James Title: Medicaid	Michelle A. James Title: Medicaid Compliance



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*Denotes required fields.

Officer Position in Chain of Command: Oversight, Cente	Officer Position in Chain of Command: Oversight, Cente	Compliance Officer Position in Chain of Command: Oversight, Cente	Officer Position in Chain of Command: Oversight, Cente
Emmett Nicholson Title: Senior Administrator Position in Chain of Command: High-Level Administrator	Emmett Nicholson Title: Senior Administrator Position in Chain of Command: High-Level Administrator	Emmett Nicholson Title: Senior Administrator Position in Chain of Command: High-Level Administrator	Emmett Nicholson Title: Senior Administrator Position in Chain of Command: High-Level Administrator
William Tong Title: Attorney General Position in Chain of Command: Chief Legal Officer, State of Co	William Tong Title: Attorney General Position in Chain of Command: Chief Legal Officer, State of Co	William Tong Title: Attorney General Position in Chain of Command: Chief Legal Officer, State of Co	William Tong Title: Attorney General Position in Chain of Command: Chief Legal Officer, State of Co
Ned Lamont Title: Governor Position in Chain of Command: Chief Executive of the State of Connecticut	Ned Lamont Title: Governor Position in Chain of Command: Chief Executive of the State of Connecticut	Ned Lamont Title: Governor Position in Chain of Command: Chief Executive of the State of Connecticut	Ned Lamont Title: Governor Position in Chain of Command: Chief Executive of the State of Connecticut

REQUESTED OSC ACTION

What action would you like OSC to take?



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*Denotes required fields.

Document is attached

WHERE ELSE DID YOU REPORT THIS MATTER?

I have also disclosed this information to:

Other Action Type	Action Taken Date

Additional information about reports to Inspectors General, if applicable.

First Name: **Last Name:**

Title:

Address:

Email Address:

Telephone Number:

Case ID #:

a. **What is the status of the matter?**

NOTE: MATTERS INVESTIGATED BY AN OFFICE OF INSPECTOR GENERAL

It is the general policy of OSC not to transmit allegations of wrongdoing to the head of the agency involved if the agency's Office of Inspector General has fully investigated, or is currently investigating, the same allegations.

ATTACHMENTS

Please note that the space available for attachments is limited. Therefore, DO NOT attach every document and email that may be relevant to your claim. You will have an opportunity to make additional submissions at a later date. We recommend limiting attachments to official forms and correspondence that document the action(s) at issue in your disclosure if these documents are relevant to your allegations.

I have attached the following documents to my filing:

File Name



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12.03.2024 Request for Action Ensuring Justice Accountability and Financial Restitution for Vulnerable Populations and Taxpayers for Justice DB.42.131.Inf. ABI Medeiros Connecticut .pdf
540144-VPT 12.03.2024 Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
540144-VPT 540144-VPT Submission complete.pdf
540144-VPT DOJ Submission complete.pdf
540144-VPT 540144-VPT Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
Lamont touts pension savings_ _It's freed up an awful lot of money_.pdf
Connecticut to save \$18.5 billion from pension payoffs, according to report.pdf
Request for Federal Action Constitutional Rights ADA Non-Compliance Whistleblower Retaliation and Gross Mismanagement of Medicaid FundsFederal Representation for Justice DB.42.131.Inf. Medeiros Connecticut 12.02.2024 .pdf
599875 download.pdf
09.24.2024
Federal_Intervention_HHS_OIG_CMS_GAO_DOJ_OCR_Whistleblower_Report_2024.pdf

CONSENT

Do you consent to the disclosure of your identify to others outside OSC if it becomes necessary in taking further action on this matter?*

I consent to disclosure of my identity.

Yes

I do not consent to disclosure of my identity. (Even if you do not consent, OSC may disclose your identity if necessary due to an imminent danger to public health or safety or imminent violation of any criminal law. See 5 U.S.C. § 1213(h).)

No

CERTIFICATION

I certify that all of the statements made in this complaint are true, complete, and correct to the best of my knowledge and belief. I understand that a false statement or concealment of a material fact is a criminal offense punishable by a fine, imprisonment, or both. 18 U.S.C. § 1001.*

Yes



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BURDEN: The burden for this collection of information (including the time for reviewing instructions, searching existing data sources, gathering the data needed, and completing and reviewing the form) is estimated to be an average of one hour to submit a disclosure of information alleging agency wrongdoing, one hour and fifteen minutes to submit a complaint alleging a prohibited personnel practice or other prohibited activity, or 30 minutes to submit a complaint alleging prohibited political activity. Please send any comments about this burden estimate, and suggestions for reducing the burden, to the U.S. Office of Special Counsel, General Counsel's Office, 1730 M Street, NW, Suite 218, Washington, DC 20036-4505.

This Disclosure of Information was Received by OSC on: 12/3/2024

PLEASE KEEP A COPY OF YOUR COMPLAINT, ANY SUPPORTING DOCUMENTATION, AND ANY ADDITIONAL ALLEGATIONS THAT YOU SEND TO OSC NOW OR AT ANY TIME WHILE YOUR COMPLAINT IS PENDING. REPRODUCTION CHARGES UNDER THE FREEDOM OF INFORMATION ACT MAY APPLY TO ANY REQUEST YOU MAKE FOR COPIES OF MATERIALS THAT YOU PROVIDED TO OSC.



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IMPORTANT INFORMATION ABOUT FILING A DISCLOSURE

OSC WHISTLEBLOWER DISCLOSURE CHANNEL

Under 5 U.S.C. § 1213 and related provisions, the Office of Special Counsel (OSC) serves as a secure channel for federal employees, former federal employees, and applicants for federal employment with reliable knowledge of the wrongdoing to disclose:

- a violation of law, rule or regulation;
- gross mismanagement;
- gross waste of funds;
- an abuse of authority;
- a substantial and specific danger to public health or safety; and/or
- censorship related to scientific research.

OSC JURISDICTION

OSC has no jurisdiction over disclosures filed by:

- employees of the U.S. Postal Service and the Postal Regulatory Commission;
- members of the armed forces of the United States (*i.e.*, non-civilian military employees);
- state employees operating under federal grants;
- employees of federal contractors;
- other employees or federal agencies that are exempt under federal law; and
- Congressional or judicial branch employees.

ANONYMOUS SOURCES

While OSC will protect the identity of persons who make disclosures, it will not consider anonymous disclosures. If a disclosure is filed by an anonymous source, the disclosure will be referred to the Office of Inspector General in the appropriate agency. OSC will take no further action.

RETALIATION

Do you believe you suffered retaliation by your agency for disclosing wrongdoing? If yes, you may file a complaint of retaliation by navigating back to "My Cases" and selecting "New Complaint." Select Option 1 to complete and submit a Complaint of Prohibited Personnel Practice or other Prohibited Activity (PPPs). *If you have already completed the Complaint of Prohibited Personnel Practice or other Prohibited Activity above, please continue with this Disclosure.* PPPs are employment-related activities that are banned in the federal workforce.



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PPPs generally involve some type of personnel decision or action and may result in personal relief for people who have been subject to a PPP. For example, if we find that you were removed from federal service in retaliation for whistleblowing, OSC may act to get your job back. PPPs can also include allegations of harassment, failure to issue appraisals, and improper hiring. Do not file a disclosure to report retaliation or other PPPs.

CONTACT INFORMATION

Title:

First Name:* David

Middle Initial:

Last Name:* Medeiros

International Address?: No

Address:*

215 Mountain St
Willimantic, CT 06226

Cell Phone Number:

Home Phone Number:

Office Phone Number:

Ext.

Email Address:* aabiwr@live.com

Preferred means of contact:

Email: Yes

Cell phone: No

Home phone: No

Office phone: No

REPRESENTATIVE INFORMATION

Do you have representation? No

Information about representative, if applicable.

First Name:*

Middle Initial:

Last Name:*

International Address?:

Address: *



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Office Phone Number:

Ext.

Cell Phone Number:

Home Phone Number:

Email Address:

EMPLOYMENT INFORMATION

Name of Department/Agency about which you are making a disclosure.

Department:* Health and Human Services

Agency:* Centers For Medicare & Medicaid Services

Agency subcomponent: Office of Program Integrity or Medicaid Integrity Program

Street Address: 7500 Security Boulevard

City: Baltimore

State: MD

Zip Code: 21244

Employment Status:* Non-Federal Employee (please specify)

Title	Series	Grade

Please provide your dates of employment in this position.

Employment Service Type	Employment Service Subtype	If Other (specify)
Excepted Service	Other	Private Citizen, Advocate, and Whistleblower
Other	Other	Private Citizen, Advocate, and Whistleblower

Are you covered by a collective bargaining agreement?

DETAILS OF YOUR DISCLOSURES



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Please identify the type of wrongdoing that you are alleging. You can make multiple disclosures, but you **MUST** choose one option. If you check "violation of law, rule, or regulation," specify, if you can, the particular law, rule or regulation violated (by name, subject, and/or legal citation). For each allegation, please answer the following questions (be as specific as possible). Please keep in mind that you will have an opportunity to provide more information and someone from OSC will contact you.

If OSC determines there is a substantial likelihood of wrongdoing, OSC will refer your disclosures to the involved agency for an investigation and report. To meet the substantial likelihood standard, there must be a significant probability that the information reveals wrongdoing that falls within one or more of the categories above. In its evaluation, OSC considers the strength, reliability, and credibility of the disclosures. If the substantial likelihood determination cannot be made, OSC will determine whether there is sufficient information to exercise its discretion to refer the allegations.

DISCLOSURES

Allegation	Gross Mismanagement
What action did they take?	2. What Action Did They Take? The following details outline the actions—or failures to act—by the individuals and agencies identified, which have resulted in systemic violations of constitutional rights, ADA non-compliance, and mismanagement of taxpayer-funded programs. Connecticut Department of Social Services (DSS): Andrea Barton Reeves (Commissioner): Action: Failed to ensure compliance with federal and state laws, including the Freedom of Information Act (FOIA), by not responding to or improperly denying requests for records related to the Medicaid ABI Waiver Program and whistleblower complaints. Impact: Directly contributed to the lack of transparency and accountability in DSS operations, violating constitutional and statutory rights. Matthew S. Antonetti (Legal Director): Action: Oversaw and/or approved the improper handling of FOIA requests and ADA accommodation requests. Allowed legal barriers to obstruct whistleblower protections and public access to information. Impact: Facilitated DSS's legal non-



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	compliance, obstructing efforts to investigate systemic issues in Medicaid program management. Astread Ferron-Poole (Associate): Action: Coordinated or executed policies that limited access to public records, failed to address program deficiencies, and disregarded ADA accommodation requests. Impact: Excluded individuals with disabilities from participating in program oversight and contributed to the systemic marginalization of vulnerable populations. Centers for Medicare & Medicaid Services (CMS): Michelle A. James (Medicaid Compliance Officer): Action: Did not enforce state compliance with federal Medicaid regulations and failed to address whistleblower reports highlighting deficiencies in the ABI Waiver Program. Impact: Allowed ongoing mismanagement of taxpayer funds and neglect of federally mandated oversight responsibilities. Emmett Nicholson (Senior Administrator): Action: Failed to initiate or ensure federal investigations into reported violations, including ADA non-compliance and Medicaid fraud. Impact: Delayed accountability and perpetuated harm to individuals dependent on Medicaid services. Connecticut State Government Officials: William Tong (Attorney General): Action: Failed to provide legal oversight to enforce DSS compliance with FOIA, ADA, and whistleblower protection laws. Declined to act on or investigate whistleblower complaints effectively. Impact: Undermined public trust in government accountability and allowed constitutional violations to persist. Ned Lamont (Governor): Action: Neglected executive oversight of DSS and CMS operations, failing to ensure that state agencies complied with federal and state laws protecting taxpayers, whistleblowers, and individuals with disabilities. Impact: Facilitated systemic corruption and mismanagement of federally funded programs. Deidre S. Gifford (Former Acting Commissioner): Action: During her tenure, failed to implement effective oversight mechanisms for Medicaid programs, al
When did this occur?	Timeline of Events December 18, 2023 Event: David Medeiros submitted a whistleblower report regarding



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	systemic failures in Medicaid administration, ADA compliance, and misuse of taxpayer funds under the Connecticut Medicaid ABI Waiver Program. Implications: Triggered alleged retaliatory actions against ABI Resources and David Medeiros. March 2024 – Ongoing Event: Multiple FOIA requests were submitted by David Medeiros to Connecticut Department of Social Services (DSS) and other agencies, including CMS and DOJ, to seek transparency and records. Implications: State and federal agencies failed to acknowledge or fully respond to requests, violating FOIA timelines and transparency standards. July 2024 – Present Event: Denials of ADA accommodation requests began, including refusals to provide accessible formats and simplified communication for individuals with disabilities. Implications: Violations of Title II of the ADA and constitutional protections under the Fourteenth Amendment. Octob
How did you discover this action?	4. How Did You Discover This Action? I discovered these actions through a combination of direct experience, formal requests, and subsequent investigations: Firsthand Impact: As the founder of ABI Resources and an individual requiring ADA accommodations, I personally experienced retaliatory actions and systemic barriers when advocating for transparency and accountability within the Connecticut Medicaid Acquired Brain Injury (ABI) Waiver Program. Specific incidents included the abrupt closure of Sandata EVV Ticket #539494 and disruptions to Medicaid billing processes, which directly impacted ABI Resources and the vulnerable populations it serves. Responses to FOIA Requests: I submitted multiple Freedom of Information Act (FOIA) requests to state and federal agencies, including DSS, CMS, and DOJ, to obtain critical documentation related to Medicaid billing actions, ADA compliance, and retaliation. The lack of responses or partial and redacted responses revealed systemic non-compliance with FOIA laws (5 U.S.C. § 552). Patterns of Denial: Requests for ADA accommodations, such as accessible communication formats and simplified documentation, were routinely



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	ignored or denied, in violation of Title II of the ADA (42 U.S.C. § 12131). These denials highlighted a broader pattern of exclusionary practices impacting individuals with disabilities. Testimonies and Advocacy Reports: Testimonies from affected individuals and reports from other advocates confirmed systemic issues, including mismanagement of taxpayer funds and failure to meet federal oversight standards under 42 U.S.C. § 1396a. Public Records and Internal Communications: Limited disclosures obtained through FOIA requests and whistleblower filings exposed gross mismanagement, retaliation, and abuse of authority by state and federal agencies. Specific documents, such as internal memos and correspondence, confirmed efforts to suppress whistleblower advocacy and shield systemic failures. Persistent Escalation Attempts: Multiple attempts to resolve these issues through administrative appeals, direct communication with agency heads, and engagement with oversight bodies like the U.S. Office of Special Counsel (OSC) further revealed institutional resistance and procedural failures. By compiling this evidence, I identified a consistent and systemic failure to comply with constitutional, ADA, and FOIA mandates, directly impacting public trust, vulnerable populations, and the effective use of taxpayer funds.
What additional facts support your allegation?	Additional Facts Supporting the Allegation Documented FOIA Non-Compliance: Multiple FOIA requests submitted to the Connecticut Department of Social Services (DSS), Centers for Medicare & Medicaid Services (CMS), and related agencies have either been ignored, partially fulfilled, or improperly denied. Specific example: FOIA Case No. [Provide Specific Case Number] demonstrates DSS's failure to meet statutory response deadlines under 5 U.S.C. § 552 and Conn. Gen. Stat. § 1-210. Denials and delays were issued without clear explanations or legal citations, violating procedural transparency mandates. ADA Accommodation Failures: Requests for ADA-compliant communication formats, including email-only responses and screen-reader-



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	compatible documentation, were ignored or mishandled, violating Title II of the ADA (42 U.S.C. § 12131) and corresponding regulations (28 C.F.R. § 35.160). Examples of non-compliance include: Responses through inaccessible online portals. Failure to provide simplified summaries for complex documentation. These failures systematically excluded individuals with disabilities from participating in public processes and accessing vital information. Mismanagement of Medicaid Funds: Reports of Medicaid ABI Waiver Program mismanagement include: Arbitrary restrictions on provider billing (e.g., Sandata EVV Ticket #539494). Lack of oversight over Medicaid provider audits, complaints, and enforcement actions. Evidence includes inconsistencies in provider authorizations, unexplained billing suspensions, and non-transparent administrative decisions, potentially violating 42 U.S.C. § 1396a (State Plan Requirements). Retaliation Against Whistleblower Activities: Following the submission of a December 18, 2023, whistleblower report, retaliatory actions included: Premature closure of complaints (e.g., DSS ticketing system records). Denial of legitimate billing and operational requests by ABI Resources, impacting the organization's ability to serve Medicaid clients. Retaliation violates federal whistleblower protections under 5 U.S.C. § 2302(b)(8). Patterns of Gross Mismanagement: Public records and investigative reports reveal systemic failures in transparency and accountability across DSS and CMS. Examples include: Lack of response to multiple public complaints about Medicaid program irregularities. Delays in responding to grievances filed by individuals and organizations advocating for Medicaid accountability. Harm to Vulnerable Populations: Systemic failures disproportionately affect vulnerable groups relying on Medicaid-funded services, including: Individuals with disabilities who face barriers to accessing care and representation. Low-income families and elderly individuals whose Medicaid-supported services are



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	jeopardized by mismanagement. These failures constitute a danger to public health and safety, violating federal Medicaid regulations and broader constitutional protections. Supporting Documentation: Copies of FOIA requests, respon
Allegation	Violation of Law, Rule or Regulation
What action did they take?	What Action Did They Take? The actions taken by the individuals and entities involved demonstrate systemic non-compliance with federal and constitutional laws, causing harm to transparency, accountability, and the rights of individuals with disabilities. The following actions occurred: 1. Failure to Comply with FOIA (Freedom of Information Act) Deliberate Delays and Denials: DSS, CMS, and the Connecticut Attorney General's Office failed to provide timely responses to FOIA requests, including Case No. 25-00044-F and related inquiries. These delays constitute a violation of 5 U.S.C. § 552 and Conn. Gen. Stat. § 1-210. Partial or Non-Responsive Disclosures: Records provided were incomplete, and key documents were withheld without proper statutory justification or explanation for redactions. Misuse of the GovQA System: DSS imposed undue barriers to accessing public information by limiting multi-document FOIA requests, violating principles of transparency. 2. Violations of ADA (Americans with Disabilities Act) Refusal to Provide Reasonable Accommodations: DSS and CMS failed to provide requested ADA accommodations, such as: Accessible formats for communications. Simplified summaries for complex records. Identification of responsible personnel for accountability. Exclusionary Practices: By denying these accommodations, state and federal agencies excluded individuals with disabilities, including David Medeiros, from participating fully in public processes, violating Title II of the ADA (42 U.S.C. § 12131) and 28 C.F.R. § 35.160. 3. Retaliatory Actions Following Whistleblower Disclosures Medicaid Billing Suspension: DSS and CMS imposed unjustified restrictions on ABI Resources' Medicaid billing privileges, including



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	mishandling of Sandata EVV Ticket #539494, directly retaliating against whistleblower activities. Premature Closure of Complaints: State agencies prematurely closed complaints and whistleblower reports without conducting thorough investigations or providing transparent resolutions. Systemic Obstruction: Agencies created structural barriers to whistleblower advocacy, discouraging transparency and accountability. 4. Gross Mismanagement of Medicaid Programs Lack of Oversight: DSS failed to monitor provider compliance and spending in the Medicaid Acquired Brain Injury Waiver Program, leading to concerns about waste, fraud, and abuse of taxpayer funds under 42 U.S.C. § 1396a. Unauthorized Policy Changes: DSS terminated companion authorizations for Medicaid recipients without due process or public input, disproportionately affecting individuals with disabilities. Misuse of Federal Funds: State and federal funds allocated for social services were diverted, potentially contributing to mismanagement and systemic inequities. 5. Violations of Constitutional Rights Suppression of Whistleblower Advocacy: Agencies suppressed whistleblower efforts to expose systemic issues, infringing on First Amendment rights to petition the government. Denial of Due Proce
When did this occur?	When Did This Occur? The actions and violations occurred over a sustained period, beginning in December 2023 and continuing to the present date (December 3, 2024). Key milestones include: December 18, 2023: Whistleblower report was submitted, initiating concerns about potential retaliation, ADA violations, and mismanagement of Medicaid funds. January 2024 – March 2024: Retaliatory actions began to surface, including: Restrictions placed on Medicaid billing. Premature closure of Ticket #539494 in Sandata EVV. Failures to provide ADA accommodations for communication. April 2024 – November 2024: Continuous FOIA delays and non-compliance from Connecticut DSS, CMS, and other agencies. Specific cases include: FOIA Request Case No. 25-00044-F submitted in



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	October 2024, with no timely response or adherence to statutory deadlines. Additional FOIA requests in November 2024 ignored or denied, further compounding transparency issues. Ongoing (2023–2024): Patterns of systemic failures, includi
How did you discover this action?	Expanded Timeline with Key Milestones December 18, 2023: Whistleblower report filed with U.S. Office of Special Counsel and other federal entities regarding systemic ADA violations, FOIA non-compliance, and Medicaid mismanagement. Agencies notified include: Centers for Medicare & Medicaid Services (CMS) U.S. Department of Health and Human Services (HHS) Connecticut Department of Social Services (DSS) Office of Inspector General (OIG) January–March 2024: Agencies failed to acknowledge or act on whistleblower allegations. No responses provided to multiple requests for investigation updates, despite statutory obligations for timely communication under whistleblower protection laws and ADA requirements. April 2024: FOIA request submitted (Case No. 25-00044-F) seeking detailed Medicaid provider records and programmatic oversight documentation for the ABI Waiver Program. Request explicitly includes ADA accommodation requirements and transparency measures. May 2024: FOIA deadlines missed without statutory justification. Initial responses lack substantive information and fail to meet ADA accommodations, violating Title II of the ADA. June–October 2024: Escalation attempts to DSS Commissioner Andrea Barton Reeves and CMS administrators ignored or inadequately addressed. FOIA denials and delays continue, with no explanation or adherence to federal guidelines. November 2024: Submitted whistleblower complaints to the DOJ Civil Rights Division and other oversight entities regarding systemic failures in Connecticut’s Medicaid programs. Further FOIA requests filed for additional documentation regarding Medicaid billing restrictions and policy changes affecting vulnerable populations, including ABI Resources clients. December 2024: DOJ responds to whistleblower



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	complaint (Case No. 540144-VPT), declining action despite extensive documented violations. Federal complaint prepared for submission to the U.S. Office of Special Counsel, including detailed allegations of gross mismanagement, abuse of authority, and ADA violations. Strategic Emphasis for Maximum Impact Human Element: Highlight the suffering caused by these systemic failures. Include anonymized stories of individuals impacted by mismanagement or lack of services, particularly those with disabilities. Scale of the Issue: Frame this as a national problem: Reference over 100 state-managed programs in Connecticut facing similar challenges. Suggest that these failures reflect broader trends across federally funded Medicaid systems. Federal Responsibility: Invoke federal obligations under Medicaid statutes, FOIA, ADA, and the Whistleblower Protection Act to enforce compliance. Appeal to the Office of Special Counsel as a last resort for holding agencies accountable. Financial Stakes: Quantify the potential misuse of federal funds. Include data or estimates of how much taxpayer money has been mismanaged or improperly allocated. Tie financial mismanagement directly to failures in care for vulnerable po
What additional facts support your allegation?	Additional Facts Supporting Allegations To substantiate the allegations further, the following facts are presented with precision and legal grounding, ensuring a comprehensive narrative for your case: 1. Systemic FOIA Non-Compliance Failure to Respond to Requests: Despite submitting multiple FOIA requests (e.g., Case No. 25-00044-F), agencies like DSS and CMS failed to provide timely and complete responses, violating 5 U.S.C. § 552(a)(6)(A) and Connecticut General Statutes § 1-210. Denied ADA Accommodations: Requests for accessible formats and communication via the MuckRock platform were explicitly ignored, constituting non-compliance under 42 U.S.C. § 12131 (ADA Title II). Incomplete and Obstructive Responses: Agencies delayed or denied access to critical Medicaid program documentation,



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	undermining transparency and the public's right to information. 2. ADA Violations and Exclusionary Practices Denial of Equal Access: By failing to provide reasonable ADA accommodations for communication, such as screen-reader-compatible documents and direct email responses, DSS and CMS actively excluded individuals with disabilities from participating in public processes. Impact on Vulnerable Populations: These failures disproportionately harmed individuals reliant on Medicaid services, violating the ADA's mandate for equitable access to government programs and services. 3. Retaliation Against Whistleblowing Actions Taken Against ABI Resources: Medicaid billing restrictions and the abrupt resolution of Sandata EVV Ticket #539494 were implemented after whistleblower disclosures, reflecting a retaliatory pattern. Suppression of Advocacy: ABI Resources' efforts to expose systemic issues were met with obfuscation, delays, and financial restrictions, discouraging further whistleblower activity. 4. Gross Mismanagement of Medicaid Programs Improper Use of Federal Funds: Federal Medicaid funds intended for service delivery were mismanaged, with evidence suggesting potential redirection toward state pension liabilities, violating 42 U.S.C. § 1396a. Lack of Oversight and Audits: DSS failed to provide records of adequate program audits or actions taken against providers for complaints, creating risks of fraud, waste, and abuse. Termination of Companion Authorizations: The abrupt policy change ending companion authorizations under the ABI Waiver Program on December 31, 2023, adversely impacted program participants without proper public notice or justification. 5. Constitutional Violations Suppression of Whistleblower Advocacy: By denying records and retaliating against disclosures, agencies infringed on First Amendment rights to petition the government. Due Process Violations: DSS and CMS failed to follow proper procedures for addressing Medicaid complaints and whistleblower allegations, violating Fifth Amendment protections. Equal Protection Denied:



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	Exclusionary practices under the ADA demonstrated systemic discrimination against individuals with disabilities, contrary to
Allegation	Gross Waste of Funds
What action did they take?	2. What Action Did They Take? The individuals listed in the complaint, representing both state and federal agencies, took the following actions that led to gross waste of taxpayer funds in the Medicaid program: State-Level Actions and Omissions: Andrea Barton Reeves (Commissioner, DSS): Mismanagement of Funds: Failed to oversee the proper allocation and use of Medicaid funds within the ABI Waiver Program and other DSS-administered programs, leading to unaccounted expenditures. Negligence in Addressing Complaints: Ignored whistleblower complaints and reports of systemic inefficiencies, allowing fiscal mismanagement to continue unchecked. Failure to Implement Oversight Mechanisms: Did not enforce or improve existing financial accountability measures within DSS, enabling the misuse of funds. Matthew S. Antonetti (Legal Director, DSS): Inadequate Legal Oversight: Did not initiate or support legal action to address known financial irregularities within Medicaid programs. Complicity in Non-Compliance: Allowed systemic non-compliance with federal Medicaid regulations by failing to enforce corrective actions. Astread Ferron-Poole (Policy and Program Coordinator, DSS): Ineffective Policy Implementation: Introduced or upheld administrative policies that lacked accountability measures for fund allocation. Administrative Inefficiency: Contributed to delays and errors in Medicaid provider payments and program oversight. Federal Oversight Failures: Michelle A. James (Medicaid Compliance Officer, CMS): Failure to Conduct Audits: Neglected to ensure timely and comprehensive audits of Connecticut's Medicaid programs to identify wasteful spending. Inadequate Response to Whistleblower Complaints: Ignored documented evidence of fiscal mismanagement, further enabling the misuse of taxpayer dollars. Emmett



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	Nicholson (Senior Administrator, CMS): Lack of Federal Oversight: Did not enforce federal Medicaid regulations requiring transparency and accountability in the use of funds. Permitted Wasteful Practices: Allowed significant discrepancies in the handling of Medicaid funds to persist without intervention or corrective measures. Higher-Level Negligence: William Tong (Attorney General, State of Connecticut): Failure to Investigate: Did not pursue legal investigations into reported instances of fraud, waste, or abuse within DSS or other state agencies involved in Medicaid program administration. Lack of Enforcement: Failed to hold state officials accountable for non-compliance with federal and state financial management laws. Ned Lamont (Governor, State of Connecticut): Policy Prioritization of Pension Debt Over Social Services: Directed funds meant for vulnerable populations toward resolving state pension obligations, depriving Medicaid programs of necessary resources. Ignored Whistleblower Reports: Did not take meaningful action to address whistleblower concerns regarding financial inefficiencies in state-administered programs. Key Violations: Misappropriation
When did this occur?	3. When Did This Occur? The actions leading to the gross waste of taxpayer funds occurred over a prolonged period, beginning in December 2023 and continuing to the present day. Specific milestones include: December 18, 2023: Whistleblower complaint submitted by David Medeiros to relevant authorities, identifying systemic failures and misuse of Medicaid funds within the ABI Waiver Program. December 2023 – June 2024: Initial evidence of non-compliance with federal Medicaid regulations, including delays in addressing provider complaints and irregularities in fund allocation. March 2024: Repeated failures by state agencies, including DSS, to respond to FOIA requests seeking transparency about Medicaid fund management. Evidence surfaced that funds intended for social services were diverted toward state pension liabilities, violating the purpose of federal Medicaid funding. June 2024 – September 2024: Federal



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	oversight agencies, including CMS, failed to enforce corrective measures or c
How did you discover this action?	4. How Did You Discover This Action? The discovery of gross waste of funds resulted from a combination of direct involvement, diligent investigation, and whistleblower disclosures, including: First-Hand Observations: As the founder of ABI Resources and an active participant in the Connecticut Medicaid Acquired Brain Injury (ABI) Waiver Program, I directly observed systemic inefficiencies, administrative delays, and unexplained denials of services. These issues raised red flags about the program's integrity and management. Whistleblower Insights: Through ABI Resources' advocacy, reports surfaced from affected individuals and providers regarding improper denials of services, delayed reimbursements, and lack of accountability within the program. These issues suggested widespread mismanagement and potential misuse of funds. Freedom of Information Act (FOIA) Requests: Multiple FOIA requests were filed with Connecticut agencies, including the Department of Social Services (DSS), to obtain transparency about Medicaid fund allocations and program administration. The consistent failure to provide complete or timely responses further substantiated concerns about intentional concealment of financial mismanagement. Patterns of ADA Non-Compliance: As an individual with a traumatic brain injury, I encountered repeated failures to provide reasonable ADA accommodations in accessing Medicaid-related information. This exclusionary behavior raised questions about the equitable distribution of funds and compliance with federal regulations. Public Disclosures and Testimonies: Testimonies from other advocates, Medicaid beneficiaries, and providers corroborated widespread systemic failures, including misappropriation of federal funds intended for social services. Documented Financial Irregularities: Analysis of Connecticut's fiscal practices revealed a concerning overlap between federal Medicaid funding and state pension debt. Federal funds



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	intended for vulnerable populations appeared to be diverted to address unrelated state financial obligations, violating Medicaid's statutory purpose. Lack of Federal Oversight: Despite raising these concerns with federal oversight bodies, including the Centers for Medicare & Medicaid Services (CMS) and the U.S. Department of Health and Human Services (HHS), no substantive corrective actions were taken, allowing the wasteful practices to persist.
What additional facts support your allegation?	5. What Additional Facts Support Your Allegation? The allegation of gross waste of funds in Connecticut's Medicaid programs is supported by extensive, documented evidence of mismanagement, non-compliance with federal laws, and patterns of systemic failures. These facts include: 1. Documented FOIA Non-Compliance: Multiple FOIA requests submitted to the Connecticut Department of Social Services (DSS) and other agencies have gone unanswered or were met with incomplete responses. Case Example: FOIA Case No. 25-00044-F sought information about Medicaid provider registry records and compliance practices. DSS failed to provide a complete response, violating FOIA obligations under 5 U.S.C. § 552 and Connecticut's FOIA statutes. This lack of transparency suggests efforts to conceal financial mismanagement or non-compliance with Medicaid regulations. 2. Disparities in Medicaid Service Allocation: Beneficiaries and providers under the Medicaid ABI Waiver Program have reported delayed reimbursements, abrupt terminations of services, and inconsistent authorizations for care. Example: Companion authorizations were terminated without sufficient notice or explanation, depriving individuals with disabilities of necessary support while funds for these services remained unaccounted for. 3. Diversion of Federal Funds to State Pension Obligations: Analysis of Connecticut's budget practices revealed federal Medicaid dollars intended for vulnerable populations were used to offset state employee pension debt. Evidence: Public records and financial reports indicate that billions of dollars in



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	Medicaid allocations were indirectly funneled toward pension liabilities, violating the intended use of these federal funds under Medicaid regulations (42 U.S.C. § 1396a). 4. Widespread ADA Violations: DSS and other state agencies consistently failed to provide legally mandated accommodations for individuals with disabilities seeking to access program information. ADA Non-Compliance Examples: Denial of screen-reader-compatible documents. Refusal to embed response text directly in emails, as required for accessibility. Failure to accommodate requests submitted through platforms like MuckRock, disproportionately burdening individuals with cognitive disabilities. These failures disproportionately excluded individuals with disabilities from accessing Medicaid-funded services. 5. Whistleblower Retaliation: After raising concerns about Medicaid fund mismanagement, whistleblowers, including myself, experienced systemic retaliation. Example: Medicaid billing privileges for ABI Resources were restricted, and Sandata EVV Ticket #539494 was prematurely closed without resolution or justification. This retaliation aimed to suppress advocacy efforts and conceal ongoing wasteful practices. 6. Lack of Oversight and Accountability: Federal oversight agencies such as CMS and HHS failed to enforce compliance despite repeated reports of mismanagement. Evidence: Escalated complaints to the U.S. Department
Allegation	Danger to Public Health
What action did they take?	2. What Action Did They Take? The individuals and agencies in question engaged in systemic actions and inactions that directly endangered public health, violated federal and constitutional laws, and deprived vulnerable populations of their rights and essential services. The actions include but are not limited to: Connecticut Department of Social Services (DSS) Andrea Barton Reeves (Commissioner): Neglected Oversight: Failed to enforce appropriate management of Medicaid programs, particularly the ABI Waiver, allowing systemic inefficiencies and care denials. Denied ADA



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	Accommodations: Refused to implement necessary accommodations, violating the Americans with Disabilities Act (ADA), excluding individuals from accessing critical services. Matthew S. Antonetti (Legal Director): Blocked Transparency: Obstructed Freedom of Information Act (FOIA) requests, withholding records critical to understanding mismanagement within Medicaid programs. Suppressed Whistleblower Disclosures: Ignored reports highlighting systemic violations, allowing the continuation of practices harmful to public health. Astread Ferron-Poole (Associate): Drafted Harmful Policies: Enabled administrative decisions that led to the termination or denial of essential Medicaid services without proper oversight or accountability. Centers for Medicare & Medicaid Services (CMS) Michelle A. James (Medicaid Compliance Officer): Ignored Oversight Responsibilities: Failed to address formal complaints and enforce compliance with federal Medicaid regulations, compromising the welfare of beneficiaries. Allowed Mismanagement: Permitted Connecticut DSS to operate without adequate accountability, resulting in the denial of essential services to vulnerable populations. Emmett Nicholson (Senior Administrator): Facilitated Inefficiencies: Approved practices that undermined Medicaid service delivery, allowing systemic gaps that endangered public health. Connecticut Leadership William Tong (Attorney General): Failed to Act on Violations: Refused to investigate or enforce compliance with FOIA, ADA, and constitutional laws, enabling continued systemic failures. Legal Suppression: Declined to address whistleblower complaints, perpetuating non-compliance and public health risks. Ned Lamont (Governor): Prioritized Fiscal Policy Over Health: Focused state resources on pension liabilities and administrative overhead at the expense of federally funded Medicaid programs, depriving vulnerable populations of their entitled services. Supported Mismanagement: Enabled DSS and CMS to operate without transparency or accountability, leading



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	to service failures and misuse of public funds. Specific Harmful Actions Denial of Critical Services: Terminated Medicaid benefits, including those under the ABI Waiver Program, leaving individuals with disabilities and vulnerable populations without necessary care. Misallocation of Federal Funds: Redirected Medicaid funds intended for care delivery to unrelated state financial
When did this occur?	3. When Did This Occur? The systemic violations began on December 18, 2023, following the whistleblower report submitted to relevant state and federal agencies, including DSS, CMS, and HHS, regarding failures in Medicaid program administration. These violations remain ongoing due to persistent non-compliance with federal and state laws. Key milestones include: December 18, 2023: Submission of the whistleblower report outlining significant deficiencies in ADA compliance, FOIA transparency, and Medicaid mismanagement. January 2024 - November 2024: Subsequent FOIA requests (e.g., Case No. 25-00044-F) submitted to state and federal agencies, including DSS and CMS, detailing requests for specific documents and accommodations under Title II of the ADA (42 U.S.C. § 12131) and FOIA (5 U.S.C. § 552). February 2024: Initial responses received were incomplete, lacked ADA-compliant formats, and omitted required documentation under FOIA standards, violating 5 U.S.C. §
How did you discover this action?	The discovery of these actions occurred through a combination of direct experience, diligent investigation, and responses (or lack thereof) from state and federal agencies. Key events include: Whistleblower Advocacy and Personal Experience: As a whistleblower and advocate for individuals with disabilities, I directly observed systemic barriers, non-compliance, and retaliatory actions within Connecticut's Medicaid Acquired Brain Injury (ABI) Waiver Program. These observations were corroborated through my work with ABI Resources, assisting affected individuals who faced similar challenges in accessing services and



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	accommodations. FOIA Requests and Agency Responses: Through Freedom of Information Act (FOIA) requests (e.g., Case No. 25-00044-F) submitted between December 2023 and December 2024 to state and federal agencies, I sought documentation to verify concerns about Medicaid mismanagement, ADA violations, and retaliatory actions. Responses received from DSS, CMS, and other agencies were incomplete, delayed, or non-compliant with FOIA mandates, raising further concerns about transparency and accountability. Failure to Provide ADA-Compliant Accommodations: In attempting to navigate agency processes as an individual with disabilities, I repeatedly requested reasonable accommodations under Title II of the ADA (42 U.S.C. § 12131), including accessible communication formats and clear justifications for decisions. Agencies failed to comply, denying equitable access to information and participation in public processes. Reports from Affected Populations: Individuals and families reliant on Connecticut's Medicaid programs reported similar barriers, including denial of services, lack of accountability, and procedural delays. Their accounts provided additional evidence of systemic failures and the broader impact of agency actions. Analysis of Retaliatory Actions: Retaliatory actions, including Medicaid billing restrictions, programmatic changes, and unresolved complaints, became evident following my submission of a whistleblower report on December 18, 2023. These actions appeared targeted to suppress advocacy and silence scrutiny, in violation of First Amendment protections. Independent Research and Public Records: Research into Medicaid program audits, public complaints, and agency communications revealed patterns of mismanagement, waste, and potential fraud. These findings were consistent with the systemic issues I encountered. Supporting Evidence: Documentation of FOIA requests and responses demonstrating non-compliance with 5 U.S.C. § 552. Correspondence requesting ADA accommodations, which agencies



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	ignored or denied, violating 42 U.S.C. § 12131. Witness accounts from affected individuals and families corroborating systemic harm and inequities. Records of retaliatory actions following the whistleblower report, further evidencing agency misconduct.
What additional facts support your allegation?	5. What Additional Facts Support Your Allegation? Systemic Non-Compliance with FOIA and ADA FOIA Violations: Numerous FOIA requests submitted to state and federal agencies, including the Connecticut Department of Social Services (DSS), Centers for Medicare & Medicaid Services (CMS), and U.S. Department of Justice (DOJ), have gone unanswered or been responded to inadequately, violating 5 U.S.C. § 552. For example: Case No. 25-00044-F remains unfulfilled, with critical records withheld or delayed beyond statutory timelines. Denials of information have been issued without detailed justifications citing applicable statutory exemptions. ADA Non-Compliance: Requests for ADA accommodations, such as simplified communication formats, screen-reader compatible records, and named points of contact, were ignored. This violates Title II of the ADA (42 U.S.C. § 12131) and 28 C.F.R. § 35.160, effectively excluding individuals with disabilities from accessing public records. Failure to Provide Reasonable Accommodations: Repeated requests for accommodation were either denied or met with vague responses, causing unnecessary barriers for individuals with disabilities and violating the mandate for equal access. Retaliatory Actions and Programmatic Failures Targeted Retaliation: After submitting a whistleblower report on December 18, 2023, the Connecticut Department of Social Services implemented punitive measures, including: Restrictions on Medicaid billing for ABI Resources. Premature closure of Ticket #539494 without resolution or justification. These actions are demonstrably retaliatory and violate whistleblower protections under 5 U.S.C. § 2302. Medicaid Waiver Program Mismanagement: Termination of critical companion authorizations under the ABI Waiver Program



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	disproportionately impacted vulnerable populations. Changes were implemented without transparency, notice, or proper justification. Gross Waste and Mismanagement of Funds Federal Medicaid Funds Misallocated: Federal Medicaid funds appear to have been diverted for purposes unrelated to healthcare, such as funding pension liabilities. This violates 42 U.S.C. § 1396a, which mandates proper use of federal funds for medical assistance. Inefficiencies and Lack of Oversight: Internal audits and public records reveal systemic inefficiencies in Medicaid program administration, resulting in waste, fraud, and misuse of taxpayer dollars. Constitutional Violations First Amendment: Retaliatory actions against whistleblowing efforts directly infringe on First Amendment rights to petition the government and engage in advocacy. Due Process and Equal Protection: Procedural inequities, including denial of access to informat
Allegation	Abuse of Authority
What action did they take?	Abuse of Authority: What Action Did They Take? Targeted Retaliatory Actions: Connecticut Department of Social Services (DSS), under Commissioner Andrea Barton Reeves, implemented billing restrictions and terminated Medicaid program authorizations, particularly targeting ABI Resources. These actions followed David Medeiros' whistleblower reports, suggesting retaliation rather than legitimate regulatory compliance. Non-Compliance with FOIA and ADA: State and federal officials failed to respond to Freedom of Information Act (FOIA) requests within statutory timelines, denying transparency about Medicaid program decisions and fund usage. DSS ignored legally mandated ADA accommodations, excluding individuals with disabilities, including David Medeiros, from accessing critical information and services. Mismanagement of Medicaid Resources: Policies and practices implemented by DSS and CMS officials resulted in systemic inefficiencies, waste, and potential fraud in Medicaid programs. Federal oversight agencies, including CMS and HHS, failed to enforce



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	compliance with Medicaid and ADA regulations, exacerbating harm to vulnerable populations. Neglect of Oversight and Enforcement: Federal officials, including Michelle A. James and Emmett Nicholson at CMS, neglected their responsibilities to monitor state Medicaid operations. State officials failed to conduct meaningful investigations or audits, allowing systemic issues to persist. Suppressing Accountability: The Attorney General's Office actively defended state agencies against credible federal complaints instead of ensuring adherence to laws and addressing systemic abuses. Governor Lamont's administration publicly minimized the impact of these failures, prioritizing other financial commitments over correcting systemic violations in Medicaid programs. Creating Systemic Barriers: Officials implemented policies requiring excessive documentation, burdensome processes, and restrictive parameters for FOIA requests and Medicaid program access, disproportionately impacting individuals with disabilities and whistleblowers. Why These Actions Violate Laws and Protections: Constitutional Violations: Suppression of whistleblower advocacy infringes upon First Amendment rights, while due process and equal protection violations contravene Fifth and Fourteenth Amendments. ADA Non-Compliance: Excluding individuals with disabilities from critical processes violates Title II of the ADA (42 U.S.C. § 12131) and corresponding regulations (28 C.F.R. § 35.160). FOIA Violations: Failure to comply with 5 U.S.C. § 552 undermines transparency and accountability, violating federal public records laws. Medicaid Violations: Mismanagement and non-compliance with 42 U.S.C. § 1396a jeopardize the integrity of Medicaid programs and misuse taxpayer funds.
When did this occur?	3. When Did This Occur? The actions began on December 18, 2023, following the submission of a whistleblower report by David Medeiros to state and federal agencies, including the Connecticut Department of Social Services (DSS), the Centers for Medicare & Medicaid Services (CMS), and the Department of Justice (DOJ). These



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	violations are ongoing and continue to harm individuals and vulnerable populations. Key dates include: December 2023: DSS initiated retaliatory actions against ABI Resources, including restrictions on Medicaid billing and the improper closure of Sandata EVV Ticket #539494. January 2024: ADA accommodations for David Medeiros were denied or ignored, excluding individuals with disabilities from accessing critical information, violating federal obligations. Throughout 2024: FOIA requests, including Case No. 25-00044-F, were either ignored or only partially fulfilled, failing to meet statutory requirements under FOIA. Current: As of December 3, 2024, these systemic violatio
How did you discover this action?	How Did You Discover This Action? This information was uncovered through a combination of direct personal involvement, systematic reporting, and documented evidence gathered over time. The following methods substantiate the claim: Direct Whistleblower Reports: As a whistleblower, I submitted detailed complaints to federal and state agencies, including the Department of Justice (DOJ), the Centers for Medicare & Medicaid Services (CMS), and the U.S. Office of Special Counsel (OSC). These submissions outlined critical issues, including violations of the Americans with Disabilities Act (ADA) and gross mismanagement of taxpayer funds. Freedom of Information Act (FOIA) Requests: Through persistent FOIA requests, I identified a pattern of non-compliance by Connecticut state agencies, including delayed responses, incomplete disclosures, and a refusal to provide records in ADA-compliant formats. These failures directly violate 5 U.S.C. § 552 and state FOIA statutes. Firsthand Advocacy Experience: As the founder of ABI Resources and a disability advocate, I have worked closely with individuals and families reliant on Medicaid programs. Their testimonials reveal systemic neglect, retaliation, and procedural barriers, exacerbating vulnerabilities for those protected under federal law. Data from Official Records and Financial Audits: Publicly available Medicaid reports and budget analyses suggest



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	gross waste of funds, lack of oversight, and diversion of federal resources intended for vulnerable populations. These discrepancies align with the systemic failures reported by program participants. Patterns of Retaliatory Behavior: Evidence includes premature closures of critical Medicaid service tickets (e.g., Sandata EVV Ticket #539494), unexplained termination of service authorizations, and intentional delays in resolving compliance-related issues. Agency Communications and Inconsistencies: Correspondence with key officials in DSS, CMS, and related agencies highlighted evasive practices, lack of accountability, and repeated failures to meet statutory obligations.
What additional facts support your allegation?	What Additional Facts Support Your Allegation? Patterns of Non-Compliance: Freedom of Information Act (FOIA) Violations: Persistent delays, incomplete responses, and lack of ADA-compliant communication from the Connecticut Department of Social Services (DSS), the Centers for Medicare & Medicaid Services (CMS), and other agencies. These failures directly breach federal transparency requirements under 5 U.S.C. § 552 and corresponding state FOIA laws. ADA Violations: Agencies consistently failed to provide reasonable accommodations, such as accessible documentation formats, clear communication, and timely responses. These omissions violate Title II of the ADA (42 U.S.C. § 12131) and related regulations. Mismanagement and Waste of Funds: Medicaid funds intended for vulnerable populations have been mismanaged, as evidenced by incomplete audits, lack of oversight, and misuse of federal funds. Discrepancies in financial reporting and service authorizations raise concerns of fraud and abuse under 42 U.S.C. § 1396a. Service authorizations under the Medicaid ABI Waiver Program were terminated or restricted without proper notice or justification, disproportionately impacting individuals with disabilities. Evidence of Retaliation: Retaliatory actions include premature closure of Sandata EVV Ticket #539494, unexplained denials of service authorizations, and



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	intentional delays in resolving complaints. These actions appear designed to suppress whistleblower advocacy and limit accountability. Human Impact: Vulnerable populations, including individuals with disabilities, seniors, and low-income families, face heightened risks due to systemic failures in Medicaid program administration. Denial of services, lack of transparency, and retaliatory actions exacerbate harm to already at-risk communities. Failure of Oversight and Federal Agencies: Despite detailed whistleblower reports submitted to federal agencies such as the Department of Justice (DOJ), the Office of Special Counsel (OSC), and CMS, these issues remain unresolved. Federal inaction highlights the necessity of immediate and robust intervention. Documentary Evidence: FOIA responses, internal agency communications, financial reports, and documented complaints provide a clear trail of systemic mismanagement, non-compliance, and retaliation. These records substantiate claims of gross misconduct and abuse of authority. Constitutional Violations: The actions (and inactions) of the involved agencies infringe upon fundamental constitutional protections, including: First Amendment: Suppression of whistleblower advocacy. Fifth Amendment: Denial of due process in service terminations and complaint resolutions. Fourteenth Amendment: Unequal treatment of individuals with disabilities, violating equal protection guarantees. National Implications: The issues uncovered in Connecticut's Medicaid programs may reflect broader systemic failures across federally funded healthcare programs. These findings underscore t

DISCLOSURE SUBJECTS

Name of individual you believe is responsible for the wrongdoing disclosed.

First Name	Last Name	Title	Chain of Command



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Andrea Barton Reeves	Andrea Barton Reeves	Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS)	Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS)
Matthew S. Antonetti Title: Legal Director Position in Chain of Command: Senior Legal Officer, DSS	Matthew S. Antonetti Title: Legal Director Position in Chain of Command: Senior Legal Officer, DSS	Matthew S. Antonetti Title: Legal Director Position in Chain of Command: Senior Legal Officer, DSS	Matthew S. Antonetti Title: Legal Director Position in Chain of Command: Senior Legal Officer, DSS
Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and Program Coordinator,	Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and Program Coordinator,	Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and Program Coordinator,	Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and Program Coordinator,
Michelle A. James Title: Medicaid Compliance Officer Position in Chain of Command: Oversight, Cente	Michelle A. James Title: Medicaid Compliance Officer Position in Chain of Command: Oversight, Cente	Michelle A. James Title: Medicaid Compliance Officer Position in Chain of Command: Oversight, Cente	Michelle A. James Title: Medicaid Compliance Officer Position in Chain of Command: Oversight, Cente
Emmett Nicholson Title: Senior Administrator Position in Chain	Emmett Nicholson Title: Senior Administrator Position in Chain	Emmett Nicholson Title: Senior Administrator	Emmett Nicholson Title: Senior Administrator Position in Chain of



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of Command: High-level Administrator	of Command: High-level Administrator	Position in Chain of Command: High-level Administrator	Command: High-level Administrator
William Tong Title: Attorney General Position in Chain of Command: Chief Legal Officer, State of Co	William Tong Title: Attorney General Position in Chain of Command: Chief Legal Officer, State of Co	William Tong Title: Attorney General Position in Chain of Command: Chief Legal Officer, State of Co	William Tong Title: Attorney General Position in Chain of Command: Chief Legal Officer, State of Co
Deidre S. Gifford Title: Commissioner (Former Acting) Position in Chain of Command: Past Commission	Deidre S. Gifford Title: Commissioner (Former Acting) Position in Chain of Command: Past Commission	Deidre S. Gifford Title: Commissioner (Former Acting) Position in Chain of Command: Past Commission	Deidre S. Gifford Title: Commissioner (Former Acting) Position in Chain of Command: Past Commission
Jeffrey Beckham Title: Secretary Position in Chain of Command: Head of the Connecticut Office of Po	Jeffrey Beckham Title: Secretary Position in Chain of Command: Head of the Connecticut Office of Po	Jeffrey Beckham Title: Secretary Position in Chain of Command: Head of the Connecticut Office of Po	Jeffrey Beckham Title: Secretary Position in Chain of Command: Head of the Connecticut Office of Po
Manisha Juthani, MD Title: Commissioner Position in Chain of Command: Head of the	Manisha Juthani, MD Title: Commissioner Position in Chain of Command: Head of the	Manisha Juthani, MD Title: Commissioner Position in Chain of	Manisha Juthani, MD Title: Commissioner Position in Chain of Command: Head of the Connecticut Depar



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Connecticut Depar	Connecticut Depar	Command: Head of the Connecticut Depar	
Xavier Becerra Title: Secretary Position in Chain of Command: Head of the U.S. Department of Health	Xavier Becerra Title: Secretary Position in Chain of Command: Head of the U.S. Department of Health	Xavier Becerra Title: Secretary Position in Chain of Command: Head of the U.S. Department of Health	Xavier Becerra Title: Secretary Position in Chain of Command: Head of the U.S. Department of Health
Chiquita Brooks- LaSure Title: Administrator Position in Chain of Command: Leader of the Centers for	Chiquita Brooks- LaSure Title: Administrator Position in Chain of Command: Leader of the Centers for	Chiquita Brooks-LaSure Title: Administrator Position in Chain of Command: Leader of the Centers for	Chiquita Brooks-LaSure Title: Administrator Position in Chain of Command: Leader of the Centers for
Sean Scanlon Title: Comptroller Position in Chain of Command: State financial officer, managing bud	Sean Scanlon Title: Comptroller Position in Chain of Command: State financial officer, managing bud	Sean Scanlon Title: Comptroller Position in Chain of Command: State financial officer, managing bud	Sean Scanlon Title: Comptroller Position in Chain of Command: State financial officer, managing bud
Martin Looney Title: Senate President Pro Tempore Position in Chain of Command: Legislative leader	Martin Looney Title: Senate President Pro Tempore Position in Chain of Command: Legislative leader	Martin Looney Title: Senate President Pro Tempore Position in Chain of Command:	Martin Looney Title: Senate President Pro Tempore Position in Chain of Command: Legislative leader



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		Legislative leader	
Erik Russell Title: Treasurer Position in Chain of Command: Manages Connecticut's finances, includi	Erik Russell Title: Treasurer Position in Chain of Command: Manages Connecticut's finances, includi	Erik Russell Title: Treasurer Position in Chain of Command: Manages Connecticut's finances, includi	Erik Russell Title: Treasurer Position in Chain of Command: Manages Connecticut's finances, includi
Ned Lamont Title: Governor Position in Chain of Command: Chief Executive of the State of Connecticu	Ned Lamont Title: Governor Position in Chain of Command: Chief Executive of the State of Connecticu	Ned Lamont Title: Governor Position in Chain of Command: Chief Executive of the State of Connecticu	Ned Lamont Title: Governor Position in Chain of Command: Chief Executive of the State of Connecticu
Merrick Garland Title: U.S. Attorney General Position in Chain of Command: Oversees the Department	Merrick Garland Title: U.S. Attorney General Position in Chain of Command: Oversees the Department	Merrick Garland Title: U.S. Attorney General Position in Chain of Command: Oversees the Department	Merrick Garland Title: U.S. Attorney General Position in Chain of Command: Oversees the Department
Lisa M. Gomez Title: Assistant Secretary for Employee Benefits Security Administration Position in	Lisa M. Gomez Title: Assistant Secretary for Employee Benefits Security Administration Position in	Lisa M. Gomez Title: Assistant Secretary for Employee Benefits Security Administration Position in	Lisa M. Gomez Title: Assistant Secretary for Employee Benefits Security Administration Position in
Alina M. Semo Title: Director	Alina M. Semo Title: Director	Alina M. Semo Title: Director	Alina M. Semo Title: Director Position in Chain of



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Position in Chain of Command: Office of Government Information Servic	Position in Chain of Command: Office of Government Information Servic	Position in Chain of Command: Office of Government Information Servic	Command: Office of Government Information Servic
Michael E. Horowitz Title: Inspector General Position in Chain of Command: Department of Justice, o	Michael E. Horowitz Title: Inspector General Position in Chain of Command: Department of Justice, o	Michael E. Horowitz Title: Inspector General Position in Chain of Command: Department of Justice, o	Michael E. Horowitz Title: Inspector General Position in Chain of Command: Department of Justice, o
Christi Grimm Title: Inspector General Position in Chain of Command: Health and Human Services (HHS	Christi Grimm Title: Inspector General Position in Chain of Command: Health and Human Services (HHS	Christi Grimm Title: Inspector General Position in Chain of Command: Health and Human Services (HHS	Christi Grimm Title: Inspector General Position in Chain of Command: Health and Human Services (HHS
Andrea Barton Reeves Title: Commissioner Position in Chain of Command: Head of DSS, responsible for	Andrea Barton Reeves Title: Commissioner Position in Chain of Command: Head of DSS, responsible for	Andrea Barton Reeves Title: Commissioner Position in Chain of Command: Head of DSS, responsible for	Andrea Barton Reeves Title: Commissioner Position in Chain of Command: Head of DSS, responsible for
Matthew S. Antonetti Title: Legal Director Position in Chain of Command:	Matthew S. Antonetti Title: Legal Director Position in Chain of Command:	Matthew S. Antonetti Title: Legal Director Position in	Matthew S. Antonetti Title: Legal Director Position in Chain of Command: Senior legal officer, resp



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Senior legal officer, resp	Senior legal officer, resp	Chain of Command: Senior legal officer, resp	
Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and program coordinator,	Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and program coordinator,	Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and program coordinator,	Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and program coordinator,
Michelle A. James Title: Medicaid Compliance Officer Position in Chain of Command: Responsible for	Michelle A. James Title: Medicaid Compliance Officer Position in Chain of Command: Responsible for	Michelle A. James Title: Medicaid Compliance Officer Position in Chain of Command: Responsible for	Michelle A. James Title: Medicaid Compliance Officer Position in Chain of Command: Responsible for
Emmett Nicholson Title: Senior Administrator Position in Chain of Command: High-level decision-make	Emmett Nicholson Title: Senior Administrator Position in Chain of Command: High-level decision-make	Emmett Nicholson Title: Senior Administrator Position in Chain of Command: High-level decision-make	Emmett Nicholson Title: Senior Administrator Position in Chain of Command: High-level decision-make
William Tong Title: Attorney General Position in Chain of Command: Chief legal officer of Connecticut	William Tong Title: Attorney General Position in Chain of Command: Chief legal officer of Connecticut	William Tong Title: Attorney General Position in Chain of Command: Chief legal	William Tong Title: Attorney General Position in Chain of Command: Chief legal officer of Connecticut



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		officer of Connecticu	
Ned Lamont Title: Governor of Connecticut Position in Chain of Command: Chief executive of the stat	Ned Lamont Title: Governor of Connecticut Position in Chain of Command: Chief executive of the stat	Ned Lamont Title: Governor of Connecticut Position in Chain of Command: Chief executive of the stat	Ned Lamont Title: Governor of Connecticut Position in Chain of Command: Chief executive of the stat
Chiquita Brooks- LaSure Title: Administrator of CMS Position in Chain of Command: Federal official o	Chiquita Brooks- LaSure Title: Administrator of CMS Position in Chain of Command: Federal official o	Chiquita Brooks-LaSure Title: Administrator of CMS Position in Chain of Command: Federal official o	Chiquita Brooks-LaSure Title: Administrator of CMS Position in Chain of Command: Federal official o
Xavier Becerra Title: Secretary of Health and Human Services Position in Chain of Command: Responsi	Xavier Becerra Title: Secretary of Health and Human Services Position in Chain of Command: Responsi	Xavier Becerra Title: Secretary of Health and Human Services Position in Chain of Command: Responsi	Xavier Becerra Title: Secretary of Health and Human Services Position in Chain of Command: Responsi
Andrea Barton Reeves Title: Commissioner Position in Chain of Command: Head of the Connecticut Depa	Andrea Barton Reeves Title: Commissioner Position in Chain of Command: Head of the Connecticut Depa	Andrea Barton Reeves Title: Commissioner Position in Chain of Command: Head of the Connecticut Depa	Andrea Barton Reeves Title: Commissioner Position in Chain of Command: Head of the Connecticut Depa



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Matthew S. Antonetti Title: Legal Director Position in Chain of Command: Senior Legal Officer, DSS	Matthew S. Antonetti Title: Legal Director Position in Chain of Command: Senior Legal Officer, DSS	Matthew S. Antonetti Title: Legal Director Position in Chain of Command: Senior Legal Officer, DSS	Matthew S. Antonetti Title: Legal Director Position in Chain of Command: Senior Legal Officer, DSS
Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and Program Coordinator,	Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and Program Coordinator,	Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and Program Coordinator,	Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and Program Coordinator,
Michelle A. James Title: Medicaid Compliance Officer Position in Chain of Command: Oversight, Cente	Michelle A. James Title: Medicaid Compliance Officer Position in Chain of Command: Oversight, Cente	Michelle A. James Title: Medicaid Compliance Officer Position in Chain of Command: Oversight, Cente	Michelle A. James Title: Medicaid Compliance Officer Position in Chain of Command: Oversight, Cente
Emmett Nicholson Title: Senior Administrator Position in Chain of Command: High-Level Administrator	Emmett Nicholson Title: Senior Administrator Position in Chain of Command: High-Level Administrator	Emmett Nicholson Title: Senior Administrator Position in Chain of Command: High-Level Administrator	Emmett Nicholson Title: Senior Administrator Position in Chain of Command: High-Level Administrator
William Tong Title: Attorney	William Tong Title: Attorney	William Tong Title: Attorney	William Tong Title: Attorney General, State of



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General, State of Connecticut Position in Chain of Command: Chief Lega	General, State of Connecticut Position in Chain of Command: Chief Lega	General, State of Connecticut Position in Chain of Command: Chief Lega	Connecticut Position in Chain of Command: Chief Lega
Ned Lamont Title: Governor, State of Connecticut Position in Chain of Command: Chief Executive of t	Ned Lamont Title: Governor, State of Connecticut Position in Chain of Command: Chief Executive of t	Ned Lamont Title: Governor, State of Connecticut Position in Chain of Command: Chief Executive of t	Ned Lamont Title: Governor, State of Connecticut Position in Chain of Command: Chief Executive of t
Xavier Becerra Title: Secretary, U.S. Department of Health and Human Services (HHS) Position in Cha	Xavier Becerra Title: Secretary, U.S. Department of Health and Human Services (HHS) Position in Cha	Xavier Becerra Title: Secretary, U.S. Department of Health and Human Services (HHS) Position in Cha	Xavier Becerra Title: Secretary, U.S. Department of Health and Human Services (HHS) Position in Cha
Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS) Positio	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS) Positio	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS) Positio	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS) Positio
Andrea Barton Reeves Title: Commissioner Position in Chain of Command:	Andrea Barton Reeves Title: Commissioner Position in Chain of Command:	Andrea Barton Reeves Title: Commissioner Position in Chain of	Andrea Barton Reeves Title: Commissioner Position in Chain of Command: Head of the Connecticut Depa



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Head of the Connecticut Depa	Head of the Connecticut Depa	Command: Head of the Connecticut Depa	
Matthew S. Antonetti Title: Legal Director Position in Chain of Command: Senior Legal Officer at DS	Matthew S. Antonetti Title: Legal Director Position in Chain of Command: Senior Legal Officer at DS	Matthew S. Antonetti Title: Legal Director Position in Chain of Command: Senior Legal Officer at DS	Matthew S. Antonetti Title: Legal Director Position in Chain of Command: Senior Legal Officer at DS
Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and Program Coordinator	Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and Program Coordinator	Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and Program Coordinator	Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and Program Coordinator
Michelle A. James Title: Medicaid Compliance Officer Position in Chain of Command: Oversight role w	Michelle A. James Title: Medicaid Compliance Officer Position in Chain of Command: Oversight role w	Michelle A. James Title: Medicaid Compliance Officer Position in Chain of Command: Oversight role w	Michelle A. James Title: Medicaid Compliance Officer Position in Chain of Command: Oversight role w
Emmett Nicholson Title: Senior Administrator Position in Chain of Command: High-ranking official wi	Emmett Nicholson Title: Senior Administrator Position in Chain of Command: High-ranking official wi	Emmett Nicholson Title: Senior Administrator Position in Chain of Command: High-ranking official wi	Emmett Nicholson Title: Senior Administrator Position in Chain of Command: High-ranking official wi



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*Denotes required fields.

		High-ranking official wi	
William Tong Title: Attorney General Position in Chain of Command: Chief Legal Officer for the Stat	William Tong Title: Attorney General Position in Chain of Command: Chief Legal Officer for the Stat	William Tong Title: Attorney General Position in Chain of Command: Chief Legal Officer for the Stat	William Tong Title: Attorney General Position in Chain of Command: Chief Legal Officer for the Stat
Ned Lamont Title: Governor Position in Chain of Command: Chief Executive of Connecticut, with ultim	Ned Lamont Title: Governor Position in Chain of Command: Chief Executive of Connecticut, with ultim	Ned Lamont Title: Governor Position in Chain of Command: Chief Executive of Connecticut, with ultim	Ned Lamont Title: Governor Position in Chain of Command: Chief Executive of Connecticut, with ultim
Xavier Becerra Title: Secretary, U.S. Department of Health and Human Services (HHS) Position in Cha	Xavier Becerra Title: Secretary, U.S. Department of Health and Human Services (HHS) Position in Cha	Xavier Becerra Title: Secretary, U.S. Department of Health and Human Services (HHS) Position in Cha	Xavier Becerra Title: Secretary, U.S. Department of Health and Human Services (HHS) Position in Cha
Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS) Positio	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS) Positio	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS) Positio	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS) Positio



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Merrick Garland Title: U.S. Attorney General Position in Chain of Command: Heads the Department of	Merrick Garland Title: U.S. Attorney General Position in Chain of Command: Heads the Department of	Merrick Garland Title: U.S. Attorney General Position in Chain of Command: Heads the Department of	Merrick Garland Title: U.S. Attorney General Position in Chain of Command: Heads the Department of
Andrea Barton Reeves Title: Commissioner Position in Chain of Command: Head of the Connecticut Depa	Andrea Barton Reeves Title: Commissioner Position in Chain of Command: Head of the Connecticut Depa	Andrea Barton Reeves Title: Commissioner Position in Chain of Command: Head of the Connecticut Depa	Andrea Barton Reeves Title: Commissioner Position in Chain of Command: Head of the Connecticut Depa
Matthew S. Antonetti Title: Legal Director Position in Chain of Command: Senior Legal Officer, DSS	Matthew S. Antonetti Title: Legal Director Position in Chain of Command: Senior Legal Officer, DSS	Matthew S. Antonetti Title: Legal Director Position in Chain of Command: Senior Legal Officer, DSS	Matthew S. Antonetti Title: Legal Director Position in Chain of Command: Senior Legal Officer, DSS
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Michelle A. James Title: Medicaid Compliance	Michelle A. James Title: Medicaid Compliance	Michelle A. James Title: Medicaid	Michelle A. James Title: Medicaid Compliance



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Officer Position in Chain of Command: Oversight, Cente	Officer Position in Chain of Command: Oversight, Cente	Compliance Officer Position in Chain of Command: Oversight, Cente	Officer Position in Chain of Command: Oversight, Cente
Emmett Nicholson Title: Senior Administrator Position in Chain of Command: High-Level Administrator	Emmett Nicholson Title: Senior Administrator Position in Chain of Command: High-Level Administrator	Emmett Nicholson Title: Senior Administrator Position in Chain of Command: High-Level Administrator	Emmett Nicholson Title: Senior Administrator Position in Chain of Command: High-Level Administrator
William Tong Title: Attorney General Position in Chain of Command: Chief Legal Officer, State of Co	William Tong Title: Attorney General Position in Chain of Command: Chief Legal Officer, State of Co	William Tong Title: Attorney General Position in Chain of Command: Chief Legal Officer, State of Co	William Tong Title: Attorney General Position in Chain of Command: Chief Legal Officer, State of Co
Ned Lamont Title: Governor Position in Chain of Command: Chief Executive of the State of Connecticut	Ned Lamont Title: Governor Position in Chain of Command: Chief Executive of the State of Connecticut	Ned Lamont Title: Governor Position in Chain of Command: Chief Executive of the State of Connecticut	Ned Lamont Title: Governor Position in Chain of Command: Chief Executive of the State of Connecticut

REQUESTED OSC ACTION

What action would you like OSC to take?



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*Denotes required fields.

Document is attached

WHERE ELSE DID YOU REPORT THIS MATTER?

I have also disclosed this information to:

Other Action Type	Action Taken Date

Additional information about reports to Inspectors General, if applicable.

First Name: **Last Name:**

Title:

Address:

Email Address:

Telephone Number:

Case ID #:

a. **What is the status of the matter?**

NOTE: MATTERS INVESTIGATED BY AN OFFICE OF INSPECTOR GENERAL

It is the general policy of OSC not to transmit allegations of wrongdoing to the head of the agency involved if the agency's Office of Inspector General has fully investigated, or is currently investigating, the same allegations.

ATTACHMENTS

Please note that the space available for attachments is limited. Therefore, DO NOT attach every document and email that may be relevant to your claim. You will have an opportunity to make additional submissions at a later date. We recommend limiting attachments to official forms and correspondence that document the action(s) at issue in your disclosure if these documents are relevant to your allegations.

I have attached the following documents to my filing:

File Name



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12.03.2024 Request for Action Ensuring Justice Accountability and Financial Restitution for Vulnerable Populations and Taxpayers for Justice DB.42.131.Inf. ABI Medeiros Connecticut .pdf
540144-VPT 12.03.2024 Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
540144-VPT 540144-VPT Submission complete.pdf
540144-VPT DOJ Submission complete.pdf
540144-VPT 540144-VPT Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
Lamont touts pension savings_ _It's freed up an awful lot of money_.pdf
Connecticut to save \$18.5 billion from pension payoffs, according to report.pdf
Request for Federal Action Constitutional Rights ADA Non-Compliance Whistleblower Retaliation and Gross Mismanagement of Medicaid FundsFederal Representation for Justice DB.42.131.Inf. Medeiros Connecticut 12.02.2024 .pdf
599875 download.pdf
09.24.2024
Federal_Intervention_HHS_OIG_CMS_GAO_DOJ_OCR_Whistleblower_Report_2024.pdf

CONSENT

Do you consent to the disclosure of your identify to others outside OSC if it becomes necessary in taking further action on this matter?*

I consent to disclosure of my identity.

Yes

I do not consent to disclosure of my identity. (Even if you do not consent, OSC may disclose your identity if necessary due to an imminent danger to public health or safety or imminent violation of any criminal law. See 5 U.S.C. § 1213(h).)

No

CERTIFICATION

I certify that all of the statements made in this complaint are true, complete, and correct to the best of my knowledge and belief. I understand that a false statement or concealment of a material fact is a criminal offense punishable by a fine, imprisonment, or both. 18 U.S.C. § 1001.*

Yes



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BURDEN: The burden for this collection of information (including the time for reviewing instructions, searching existing data sources, gathering the data needed, and completing and reviewing the form) is estimated to be an average of one hour to submit a disclosure of information alleging agency wrongdoing, one hour and fifteen minutes to submit a complaint alleging a prohibited personnel practice or other prohibited activity, or 30 minutes to submit a complaint alleging prohibited political activity. Please send any comments about this burden estimate, and suggestions for reducing the burden, to the U.S. Office of Special Counsel, General Counsel's Office, 1730 M Street, NW, Suite 218, Washington, DC 20036-4505.

This Disclosure of Information was Received by OSC on: 12/3/2024

PLEASE KEEP A COPY OF YOUR COMPLAINT, ANY SUPPORTING DOCUMENTATION, AND ANY ADDITIONAL ALLEGATIONS THAT YOU SEND TO OSC NOW OR AT ANY TIME WHILE YOUR COMPLAINT IS PENDING. REPRODUCTION CHARGES UNDER THE FREEDOM OF INFORMATION ACT MAY APPLY TO ANY REQUEST YOU MAKE FOR COPIES OF MATERIALS THAT YOU PROVIDED TO OSC.



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IMPORTANT INFORMATION ABOUT FILING A DISCLOSURE

OSC WHISTLEBLOWER DISCLOSURE CHANNEL

Under 5 U.S.C. § 1213 and related provisions, the Office of Special Counsel (OSC) serves as a secure channel for federal employees, former federal employees, and applicants for federal employment with reliable knowledge of the wrongdoing to disclose:

- a violation of law, rule or regulation;
- gross mismanagement;
- gross waste of funds;
- an abuse of authority;
- a substantial and specific danger to public health or safety; and/or
- censorship related to scientific research.

OSC JURISDICTION

OSC has no jurisdiction over disclosures filed by:

- employees of the U.S. Postal Service and the Postal Regulatory Commission;
- members of the armed forces of the United States (*i.e.*, non-civilian military employees);
- state employees operating under federal grants;
- employees of federal contractors;
- other employees or federal agencies that are exempt under federal law; and
- Congressional or judicial branch employees.

ANONYMOUS SOURCES

While OSC will protect the identity of persons who make disclosures, it will not consider anonymous disclosures. If a disclosure is filed by an anonymous source, the disclosure will be referred to the Office of Inspector General in the appropriate agency. OSC will take no further action.

RETALIATION

Do you believe you suffered retaliation by your agency for disclosing wrongdoing? If yes, you may file a complaint of retaliation by navigating back to "My Cases" and selecting "New Complaint." Select Option 1 to complete and submit a Complaint of Prohibited Personnel Practice or other Prohibited Activity (PPPs). *If you have already completed the Complaint of Prohibited Personnel Practice or other Prohibited Activity above, please continue with this Disclosure.* PPPs are employment-related activities that are banned in the federal workforce.



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PPPs generally involve some type of personnel decision or action and may result in personal relief for people who have been subject to a PPP. For example, if we find that you were removed from federal service in retaliation for whistleblowing, OSC may act to get your job back. PPPs can also include allegations of harassment, failure to issue appraisals, and improper hiring. Do not file a disclosure to report retaliation or other PPPs.

CONTACT INFORMATION

Title:

First Name:* David

Middle Initial:

Last Name:* Medeiros

International Address?: No

Address:*

215 Mountain St
Willimantic, CT 06226

Cell Phone Number:

Home Phone Number:

Office Phone Number:

Ext.

Email Address:* aabiwr@live.com

Preferred means of contact:

Email: Yes

Cell phone: No

Home phone: No

Office phone: No

REPRESENTATIVE INFORMATION

Do you have representation? No

Information about representative, if applicable.

First Name:*

Middle Initial:

Last Name:*

International Address?:

Address: *



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*Denotes required fields.

Office Phone Number:

Ext.

Cell Phone Number:

Home Phone Number:

Email Address:

EMPLOYMENT INFORMATION

Name of Department/Agency about which you are making a disclosure.

Department:* Health and Human Services

Agency:* Centers For Medicare & Medicaid Services

Agency subcomponent: Connecticut Department of Public Health (DPH)

Street Address: 7500 Security Boulevard

City: Baltimore

State: MD

Zip Code: 21244

Employment Status:* Non-Federal Employee (please specify)

Title	Series	Grade

Please provide your dates of employment in this position.

Employment Service Type	Employment Service Subtype	If Other (specify)
Excepted Service	Other	Private Citizen, Advocate, and Whistleblower
Other	Other	Private Citizen, Advocate, and Whistleblower

Are you covered by a collective bargaining agreement?

DETAILS OF YOUR DISCLOSURES



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Please identify the type of wrongdoing that you are alleging. You can make multiple disclosures, but you **MUST** choose one option. If you check "violation of law, rule, or regulation," specify, if you can, the particular law, rule or regulation violated (by name, subject, and/or legal citation). For each allegation, please answer the following questions (be as specific as possible). Please keep in mind that you will have an opportunity to provide more information and someone from OSC will contact you.

If OSC determines there is a substantial likelihood of wrongdoing, OSC will refer your disclosures to the involved agency for an investigation and report. To meet the substantial likelihood standard, there must be a significant probability that the information reveals wrongdoing that falls within one or more of the categories above. In its evaluation, OSC considers the strength, reliability, and credibility of the disclosures. If the substantial likelihood determination cannot be made, OSC will determine whether there is sufficient information to exercise its discretion to refer the allegations.

DISCLOSURES

Allegation	Violation of Law, Rule or Regulation
What action did they take?	The Connecticut Department of Public Health (DPH), along with other relevant state and federal officials and entities, engaged in a series of actions and omissions that constitute violations of law, rule, and regulation. These actions include: Failure to Comply with FOIA (5 U.S.C. § 552 and Conn. Gen. Stat. § 1-200 et seq.) Incomplete Records Production: DPH failed to provide comprehensive responses to the FOIA request submitted on November 2, 2024, concerning Medicaid services associated with NPI 1962278119 and NPI 1023012345. Requested records, such as contracts, compliance reports, and interagency communications, were not provided in full, hindering transparency and accountability. Lack of Referral to Relevant Agencies: Despite the scope of the requested records, DPH failed to refer the request to other relevant agencies, including the Connecticut Department of Social Services (DSS) and the Centers for Medicare & Medicaid Services (CMS), as required under FOIA when records are not within the agency's



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	possession. Inadequate Justifications for Denials: Redacted or withheld records lacked legally sufficient explanations, including specific citations of FOIA exemptions under 5 U.S.C. § 552(b). This non-compliance undermines statutory transparency obligations. ADA Violations (42 U.S.C. § 12132 and 29 U.S.C. § 794) Failure to Provide ADA Accommodations: DPH repeatedly ignored or failed to meet explicit, non-negotiable ADA accommodations necessary for equitable participation, including: Exclusive use of the MuckRock platform for all communications. Delivery of documents as screen-reader-compatible PDFs. Inclusion of simplified summaries for complex or technical records. Identification of FOIA officers and responsible personnel in all correspondence. Accessibility Barriers: Directing the requester to external portals and password-protected links violated ADA standards by creating barriers for individuals with cognitive disabilities, contrary to Title II of the ADA and Section 504 of the Rehabilitation Act. Mismanagement of Medicaid Records and Oversight (42 U.S.C. § 1396a) Failure to Ensure Regulatory Compliance: By not producing records related to provider compliance, Medicaid funding allocation, and consumer complaints, DPH obstructed transparency in Medicaid administration. This omission raises concerns about potential misuse of federal funds, monopolistic practices, and violations of consumer rights. Lack of Provider Accountability: No evidence was provided of efforts to address complaints, conduct inspections, or enforce standards related to the specified NPIs, reflecting systemic mismanagement. Potential Retaliation Against Whistleblower Advocacy Deliberate Obfuscation: Actions such as partial responses, procedural delays, and failure to adhere to statutory requirements appear to target efforts to expose systemic issues, potentially retaliating against whistleblower advocacy aimed at improving Medicaid transparency and ADA enforcement. C
When did this occur?	When Did This Occur? The violations occurred over an extended period, reflecting a pattern of systemic non-



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	compliance and neglect: Initial Incident Timeline: The request was submitted on November 2, 2024, under the Connecticut Freedom of Information Act (FOIA) and federal FOIA statutes. This marked the start of the Department of Public Health's (DPH) obligation to respond promptly and transparently. Acknowledgment of Receipt: The Department acknowledged receipt of the request on November 4, 2024 (Reference #: R000770-110424), initiating statutory deadlines for compliance. Ongoing Non-Compliance: From November 4, 2024, to December 4, 2024, the Department has repeatedly failed to adhere to FOIA and ADA requirements, despite follow-ups and formal appeals: Ignored mandated ADA accommodations, such as exclusive communication through MuckRock, accessible document formatting, and simplified summaries. Failed to provide a substantive response to the FOIA request, leaving critical questions
How did you discover this action?	How did you discover this action? I discovered the violations and non-compliance by the Connecticut Department of Public Health (DPH) during my direct engagement with the agency regarding multiple Freedom of Information Act (FOIA) requests, including but not limited to FOIA Request #R000770-110424. Despite my submission of a legally compliant request and repeated follow-ups, DPH's failure to provide the requested documents in a timely manner and refusal to comply with clearly articulated ADA accommodations became evident through their responses—or lack thereof. Key indicators of non-compliance included: Inadequate Responses to FOIA Requests: Communications from DPH failed to address the scope of my request, did not provide the required records, and omitted any detailed justifications for redactions or denials, as mandated by FOIA statutes. Non-Adherence to ADA Accommodations: Despite explicit requests for reasonable ADA accommodations, including communication exclusively through the MuckRock platform, screen-reader-compatible PDFs, and simplified summaries for complex records, DPH consistently failed to comply. Their reliance



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	on external portals and password-protected links excluded me from full and equal participation. Pattern of Systemic Failures: Through the examination of DPH's handling of other FOIA-related matters and the broader operational challenges within Connecticut's Medicaid system, I identified a pattern of disregard for statutory obligations, transparency mandates, and equitable service delivery. Firsthand Experiences: My direct interactions with the agency and its representatives highlighted procedural deficiencies, including the absence of responsible personnel's identification in communications, which impeded accountability and transparency. These discoveries are supported by documentation, email correspondence, and records demonstrating DPH's continued non-compliance with federal laws such as FOIA (5 U.S.C. § 552) and the Americans with Disabilities Act (42 U.S.C. § 12101). This evidence underscores systemic issues requiring urgent intervention to safeguard the constitutional and statutory rights of individuals and taxpayers.
What additional facts support your allegation?	Additional Facts Supporting the Allegation Pattern of Non-Compliance: The Connecticut Department of Public Health (DPH) has demonstrated a consistent failure to comply with FOIA and ADA requirements. For instance: Repeated instructions to access external portals violate specific ADA accommodations requesting communication exclusively through the MuckRock platform. Failure to provide screen-reader compatible PDFs and simplified summaries for complex records, as explicitly outlined in prior requests, hinders accessibility. Lack of Transparency and Accountability: DPH has not identified the individuals responsible for handling the FOIA requests, breaching the requirement to include names, titles, and roles for accountability. There has been no detailed explanation for denied or redacted records, nor proper statutory citations, violating FOIA's transparency mandate under 5 U.S.C. § 552(b). Untimely Responses: FOIA requires agencies to respond promptly (5 U.S.C. § 552(a)(6)(A)(i)), and Connecticut FOIA statutes



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	mandate a response within four business days (Conn. Gen. Stat. § 1-210(a)). Despite these obligations, significant delays have occurred with no justification provided. Harm to Vulnerable Populations: The requested information directly impacts Medicaid consumers and providers under the Acquired Brain Injury Waiver Program, many of whom are disabled and rely on Medicaid-funded services. DPH's refusal to comply obstructs the ability to address systemic issues affecting their care and well-being. Legal Violations of ADA Title II and Section 504: DPH has ignored legally mandated accommodations under ADA Title II (42 U.S.C. § 12132) and Section 504 of the Rehabilitation Act (29 U.S.C. § 794). By failing to adhere to the requested accommodations, DPH has excluded individuals with disabilities from meaningful participation in public processes. Federal and State Oversight Failures: Despite DPH's responsibilities under state and federal Medicaid oversight frameworks, there is no evidence of coordination with federal entities like CMS to address concerns tied to Medicaid fraud, transparency, and provider accountability. Broader Implications: DPH's systemic failures suggest that similar issues may exist across other Connecticut state agencies, pointing to a potential pattern of mismanagement that warrants further investigation by federal oversight bodies. Enhancements for Maximum Impact: Emphasize the urgency of federal intervention to protect taxpayer funds and ensure transparency in Medicaid programs. Highlight the violation of constitutional principles, particularly the First and Fourteenth Amendments, in restricting access to public information and due process. Reinforce that the requested records are vital for safeguarding the rights of disabled individuals and addressing potential misuse of public funds.
Allegation	Gross Mismanagement
What action did they take?	2. What Action Did They Take? The identified individuals engaged in or allowed actions that constitute gross mismanagement of Medicaid oversight and



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	administration, violating federal and state laws and failing to uphold their duties to protect vulnerable populations. The specific actions include: Connecticut Department of Social Services (DSS): Andrea Barton Reeves (Commissioner): Action: Failed to enforce oversight mechanisms, resulting in unchecked fraud, waste, and abuse in Medicaid programs, particularly under the ABI Waiver Program. Impact: Denied Medicaid beneficiaries equitable access to services, violating constitutional rights and federal Medicaid regulations under 42 U.S.C. § 1396a. Matthew S. Antonetti (Legal Director): Action: Refused to investigate or respond adequately to whistleblower complaints about Medicaid provider malfeasance. Impact: Enabled the continuation of unlawful practices, including financial mismanagement and ADA non-compliance. Connecticut Department of Public Health (DPH): Manisha Juthani, MD (Commissioner): Action: Neglected to ensure regulatory compliance and failed to act on complaints regarding substandard care and provider misconduct associated with Medicaid-funded services. Impact: Compromised public health and safety, particularly for disabled individuals relying on Medicaid services. Connecticut Office of the Attorney General: William Tong (Attorney General): Action: Declined to investigate allegations of Medicaid fraud, financial mismanagement, and constitutional violations despite credible evidence from whistleblowers and advocacy groups. Impact: Allowed systemic abuses to persist unchecked, undermining public trust and accountability. U.S. Department of Health and Human Services (HHS): Xavier Becerra (Secretary): Action: Failed to enforce federal oversight of Medicaid programs in Connecticut, despite receiving numerous complaints of systemic non-compliance with federal standards. Impact: Perpetuated gross mismanagement and ADA violations, harming Medicaid beneficiaries and taxpayers. Chiquita Brooks-LaSure (CMS Administrator): Action: Allowed systemic inefficiencies in Medicaid program operations, ignoring whistleblower allegations



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	and failing to conduct necessary audits and compliance reviews. Impact: Contributed to the misuse of taxpayer funds and erosion of public trust in government programs. Office of Policy and Management (OPM): Jeffrey Beckham (Secretary): Action: Misallocated Medicaid funds and failed to enforce financial accountability measures, despite evidence of fraud and abuse. Impact: Increased the financial burden on taxpayers and exacerbated inequities in Medicaid service delivery. U.S. Department of Justice (DOJ): Kristen Clarke (Assistant Attorney General, Civil Rights Division): Action: Failed to investigate systemic ADA non-compliance and whistleblower retaliation within Connecticut Medicaid programs. Impact: Denied justice to individuals reporting government wrongdoing and perpe
When did this occur?	3. When Did This Occur? The gross mismanagement, ADA violations, and systemic failures occurred over an extended period, highlighting persistent non-compliance and negligence across multiple agencies: Timeline of Events: January 1, 2013 – Present: Ongoing Medicaid Mismanagement: Misallocation of funds, lack of oversight, and failure to provide equitable services under the Medicaid Acquired Brain Injury (ABI) Waiver Program. Non-compliance with ADA and FOIA standards reported consistently throughout this period. December 18, 2023: Whistleblower Report Filed: Initial formal disclosure of systemic Medicaid mismanagement, ADA violations, and whistleblower retaliation to state and federal agencies, including the Department of Justice (DOJ) and Centers for Medicare & Medicaid Services (CMS). November 2, 2024: FOIA Request Submitted: Specific records requested from the Connecticut Department of Public Health (DPH) and other agencies regarding Medicaid services tied to NPIs 1962278119 and
How did you discover this action?	4. How Did You Discover This Action? I discovered the systemic failures through a combination of direct interactions with state agencies, public records obtained via Freedom of Information Act (FOIA) requests, and reports from impacted individuals and organizations.



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	Specifically: FOIA Requests: I submitted FOIA requests to the Connecticut Department of Public Health (DPH), Department of Social Services (DSS), and federal agencies including the Centers for Medicare & Medicaid Services (CMS). The records I received highlighted glaring inconsistencies, incomplete responses, and a failure to comply with federal and state transparency laws. Whistleblower Reports: As a whistleblower, I reported these violations to the Department of Justice (DOJ) and the Office of the Inspector General (OIG). Despite my detailed submissions, these agencies either failed to act or deferred responsibility, further evidencing systemic non-compliance and federal oversight gaps. Testimonies and Complaints: Numerous individuals, including Medicaid beneficiaries, healthcare providers, and advocates, have shared personal testimonies and complaints regarding the lack of accountability, restrictive referral practices, and systemic exclusion of vulnerable populations from decision-making processes. Analysis of Regulatory Non-Compliance: My analysis of responses—or lack thereof—confirmed violations of: FOIA (5 U.S.C. § 552): Agencies failed to provide complete records, justify redactions, or adhere to statutory deadlines. ADA Title II (42 U.S.C. § 12132): Agencies systematically denied reasonable accommodations, including screen-reader compatible formats and simplified summaries, violating their obligations to ensure accessible communication. Constitutional Rights: The procedural delays, lack of transparency, and systemic exclusion of individuals with disabilities constitute violations of due process and equal protection under the Fifth and Fourteenth Amendments. Statutory and Case Law Citations: FOIA: FOIA mandates transparency and accessibility in government records. The failure to provide complete responses or justify denials violates 5 U.S.C. § 552 and U.S. Supreme Court precedent in <i>U.S. DOJ v. Reporters Committee for Freedom of the Press</i> (1989), which emphasized the public's right to know about government operations. ADA Title II: Title II of the ADA (42 U.S.C. § 12132)



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	requires public entities to ensure effective communication and prohibit discrimination. In <i>Tennessee v. Lane</i> (2004), the Supreme Court affirmed the constitutional validity of Title II as it relates to accessibility and due process for individuals with disabilities. Constitutional Protections: The procedural failures infringe upon: First Amendment: The right to petition the government is undermined by non-compliance and inaccessibility. Fifth and Fourteenth Amendments: Systemic exclusion and denial of accommodations constitute violations of due process and equal protection. Supremacy Clause: Under the
What additional facts support your allegation?	5. What Additional Facts Support Your Allegation? This allegation is supported by a comprehensive body of evidence, direct agency actions, statutory violations, and documented patterns of systemic failures that emphasize the urgent need for federal intervention. Key Supporting Facts: Non-Compliance with FOIA: Multiple requests under the Freedom of Information Act (FOIA) and Connecticut's FOIA statutes (Conn. Gen. Stat. § 1-200 et seq.) were either ignored, delayed, or responded to inadequately. This includes: Lack of Transparency: Agencies failed to provide complete records or justify redactions in compliance with FOIA (5 U.S.C. § 552). Absence of Proper Search: No evidence of thorough or good-faith efforts to retrieve records from databases, archived files, or inter-agency communications. Statutory Violations: Agencies consistently failed to meet the statutory deadlines outlined in FOIA and Connecticut law. ADA Violations: Agencies failed to adhere to ADA Title II (42 U.S.C. § 12132) by: Denying reasonable accommodations explicitly requested to support accessibility for individuals with disabilities. Providing inaccessible communication formats, such as password-protected links and portal-based responses, contrary to the outlined accommodations. Refusing to provide simplified summaries for complex records, preventing full participation by individuals with cognitive challenges. Procedural Failures and Constitutional Concerns: Due



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	Process Violations: Denial of access to requested records obstructs my right to petition the government and seek redress, protected under the First and Fifth Amendments. Equal Protection Violations: Individuals with disabilities were systematically excluded from accessing critical Medicaid program data due to procedural hurdles. Documented Complaints and Testimonies: Complaints and testimonies from Medicaid beneficiaries, healthcare providers, and advocates highlight: Restrictive Referral Practices: Limitations on consumer choice and autonomy in provider selection. Neglect of Accountability: Agencies failed to address consumer complaints regarding program mismanagement and accessibility barriers. Mismanagement of Medicaid Funds: Evidence suggests possible misuse or inefficiency in allocating federal and state Medicaid funds, including: Lack of transparency in provider payments, contracts, and oversight processes. Potential misapplication of taxpayer dollars, as indicated by incomplete audits and inadequate inter-agency oversight. Inconsistent Enforcement of Federal and State Laws: Communications and records reveal conflicting policies and inconsistent enforcement of Medicaid standards, suggesting a systemic disregard for legal and procedural obligations. Whistleblower Retaliation: Efforts to expose these systemic issues through whistleblower channels were met with delays, deflections, and denials, contrary to protections under the Whistleblower Protection Act (5 U.S.C. § 2302(b)(8)). Legal Citations and Preceden
Allegation	Abuse of Authority
What action did they take?	2. What Action Did They Take? The identified individuals and entities engaged in systemic abuse of authority by taking the following actions that violated constitutional laws, ADA rights, whistleblower protections, and taxpayer interests: 1. Suppressing Transparency and Public Accountability Failure to Provide FOIA-Compliant Responses: Denied or delayed access to requested Medicaid records under FOIA (5 U.S.C. § 552) and Connecticut FOIA statutes (Conn. Gen. Stat. § 1-200 et



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	seq.). Repeatedly withheld or redacted records without citing appropriate legal exemptions, violating federal transparency laws. Directed responses to inaccessible external portals and password-protected links, ignoring ADA accommodations. 2. Violating ADA Rights and Accessibility Failure to Comply with ADA Title II (42 U.S.C. § 12132): Refused to provide reasonable accommodations, including simplified summaries, screen-reader-compatible PDFs, and exclusive use of the MuckRock platform, as explicitly requested. Created barriers to participation by directing communications to inaccessible formats and failing to identify responsible personnel in responses. 3. Engaging in Retaliatory Actions Against Whistleblowers Obstructing Whistleblower Reports: Targeted whistleblowers, including David Medeiros, by dismissing or disregarding submitted complaints and retaliation claims under the Whistleblower Protection Act (5 U.S.C. § 2302(b)(8)). Failed to protect whistleblower anonymity and actively delayed investigations into alleged abuses. 4. Mismanaging Medicaid Oversight Gross Mismanagement of Medicaid Programs: Failed to audit or address financial irregularities in Medicaid services tied to NPIs 1962278119 and 1023012345. Allowed systemic provider referral restrictions and monopolistic practices that reduced consumer choice and violated Medicaid's fair access requirements (42 U.S.C. § 1396a). Neglected enforcement of provider compliance with federal and state regulations. 5. Abusing Regulatory Authority Restricting Consumer Rights: Imposed policies limiting consumer autonomy and choice in Medicaid services, violating federal Medicaid standards. Manipulated referral practices to favor certain providers, creating conflicts of interest and reducing service availability. 6. Misuse of Taxpayer Funds Gross Waste and Fraudulent Allocation of Public Resources: Redirected Medicaid funds intended for vulnerable populations toward operational inefficiencies and potential misuse, violating the False Claims Act (31 U.S.C. §§ 3729–3733). Failed to



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	ensure that taxpayer dollars were used to enhance equitable access to healthcare services, as mandated by federal law. These actions collectively demonstrate systemic failures that undermined the constitutional rights of individuals, breached ADA requirements, retaliated against whistleblowers, and eroded public trust through gross mismanagement of Medicaid services.
When did this occur?	3. When Did This Occur? The abuse of authority, violations of law, and systemic failures occurred over a prolonged period, beginning no later than January 1, 2013, and continuing to the present. Specific instances include: FOIA Non-Compliance: Initial failures to comply with federal and state FOIA laws occurred with requests submitted on November 2, 2024, as detailed in FOIA Request #R000770-110424. Ongoing violations include delayed responses, incomplete disclosures, and the provision of inaccessible records as of December 4, 2024. ADA Violations: Refusal to honor explicitly requested ADA accommodations began with initial correspondence and has persisted in subsequent responses and communications. Whistleblower Retaliation: Retaliatory actions against whistleblowers were reported following the submission of complaints on December 18, 2023, and subsequent disclosures. Patterns of retaliation include dismissive responses, failure to protect anonymity, and delays in addressing compl
How did you discover this action?	How Did You Discover This Action? I discovered these systemic violations and failures through a combination of personal advocacy, formal reporting, and diligent documentation of state and federal agency responses. Each interaction, request, and investigation provided concrete evidence of the actions described: FOIA Requests and Deficient Responses: Submitted multiple FOIA requests, including #R000770-110424, seeking transparency regarding Medicaid oversight and ADA compliance. The responses, when provided, were incomplete, delayed, or contained unjustified redactions, violating FOIA's mandates under 5 U.S.C. § 552. Agencies failed to comply with legal obligations to provide



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	requested records, leaving critical gaps in accountability. ADA Accommodation Requests Ignored: Submitted explicit ADA accommodation requests to ensure accessibility under ADA Title II (42 U.S.C. § 12132) and Section 504 of the Rehabilitation Act (29 U.S.C. § 794). These accommodations included exclusive use of MuckRock for communication, screen-reader-compatible PDFs, simplified summaries, and identification of responsible personnel. Despite clear requests, responses repeatedly ignored these accommodations, creating systemic barriers for individuals with disabilities. Reports and Testimonies from Affected Communities: Engaged directly with impacted individuals, families, and providers who corroborated widespread failures, including restricted access to Medicaid services and retaliatory actions against whistleblowers. These accounts highlighted patterns of systemic mismanagement that disproportionately harm vulnerable populations. Regulatory and Financial Discrepancies: Identified inconsistencies in Medicaid funding, compliance, and oversight through public records, agency responses, and internal documentation. These discrepancies point to potential gross mismanagement and misuse of taxpayer funds, violating federal Medicaid regulations under 42 U.S.C. § 1396a. Evasive Communication and Accountability Gaps: State and federal officials, including DSS Commissioner Andrea Barton Reeves and other key personnel, provided evasive or inadequate responses, further evidencing systemic failures and potential abuse of authority. Lack of Statutory Justifications: Denials and redactions of requested records were issued without clear statutory citations, in direct violation of FOIA (5 U.S.C. § 552(b)), further obstructing transparency and oversight. Community Advocacy and Whistleblower Actions: My role as an advocate and whistleblower, combined with repeated attempts to engage with regulatory bodies, uncovered entrenched systemic issues. This was further reinforced by the lack of substantive action following



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	formal complaints submitted to federal oversight agencies, including the DOJ and CMS.
What additional facts support your allegation?	Additional Facts Supporting the Allegation Failure to Fulfill ADA Accommodation Requests: Despite multiple formal requests, the Department of Public Health (DPH) has consistently failed to adhere to legally required ADA accommodations. These include exclusive communication via the MuckRock platform, provision of screen-reader-compatible PDFs, and simplified summaries for complex records. These actions constitute a direct violation of Title II of the ADA (42 U.S.C. § 12132) and Section 504 of the Rehabilitation Act (29 U.S.C. § 794), as affirmed in <i>Tennessee v. Lane</i> (2004). Inconsistent and Incomplete Responses to FOIA Requests: The department's responses to FOIA requests have been incomplete, with unexplained redactions, delayed timelines, and a lack of identified responsible personnel. This violates the federal FOIA statute (5 U.S.C. § 552) and Connecticut FOIA requirements (Conn. Gen. Stat. § 1-200 et seq.), both of which mandate timely and comprehensive access to requested public records. Obstruction of Oversight and Accountability: Records critical to evaluating Medicaid program transparency have been delayed or withheld, obstructing public oversight. The lack of cooperation raises serious concerns about potential mismanagement or misuse of federal Medicaid funds, which contravenes 42 U.S.C. § 1396a and principles of accountability. Harm to Vulnerable Populations: These failures have a disproportionate impact on vulnerable populations, including Medicaid beneficiaries with disabilities. Denying timely access to information exacerbates their vulnerabilities, limits their ability to make informed decisions, and denies them equitable participation in federally funded programs. Evidence of Systemic Non-Compliance: Patterns of non-compliance across state agencies suggest systemic issues rather than isolated incidents. Communications between DSS and CMS demonstrate recurring failures in oversight, accountability, and corrective actions, despite repeated



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	notifications of deficiencies. This systemic neglect undermines public trust in government programs. Potential Financial Mismanagement: The refusal to provide critical Medicaid-related records raises concerns of fraud, waste, and abuse of taxpayer dollars. Federal statutes like the False Claims Act (31 U.S.C. §§ 3729-3733) require agencies to ensure transparency and integrity in the use of federal funds, which DPH's non-compliance has jeopardized. Lack of Accountability: DPH's refusal to identify responsible personnel for FOIA responses violates transparency and accountability principles. The lack of named FOIA officers obstructs effective follow-up, denying the public a fair process for obtaining government-held information. Impact on Whistleblower Protections: The documented failures undermine whistleblower protections, deterring individuals from reporting abuses and exposing systemic non-compliance. Such actions violate the Whistleblower Protection Act (5 U.S.C. § 2302(b)(8)) and comprom
Allegation	Gross Waste of Funds
What action did they take?	2. What Action Did They Take? Description of Actions Taken: Mismanagement of Medicaid Funds: Allocated Medicaid funds without proper oversight, resulting in potential waste and fraud. This includes payments to providers associated with NPI 1962278119 and NPI 1023012345 without conducting thorough compliance reviews or addressing unresolved complaints of service deficiencies. Failure to Conduct Adequate Audits: Neglected to perform comprehensive audits on Medicaid programs, including the ABI Waiver Program, to ensure appropriate use of taxpayer dollars in compliance with federal and state laws, such as 42 U.S.C. § 1396a and the False Claims Act (31 U.S.C. §§ 3729-3733). Deliberate Non-Compliance with FOIA: Failed to respond fully or promptly to FOIA requests (e.g., #R000770-110424) seeking transparency on Medicaid expenditures and oversight processes. This failure obstructs public accountability and violates 5 U.S.C. § 552. Denial of ADA Accommodations: Ignored or inadequately fulfilled



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	explicit ADA accommodation requests, including the exclusive use of the MuckRock platform, accessible document formats, and simplified summaries. These actions violate Title II of the ADA (42 U.S.C. § 12132) and Section 504 of the Rehabilitation Act (29 U.S.C. § 794). Obstruction of Transparency: Obstructed the public's ability to scrutinize Medicaid program operations by failing to provide requested records, issuing incomplete or non-compliant responses, and not identifying responsible personnel. Exclusionary Practices: Excluded vulnerable populations, including individuals with disabilities, from decision-making processes by denying accommodations and creating systemic barriers to participation. This constitutes a violation of constitutional rights under the Fifth and Fourteenth Amendments. Non-Referral to Relevant Agencies: Did not refer FOIA requests to other relevant agencies, such as DSS, CMS, or the Connecticut Attorney General, when records were outside the scope of their jurisdiction. This violates both federal and state referral obligations under FOIA and Conn. Gen. Stat. § 1-210(a). Improper Awarding of Medicaid Contracts: Engaged in questionable procurement practices, awarding contracts without sufficient transparency or competitive bidding processes, potentially violating federal procurement standards. Failure to Address Consumer Complaints: Did not investigate or resolve consumer complaints regarding Medicaid services, including quality-of-care violations, housing conditions, and employment practices linked to the NPIs in question. Legal Implications: Violations of FOIA (5 U.S.C. § 552) and Connecticut FOI laws (Conn. Gen. Stat. § 1-200 et seq.). Non-compliance with ADA Title II (42 U.S.C. § 12132) and Section 504 of the Rehabilitation Act (29 U.S.C. § 794). Breaches of the False Claims Act (31 U.S.C. §§ 3729-3733) due to inadequate oversight of Medicaid funds. Violations of constitutional protections under the First, Fifth, and Fourteenth A
When did this occur?	3. When Did This Occur? The timeline of these actions spans several years, with critical violations occurring



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	within the following periods: Initial Violations (2013 - Present): Beginning in January 2013, systemic issues in Medicaid administration and compliance failures emerged, linked to oversight and financial management deficiencies for NPIs 1962278119 and 1023012345. Specific FOIA Violations: The Department of Public Health (DPH) failed to provide adequate responses to FOIA Request #R000770-110424 submitted on November 2, 2024, and acknowledged on November 4, 2024. Despite statutory deadlines requiring a response within four business days, the request remains unresolved as of December 4, 2024. Ongoing ADA Violations: Persistent non-compliance with ADA accommodation requests has been evident throughout the FOIA process. These violations include the refusal to provide accessible document formats, summaries for complex records, and exclusive communication through the MuckRock plat
How did you discover this action?	How Did You Discover This Action? Through meticulous review and analysis of publicly accessible records, personal engagement with affected individuals, and responses to Freedom of Information Act (FOIA) requests submitted to various state and federal agencies, it became evident that systemic failures were impacting Medicaid services and taxpayer resources. Key discoveries included: Analysis of FOIA Responses: The limited, delayed, or incomplete responses to FOIA requests revealed significant non-compliance with statutory obligations, particularly regarding the management of Medicaid services and the misuse of taxpayer funds. Example: FOIA request reference numbers [list specific FOIA numbers] were either ignored or fulfilled in a manner that violated transparency standards mandated under 5 U.S.C. § 552. Testimonies from Stakeholders: Conversations with Medicaid beneficiaries and healthcare providers highlighted pervasive issues, including: Inefficient resource allocation. Arbitrary denial of services. Lack of accountability in Medicaid provider oversight. Discrepancies in Public Records: Reviews of financial audits, regulatory filings, and state compliance reports



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	identified inconsistencies in Medicaid funding allocations, suggesting possible mismanagement or fraud. Notable issues included the absence of required documentation for National Provider Identifiers (NPIs) [e.g., NPI 1962278119 and NPI 1023012345]. ADA Non-Compliance Reports: Direct engagement with affected individuals and groups exposed failures to accommodate disabilities as required under Title II of the ADA (42 U.S.C. § 12132). This includes: Ignored requests for accessible communication formats. Barriers to participation in public health program discussions. Whistleblower Disclosures: Internal sources and whistleblower reports corroborated evidence of systemic inefficiencies, retaliation against whistleblowers, and non-compliance with oversight protocols. These disclosures align with protections under the Whistleblower Protection Act (5 U.S.C. § 2302(b)(8)). This discovery process underscores a clear pattern of systemic issues that necessitate immediate federal intervention to uphold constitutional rights, ADA compliance, and proper use of taxpayer funds.
What additional facts support your allegation?	What Additional Facts Support Your Allegation? Documented FOIA Non-Compliance: Numerous FOIA requests submitted to state and federal agencies were either ignored, partially fulfilled, or delayed well beyond statutory deadlines. Agencies failed to provide detailed justifications for redactions or denials, violating 5 U.S.C. § 552(b). Example: FOIA request reference numbers [list specific requests] revealed incomplete data on Medicaid funding allocations and provider compliance. Confirmed ADA Violations: Despite explicit accommodations requests, including accessible documents and simplified summaries, agencies consistently failed to comply with Title II of the ADA (42 U.S.C. § 12132) and Section 504 of the Rehabilitation Act (29 U.S.C. § 794). This non-compliance excluded individuals with disabilities from fully participating in oversight and decision-making processes related to Medicaid services. Discrepancies in Medicaid Expenditures: Audits and financial reviews revealed significant inconsistencies in the allocation of



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	Medicaid funds. Specifically: Unexplained variances in reimbursements for services provided under NPI 1962278119 and NPI 1023012345. Lack of transparency in contracts and agreements, suggesting possible misuse of funds or fraudulent practices. Evidence of Systemic Mismanagement: Internal reports and whistleblower disclosures highlighted failures in Medicaid provider oversight, including: Arbitrary enforcement of compliance standards. Preferential treatment for certain providers, undermining equitable service delivery. Retaliatory actions against whistleblowers reporting these issues, violating the Whistleblower Protection Act (5 U.S.C. § 2302(b)(8)). Adverse Impact on Vulnerable Populations: Medicaid beneficiaries reported: Denial of critical services without explanation. Reduced access to healthcare providers due to monopolistic practices. Housing instability stemming from mismanagement of Medicaid-supported housing programs. Public Interest Indicators: Investigations have revealed that these issues are not isolated but indicative of systemic failures across the Medicaid system, both in Connecticut and potentially nationwide. The misuse of taxpayer funds and the denial of ADA rights jeopardize public trust and disproportionately harm individuals reliant on government services. Lack of Accountability: Agencies have failed to identify or address key personnel responsible for these violations, further exacerbating systemic issues. Requests for the names and titles of FOIA officers, compliance officials, and decision-makers involved in handling these matters have gone unanswered, violating transparency and accountability standards. These facts collectively demonstrate an urgent need for federal oversight and corrective action to address gross mismanagement, ADA violations, and systemic failures in Medicaid oversight.
Allegation	Danger to Public Health
What action did they take?	2. What action did they take? The Connecticut Department of Public Health (DPH), in collaboration with the Department of Social Services (DSS), engaged in



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	systemic actions that jeopardize public health by failing to enforce adequate oversight, transparency, and regulatory compliance within Medicaid programs. Specifically: Failure to Address Health and Safety Concerns: Neglected to investigate or address documented complaints concerning substandard care, inadequate housing conditions, and unsafe environments for Medicaid beneficiaries, including those in the ABI Waiver Program. Allowed providers associated with National Provider Identifiers (NPIs) 1962278119 and 1023012345 to continue operations despite violations of health and safety standards. Inadequate Monitoring and Inspections: Failed to conduct timely inspections and audits of healthcare providers and facilities, resulting in unaddressed risks to vulnerable populations, including individuals with disabilities and chronic health conditions. Overlooked repeated instances of non-compliance with federal and state Medicaid regulations, such as quality-of-care standards and infection control protocols. Non-Compliance with ADA Requirements: Did not ensure that Medicaid services and facilities complied with Title II of the Americans with Disabilities Act (ADA) (42 U.S.C. § 12132), including the provision of accessible communication, auxiliary aids, and physical accommodations for beneficiaries with disabilities. Ignored repeated requests for reasonable accommodations in communication with whistleblowers and beneficiaries, thereby excluding disabled individuals from participating in decisions affecting their care. Systemic Transparency Failures: Withheld or delayed the release of critical public health records requested under the Freedom of Information Act (FOIA) and Connecticut FOIA statutes (Conn. Gen. Stat. § 1-200 et seq.), obstructing efforts to address systemic risks. Provided incomplete or redacted information without statutory justification, undermining public trust and accountability. Disregard for Whistleblower Reports: Failed to act on whistleblower reports highlighting systemic risks to public health, including allegations of Medicaid fraud,



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	gross mismanagement, and abuse of authority within the program. Overlooked Oversight and Compliance Obligations: Ignored federal and state mandates requiring proactive oversight of Medicaid providers and the enforcement of standards designed to protect the health and well-being of beneficiaries. Did not establish or maintain adequate systems for reporting, investigating, and addressing health and safety violations in Medicaid-funded services. These actions collectively create a significant danger to public health, disproportionately affecting vulnerable populations who rely on Medicaid for essential healthcare, housing, and support services. They also erode public trust and undermine the constitutional and statutory rights of Medicaid benefic
When did this occur?	Timeline of Events: Initial Oversight Failures: Dates back to January 1, 2013, with documented lapses in Medicaid oversight under NPI 1962278119 and NPI 1023012345. Records show repeated non-compliance with federally mandated Medicaid reporting and inspection protocols, affecting transparency and accountability. ADA Non-Compliance: ADA violations became evident from 2018 onward, as multiple requests for accommodations in accessing Medicaid-related public health information were ignored or inadequately addressed. This includes the denial of screen-reader-compatible formats and refusal to embed critical information directly into email communications. Whistleblower Reports and Retaliation: Whistleblower reports filed on December 18, 2023, identified these systemic issues, prompting retaliatory actions and suppression of further disclosures. Despite whistleblower protections under federal law, records and investigations were obstructed, exacerbating public health risks. Current and Ongo
How did you discover this action?	4. How did you discover this action? The systemic failures and associated risks to public health were uncovered through extensive research, public records requests under the Freedom of Information Act (FOIA), and direct communications with affected individuals and



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	communities. Specific sources of discovery include: FOIA Responses and Non-Responses: Partial, delayed, or non-compliant responses to FOIA requests revealed significant gaps in transparency and accountability within the Connecticut Department of Public Health (DPH) and related agencies. These failures highlighted a broader pattern of systemic non-compliance. Direct Reports from Impacted Individuals and Families: Numerous reports from Medicaid beneficiaries, particularly those under the Acquired Brain Injury (ABI) Waiver Program, detailed inadequate access to services, poor program oversight, and failures in addressing critical health needs. Agency Communications and Records: Correspondence and documentation reviewed under FOIA requests disclosed administrative inefficiencies, lack of oversight, and potential violations of federal laws, including the Americans with Disabilities Act (ADA) and Medicaid statutes. Independent Audits and Media Investigations: Reports from watchdog organizations, investigative journalists, and independent audits corroborated evidence of widespread administrative failures, misuse of taxpayer funds, and lack of compliance with public health standards. Personal Advocacy and Expert Analysis: As a survivor of a traumatic brain injury (TBI) and founder of ABI Resources, I leveraged personal advocacy and collaboration with legal and healthcare experts to analyze the operational deficiencies and legal violations, culminating in the discovery of risks to public health. These findings underscore systemic neglect, regulatory non-compliance, and the critical need for federal intervention to address and rectify these failures. The evidence aligns with federal statutes, including FOIA (5 U.S.C. § 552) and the ADA (42 U.S.C. § 12132), which mandate transparency, accessibility, and the protection of vulnerable populations.
What additional facts support your allegation?	What additional facts support your allegation? Additional Facts Supporting Allegations Documented Patterns of Non-Compliance Records indicate repeated failures to adhere to ADA Title II mandates (42 U.S.C. §



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	12132) by ignoring legally required accommodations, such as accessible communications and MuckRock platform exclusivity. Prior requests for screen-reader-compatible documents, summaries for complex records, and identification of responsible personnel have been disregarded, as documented in communications and acknowledgment responses. Systemic Procedural Failures The Department of Public Health (DPH) has provided incomplete responses, with no clear scope of the search conducted, violating FOIA's procedural requirements under 5 U.S.C. § 552(a)(3). Absence of detailed justifications for redactions or withheld records contravenes statutory obligations, indicating a lack of transparency. Clear Violation of FOIA's Referral Obligations Agencies failed to refer the request to appropriate entities, such as DSS, CMS, or the Attorney General's Office, when records were not within their jurisdiction. This neglect breaches 5 U.S.C. § 552(a)(6)(C)(i) and demonstrates a systemic lack of inter-agency cooperation. Public Harm Amplified by Non-Compliance Vulnerable populations, particularly Medicaid beneficiaries with disabilities, have been directly harmed due to delays in accessing critical records related to Medicaid services, provider transparency, and compliance audits. These failures undermine their rights to equitable healthcare access and financial independence. The refusal to disclose consumer complaints and compliance reports has obstructed efforts to identify and address systemic issues, placing public health at greater risk. Federal Oversight Recommendations Ignored Despite federal oversight bodies, including CMS and DOJ, emphasizing transparency and ADA compliance in inter-agency communications, DPH has failed to follow these directives, exacerbating systemic deficiencies. Legal Precedents Highlighting Obligations Case law such as Tennessee v. Lane (2004) affirms ADA compliance as a constitutional requirement, making these violations not just statutory but constitutional infractions. FOIA-related precedents, including U.S. DOJ v. Reporters Committee



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	(1989), reinforce the necessity of prompt and complete access to public records for accountability. Lack of Accountability in Personnel Actions Failure to disclose the names, titles, and roles of FOIA officers responsible for these actions violates transparency principles and hinders oversight efforts, raising concerns of deliberate evasion. Mismanagement of Federal and State Resources Potential misuse of Medicaid funds, as evidenced by gaps in compliance records and consumer protections, suggests gross mismanagement and highlights the need for immediate corrective action to prevent further taxpayer harm. Federal Supremacy Obligations Ignored Under the Supremacy Clause of the U.S. Constitutio

DISCLOSURE SUBJECTS

Name of individual you believe is responsible for the wrongdoing disclosed.

First Name	Last Name	Title	Chain of Command
Manisha Juthani, MD Title: Commissioner Position in Chain of Command: Head of the Connecticut Depar	Manisha Juthani, MD Title: Commissioner Position in Chain of Command: Head of the Connecticut Depar	Manisha Juthani, MD Title: Commissioner Position in Chain of Command: Head of the Connecticut Depar	Manisha Juthani, MD Title: Commissioner Position in Chain of Command: Head of the Connecticut Depar
[FOIA Officer's Name or "Unknown"] Title: FOIA Officer, Connecticut Department of Public Health Pos	[FOIA Officer's Name or "Unknown"] Title: FOIA Officer, Connecticut Department of Public Health Pos	[FOIA Officer's Name or "Unknown"] Title: FOIA Officer, Connecticut Department of Public Health Pos	[FOIA Officer's Name or "Unknown"] Title: FOIA Officer, Connecticut Department of Public Health Pos
Andrea Barton Reeves Title: Commissioner,	Andrea Barton Reeves Title: Commissioner,	Andrea Barton Reeves Title: Commissioner,	Andrea Barton Reeves Title: Commissioner, Connecticut



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Connecticut Department of Social Services (DSS) Position	Connecticut Department of Social Services (DSS) Position	Connecticut Department of Social Services (DSS) Position	Department of Social Services (DSS) Position
Xavier Becerra Title: Secretary, U.S. Department of Health and Human Services (HHS) Position in Cha	Xavier Becerra Title: Secretary, U.S. Department of Health and Human Services (HHS) Position in Cha	Xavier Becerra Title: Secretary, U.S. Department of Health and Human Services (HHS) Position in Cha	Xavier Becerra Title: Secretary, U.S. Department of Health and Human Services (HHS) Position in Cha
Matthew S. Antonetti Title: Legal Director, Connecticut Department of Social Services (DSS) Positio	Matthew S. Antonetti Title: Legal Director, Connecticut Department of Social Services (DSS) Positio	Matthew S. Antonetti Title: Legal Director, Connecticut Department of Social Services (DSS) Positio	Matthew S. Antonetti Title: Legal Director, Connecticut Department of Social Services (DSS) Positio
Astread Ferron- Poole Title: Associate, Connecticut Department of Social Services (DSS) Position in	Astread Ferron- Poole Title: Associate, Connecticut Department of Social Services (DSS) Position in	Astread Ferron- Poole Title: Associate, Connecticut Department of Social Services (DSS) Position in	Astread Ferron-Poole Title: Associate, Connecticut Department of Social Services (DSS) Position in
Chiquita Brooks- LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS) Positio	Chiquita Brooks- LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS) Positio	Chiquita Brooks- LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS) Positio	Chiquita Brooks-LaSure Title: Administrator, Centers for Medicare & Medicaid Services (CMS) Positio
William Tong Title: Attorney General, State of Connecticut Position in Chain of Command: Chief lega	William Tong Title: Attorney General, State of Connecticut Position in Chain of Command: Chief lega	William Tong Title: Attorney General, State of Connecticut Position in Chain of Command: Chief lega	William Tong Title: Attorney General, State of Connecticut Position in Chain of Command: Chief lega



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Jeffrey Beckham Title: Secretary, Connecticut Office of Policy and Management (OPM) Position in Cha	Jeffrey Beckham Title: Secretary, Connecticut Office of Policy and Management (OPM) Position in Cha	Jeffrey Beckham Title: Secretary, Connecticut Office of Policy and Management (OPM) Position in Cha	Jeffrey Beckham Title: Secretary, Connecticut Office of Policy and Management (OPM) Position in Cha
Michael E. Horowitz Title: Inspector General, U.S. Department of Justice (DOJ) Position in Chain of	Michael E. Horowitz Title: Inspector General, U.S. Department of Justice (DOJ) Position in Chain of	Michael E. Horowitz Title: Inspector General, U.S. Department of Justice (DOJ) Position in Chain of	Michael E. Horowitz Title: Inspector General, U.S. Department of Justice (DOJ) Position in Chain of
Christi Grimm Title: Inspector General, U.S. Department of Health and Human Services (HHS) Position	Christi Grimm Title: Inspector General, U.S. Department of Health and Human Services (HHS) Position	Christi Grimm Title: Inspector General, U.S. Department of Health and Human Services (HHS) Position	Christi Grimm Title: Inspector General, U.S. Department of Health and Human Services (HHS) Position
Ned Lamont Title: Governor, State of Connecticut Position in Chain of Command: Chief executive offi	Ned Lamont Title: Governor, State of Connecticut Position in Chain of Command: Chief executive offi	Ned Lamont Title: Governor, State of Connecticut Position in Chain of Command: Chief executive offi	Ned Lamont Title: Governor, State of Connecticut Position in Chain of Command: Chief executive offi
Andrea Barton Reeves Title: Commissioner Position in Chain of Command: Head of the Connecticut Depa	Andrea Barton Reeves Title: Commissioner Position in Chain of Command: Head of the Connecticut Depa	Andrea Barton Reeves Title: Commissioner Position in Chain of Command: Head of the Connecticut Depa	Andrea Barton Reeves Title: Commissioner Position in Chain of Command: Head of the Connecticut Depa
Manisha Juthani, MD Title: Commissioner	Manisha Juthani, MD Title: Commissioner	Manisha Juthani, MD Title: Commissioner	Manisha Juthani, MD Title: Commissioner Position in



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Position in Chain of Command: Head of the Connecticut Depar	Position in Chain of Command: Head of the Connecticut Depar	Position in Chain of Command: Head of the Connecticut Depar	Chain of Command: Head of the Connecticut Depar
William Tong Title: Attorney General Position in Chain of Command: Chief Legal Officer of Connectic	William Tong Title: Attorney General Position in Chain of Command: Chief Legal Officer of Connectic	William Tong Title: Attorney General Position in Chain of Command: Chief Legal Officer of Connectic	William Tong Title: Attorney General Position in Chain of Command: Chief Legal Officer of Connectic
Xavier Becerra Title: Secretary Position in Chain of Command: Head of the U.S. Department of Health	Xavier Becerra Title: Secretary Position in Chain of Command: Head of the U.S. Department of Health	Xavier Becerra Title: Secretary Position in Chain of Command: Head of the U.S. Department of Health	Xavier Becerra Title: Secretary Position in Chain of Command: Head of the U.S. Department of Health
Chiquita Brooks-LaSure Title: Administrator Position in Chain of Command: Leader of the Centers for	Chiquita Brooks-LaSure Title: Administrator Position in Chain of Command: Leader of the Centers for	Chiquita Brooks-LaSure Title: Administrator Position in Chain of Command: Leader of the Centers for	Chiquita Brooks-LaSure Title: Administrator Position in Chain of Command: Leader of the Centers for
Jeffrey Beckham Title: Secretary Position in Chain of Command: Head of the Connecticut Office of Po	Jeffrey Beckham Title: Secretary Position in Chain of Command: Head of the Connecticut Office of Po	Jeffrey Beckham Title: Secretary Position in Chain of Command: Head of the Connecticut Office of Po	Jeffrey Beckham Title: Secretary Position in Chain of Command: Head of the Connecticut Office of Po
Kristen Clarke Title: Assistant Attorney General for Civil Rights Division, U.S. DOJ Position in Ch	Kristen Clarke Title: Assistant Attorney General for Civil Rights Division, U.S. DOJ Position in Ch	Kristen Clarke Title: Assistant Attorney General for Civil Rights Division, U.S. DOJ Position in Ch	Kristen Clarke Title: Assistant Attorney General for Civil Rights Division, U.S. DOJ Position in Ch



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*Denotes required fields.

Manisha Juthani, MD Title: Commissioner Position in Chain of Command: Head of the Connecticut Depar	Manisha Juthani, MD Title: Commissioner Position in Chain of Command: Head of the Connecticut Depar	Manisha Juthani, MD Title: Commissioner Position in Chain of Command: Head of the Connecticut Depar	Manisha Juthani, MD Title: Commissioner Position in Chain of Command: Head of the Connecticut Depar
Senior FOIA Officers (Specific names may be added upon request acknowledgment): Title: FOIA Coordin	Senior FOIA Officers (Specific names may be added upon request acknowledgment): Title: FOIA Coordin	Senior FOIA Officers (Specific names may be added upon request acknowledgment): Title: FOIA Coordin	Senior FOIA Officers (Specific names may be added upon request acknowledgment): Title: FOIA Coordin
Andrea Barton Reeves Title: Commissioner Position in Chain of Command: Head of the Connecticut Depa	Andrea Barton Reeves Title: Commissioner Position in Chain of Command: Head of the Connecticut Depa	Andrea Barton Reeves Title: Commissioner Position in Chain of Command: Head of the Connecticut Depa	Andrea Barton Reeves Title: Commissioner Position in Chain of Command: Head of the Connecticut Depa
Matthew S. Antonetti Title: Legal Director Position in Chain of Command: Senior Legal Officer, DSS	Matthew S. Antonetti Title: Legal Director Position in Chain of Command: Senior Legal Officer, DSS	Matthew S. Antonetti Title: Legal Director Position in Chain of Command: Senior Legal Officer, DSS	Matthew S. Antonetti Title: Legal Director Position in Chain of Command: Senior Legal Officer, DSS
Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and Program Coordinator,	Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and Program Coordinator,	Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and Program Coordinator,	Astread Ferron-Poole Title: Associate Position in Chain of Command: Policy and Program Coordinator,
Manisha Juthani, MD Title:	Manisha Juthani, MD Title:	Manisha Juthani, MD Title:	Manisha Juthani, MD Title: Commissioner Position in



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*Denotes required fields.

Commissioner Position in Chain of Command: Head of the Connecticut Depar	Commissioner Position in Chain of Command: Head of the Connecticut Depar	Commissioner Position in Chain of Command: Head of the Connecticut Depar	Chain of Command: Head of the Connecticut Depar
William Tong Title: Attorney General, State of Connecticut Position in Chain of Command: Chief Lega	William Tong Title: Attorney General, State of Connecticut Position in Chain of Command: Chief Lega	William Tong Title: Attorney General, State of Connecticut Position in Chain of Command: Chief Lega	William Tong Title: Attorney General, State of Connecticut Position in Chain of Command: Chief Lega
Chiquita Brooks- LaSure Title: Administrator Position in Chain of Command: Leader of the Centers for	Chiquita Brooks- LaSure Title: Administrator Position in Chain of Command: Leader of the Centers for	Chiquita Brooks- LaSure Title: Administrator Position in Chain of Command: Leader of the Centers for	Chiquita Brooks-LaSure Title: Administrator Position in Chain of Command: Leader of the Centers for
Xavier Becerra Title: Secretary, U.S. Department of Health and Human Services (HHS) Position in Cha	Xavier Becerra Title: Secretary, U.S. Department of Health and Human Services (HHS) Position in Cha	Xavier Becerra Title: Secretary, U.S. Department of Health and Human Services (HHS) Position in Cha	Xavier Becerra Title: Secretary, U.S. Department of Health and Human Services (HHS) Position in Cha
Jeffrey R. Beckham Title: Secretary Position in Chain of Command: Leader of the Connecticut Office	Jeffrey R. Beckham Title: Secretary Position in Chain of Command: Leader of the Connecticut Office	Jeffrey R. Beckham Title: Secretary Position in Chain of Command: Leader of the Connecticut Office	Jeffrey R. Beckham Title: Secretary Position in Chain of Command: Leader of the Connecticut Office
Ned Lamont Title: Governor Position in Chain of Command: Chief	Ned Lamont Title: Governor Position in Chain of Command: Chief	Ned Lamont Title: Governor Position in Chain of Command:	Ned Lamont Title: Governor Position in Chain of Command: Chief Executive of the State of Connecticu



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*Denotes required fields.

Executive of the State of Connecticut	Executive of the State of Connecticut	Chief Executive of the State of Connecticut	
Andrea Barton Reeves Title: Commissioner Agency: Connecticut Department of Social Services (DSS) Ro	Andrea Barton Reeves Title: Commissioner Agency: Connecticut Department of Social Services (DSS) Ro	Andrea Barton Reeves Title: Commissioner Agency: Connecticut Department of Social Services (DSS) Ro	Andrea Barton Reeves Title: Commissioner Agency: Connecticut Department of Social Services (DSS) Ro
Manisha Juthani, MD Title: Commissioner Agency: Connecticut Department of Public Health (DPH) Role:	Manisha Juthani, MD Title: Commissioner Agency: Connecticut Department of Public Health (DPH) Role:	Manisha Juthani, MD Title: Commissioner Agency: Connecticut Department of Public Health (DPH) Role:	Manisha Juthani, MD Title: Commissioner Agency: Connecticut Department of Public Health (DPH) Role:
Chiquita Brooks-LaSure Title: Administrator Agency: Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure Title: Administrator Agency: Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure Title: Administrator Agency: Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure Title: Administrator Agency: Centers for Medicare & Medicaid Services (CMS)
Xavier Becerra Title: Secretary Agency: U.S. Department of Health and Human Services (HHS) Role: Pr	Xavier Becerra Title: Secretary Agency: U.S. Department of Health and Human Services (HHS) Role: Pr	Xavier Becerra Title: Secretary Agency: U.S. Department of Health and Human Services (HHS) Role: Pr	Xavier Becerra Title: Secretary Agency: U.S. Department of Health and Human Services (HHS) Role: Pr
William Tong Title: Attorney General Agency: Connecticut Office of the Attorney	William Tong Title: Attorney General Agency: Connecticut Office of the Attorney	William Tong Title: Attorney General Agency: Connecticut Office of the Attorney	William Tong Title: Attorney General Agency: Connecticut Office of the Attorney General Role: Respo



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*Denotes required fields.

General Role: Respo	General Role: Respo	Attorney General Role: Respo	
Christi Grimm Title: Inspector General Agency: U.S. Department of Health and Human Services, Office	Christi Grimm Title: Inspector General Agency: U.S. Department of Health and Human Services, Office	Christi Grimm Title: Inspector General Agency: U.S. Department of Health and Human Services, Office	Christi Grimm Title: Inspector General Agency: U.S. Department of Health and Human Services, Office
Andrea Barton Reeves Title: Commissioner Agency: Connecticut Department of Social Services (DSS) Po	Andrea Barton Reeves Title: Commissioner Agency: Connecticut Department of Social Services (DSS) Po	Andrea Barton Reeves Title: Commissioner Agency: Connecticut Department of Social Services (DSS) Po	Andrea Barton Reeves Title: Commissioner Agency: Connecticut Department of Social Services (DSS) Po
Matthew S. Antonetti Title: Legal Director Agency: Connecticut Department of Social Services (DSS)	Matthew S. Antonetti Title: Legal Director Agency: Connecticut Department of Social Services (DSS)	Matthew S. Antonetti Title: Legal Director Agency: Connecticut Department of Social Services (DSS)	Matthew S. Antonetti Title: Legal Director Agency: Connecticut Department of Social Services (DSS)
Astread Ferron- Poole Title: Policy and Program Coordinator Agency: Connecticut Department of Social	Astread Ferron- Poole Title: Policy and Program Coordinator Agency: Connecticut Department of Social	Astread Ferron- Poole Title: Policy and Program Coordinator Agency: Connecticut Department of Social	Astread Ferron-Poole Title: Policy and Program Coordinator Agency: Connecticut Department of Social
Michelle A. James Title: Medicaid Compliance Officer Agency: Centers for	Michelle A. James Title: Medicaid Compliance Officer Agency: Centers for	Michelle A. James Title: Medicaid Compliance Officer Agency: Centers for	Michelle A. James Title: Medicaid Compliance Officer Agency: Centers for Medicare & Medicaid Servic



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*Denotes required fields.

Medicare & Medicaid Serv	Medicare & Medicaid Serv	Medicare & Medicaid Serv	
Emmett Nicholson Title: Senior Administrator Agency: Centers for Medicare & Medicaid Services (CMS)	Emmett Nicholson Title: Senior Administrator Agency: Centers for Medicare & Medicaid Services (CMS)	Emmett Nicholson Title: Senior Administrator Agency: Centers for Medicare & Medicaid Services (CMS)	Emmett Nicholson Title: Senior Administrator Agency: Centers for Medicare & Medicaid Services (CMS)
William Tong Title: Attorney General Agency: Connecticut Office of the Attorney General Position in	William Tong Title: Attorney General Agency: Connecticut Office of the Attorney General Position in	William Tong Title: Attorney General Agency: Connecticut Office of the Attorney General Position in	William Tong Title: Attorney General Agency: Connecticut Office of the Attorney General Position in
Manisha Juthani, MD Title: Commissioner Agency: Connecticut Department of Public Health (DPH) Posit	Manisha Juthani, MD Title: Commissioner Agency: Connecticut Department of Public Health (DPH) Posit	Manisha Juthani, MD Title: Commissioner Agency: Connecticut Department of Public Health (DPH) Posit	Manisha Juthani, MD Title: Commissioner Agency: Connecticut Department of Public Health (DPH) Posit
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Chiquita Brooks-LaSure Title: Administrator Agency: Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure Title: Administrator Agency: Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure Title: Administrator Agency: Centers for Medicare & Medicaid Services (CMS)	Chiquita Brooks-LaSure Title: Administrator Agency: Centers for Medicare & Medicaid Services (CMS)



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REQUESTED OSC ACTION

What action would you like OSC to take?

Comprehensive documentation is also attached.

Conduct a Comprehensive Investigation

Initiate a thorough investigation into the Connecticut Department of Public Health (DPH) for violations of federal statutes, including:

Americans with Disabilities Act (ADA) Title II (42 U.S.C. § 12132): Non-compliance with accessibility accommodations and communication requirements.

Freedom of Information Act (FOIA, 5 U.S.C. § 552): Failure to provide timely, complete, and accessible responses to public records requests.

Whistleblower Protection Act (5 U.S.C. § 2302(b)(8)): Potential retaliation against individuals reporting systemic violations.

Evaluate systemic mismanagement and identify the root causes of failures in transparency, ADA compliance, and oversight.

Mandate Federal Oversight

Request independent federal oversight of the Connecticut Medicaid ABI Waiver Program and related state agencies to:

Ensure transparency and compliance with federal and constitutional laws.

Address systemic barriers preventing vulnerable populations from accessing equitable healthcare.

Appoint a federal monitor to oversee the implementation of corrective actions, ensuring long-term accountability and compliance.

Ensure Corrective Actions

Require the Connecticut Department of Public Health and all implicated agencies to:

Fully comply with ADA Title II by implementing the requested accommodations, including MuckRock platform usage, screen-reader-compatible documents, and accessible communication practices.



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Conduct an expanded FOIA search, with a detailed explanation of the search scope, and provide all responsive records.

Disclose all withheld records with statutory justifications for redactions, as required by 5 U.S.C. § 552(b).

Enforce compliance with federal whistleblower protections, ensuring safeguards against retaliation for individuals exposing mismanagement or fraud.

Enforce Accountability

Hold responsible individuals accountable for their roles in these systemic failures, including but not limited to:

Failure to enforce transparency and ADA compliance.

Neglecting obligations to protect whistleblowers and vulnerable populations.

Require disciplinary actions or sanctions against officials who knowingly failed to comply with federal mandates.

Pursue Financial Restitution

Recover misused taxpayer funds, including Medicaid allocations, resulting from gross mismanagement or fraudulent practices.

Redirect recovered funds to programs supporting individuals with disabilities and other vulnerable populations, ensuring equitable healthcare and housing opportunities.

Strengthen Federal-State Collaboration

Recommend legislative or policy changes to improve federal oversight of state-administered programs, ensuring transparency, ADA compliance, and whistleblower protections.

Establish protocols for inter-agency collaboration to prevent future systemic failures and enhance accountability.

Implement Public Transparency Measures

Mandate the publication of Medicaid program audits, FOIA compliance reviews, and ADA accommodation reports to ensure ongoing public accountability.

Require regular updates on corrective actions and progress toward compliance, accessible to all stakeholders, including the general public.

Safeguard Against Future Violations

Develop and enforce robust federal guidelines for ADA accommodations and FOIA



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compliance to be followed by all state agencies.

Provide ongoing federal oversight and regular compliance audits to ensure long-term adherence to constitutional, statutory, and regulatory requirements.

Conclusion

The requested actions are necessary to rectify systemic failures, restore public trust, and protect the constitutional and statutory rights of all affected individuals. By addressing these issues comprehensively, OSC can set a national precedent for transparency, accountability, and the protection of vulnerable populations.

WHERE ELSE DID YOU REPORT THIS MATTER?

I have also disclosed this information to:

Other Action Type	Action Taken Date

Additional information about reports to Inspectors General, if applicable.

First Name:

Last Name:

Title:

Address:

Email Address:

Telephone Number:

Case ID #:

a. **What is the status of the matter?**

NOTE: MATTERS INVESTIGATED BY AN OFFICE OF INSPECTOR GENERAL

It is the general policy of OSC not to transmit allegations of wrongdoing to the head of the agency involved if the agency's Office of Inspector General has fully investigated, or is currently investigating, the same allegations.

ATTACHMENTS

Please note that the space available for attachments is limited. Therefore, DO NOT attach every document and email that may be relevant to your claim. You will have an opportunity to make additional submissions at a later date. We recommend limiting attachments to



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official forms and correspondence that document the action(s) at issue in your disclosure if these documents are relevant to your allegations.

I have attached the following documents to my filing:

File Name
12.04.2024 Protecting and Representing All Americans A Call for the United States to Uphold Justice Accountability and Constitutional Rights Representation Medicaid DB.42.131.Inf. ABI Medeiros Connecticut DOGE .pdf
Records Pertaining to Medicaid Services for NPI 1962278119 and NPI 1023012345 (Department of Public Health) (1).zip
09.24.2024 Federal_Intervention_HHS_OIG_CMS_GAO_DOJ_OCR_Whistleblower_Report_2024.pdf
Records Pertaining to Medicaid Services for NPI 1962278119 and NPI 1023012345 (Department of Health and Human Services) (1).zip
Records Pertaining to Medicaid Services for NPI 1962278119 and NPI 1023012345 (Department of Health and Human Services) (1).zip
Records Pertaining to Medicaid Services for NPI 1962278119 and NPI 1023012345 (Department of Health and Human Services, Centers for Medicare & Medicaid Services) (1).zip
Records Pertaining to Medicaid Services for NPI 1962278119 and NPI 1023012345 (Department of Health and Human Services Office of Inspector General) (1).zip
Records Pertaining to Medicaid Services for NPI 1962278119 and NPI 1023012345 (Department Of Justice) (1).zip
Records Pertaining to Medicaid Services for NPI 1962278119 and NPI 1023012345 (Department of Justice, Department of Justice, Office of Justice Programs) (1).zip
Records Pertaining to Medicaid Services for NPI 1962278119 and NPI 1023012345 (Department of Justice, Criminal Division) (1).zip
Records Pertaining to Medicaid Services for NPI 1962278119 and NPI 1023012345 (Department of Labor) (1).zip
Records Pertaining to Medicaid Services for NPI 1962278119 and NPI 1023012345 (Department of Social Services) (2).zip
Records Pertaining to Medicaid Services for NPI 1962278119 and NPI 1023012345 (Department of Labor, Wage and Hour Division) (2).zip
Records Pertaining to Medicaid Services for NPI 1962278119 and NPI 1023012345 (Department of Public Health) (2).zip
Records Pertaining to Medicaid Services for NPI 1962278119 and NPI 1023012345 (Department of Public Health) (2).zip



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Records Pertaining to Medicaid Services for NPI 1962278119 and NPI 1023012345 (Department of Public Health) (1).zip
Federal Representation for Justice DB.42.131.Inf. Medeiros Connecticut 11.28.2024 .pdf
requests (10).csv

CONSENT

Do you consent to the disclosure of your identify to others outside OSC if it becomes necessary in taking further action on this matter?*

I consent to disclosure of my identity.

Yes

I do not consent to disclosure of my identity. (Even if you do not consent, OSC may disclose your identity if necessary due to an imminent danger to public health or safety or imminent violation of any criminal law. See 5 U.S.C. § 1213(h).)

No

CERTIFICATION

I certify that all of the statements made in this complaint are true, complete, and correct to the best of my knowledge and belief. I understand that a false statement or concealment of a material fact is a criminal offense punishable by a fine, imprisonment, or both. 18 U.S.C. § 1001.*

Yes

BURDEN: The burden for this collection of information (including the time for reviewing instructions, searching existing data sources, gathering the data needed, and completing and reviewing the form) is estimated to be an average of one hour to submit a disclosure of information alleging agency wrongdoing, one hour and fifteen minutes to submit a complaint alleging a prohibited personnel practice or other prohibited activity, or 30 minutes to submit a complaint alleging prohibited political activity. Please send any comments about this burden estimate, and suggestions for reducing the burden, to the U.S.



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Office of Special Counsel, General Counsel's Office, 1730 M Street, NW, Suite 218,
Washington, DC 20036-4505.

This Disclosure of Information was Received by OSC on: 12/4/2024

***PLEASE KEEP A COPY OF YOUR COMPLAINT, ANY SUPPORTING
DOCUMENTATION, AND ANY ADDITIONAL ALLEGATIONS THAT YOU SEND
TO OSC NOW OR AT ANY TIME WHILE YOUR COMPLAINT IS PENDING.
REPRODUCTION CHARGES UNDER THE FREEDOM OF INFORMATION ACT
MAY APPLY TO ANY REQUEST YOU MAKE FOR COPIES OF MATERIALS THAT
YOU PROVIDED TO OSC.***



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IMPORTANT INFORMATION ABOUT FILING A DISCLOSURE

OSC WHISTLEBLOWER DISCLOSURE CHANNEL

Under 5 U.S.C. § 1213 and related provisions, the Office of Special Counsel (OSC) serves as a secure channel for federal employees, former federal employees, and applicants for federal employment with reliable knowledge of the wrongdoing to disclose:

- a violation of law, rule or regulation;
- gross mismanagement;
- gross waste of funds;
- an abuse of authority;
- a substantial and specific danger to public health or safety; and/or
- censorship related to scientific research.

OSC JURISDICTION

OSC has no jurisdiction over disclosures filed by:

- employees of the U.S. Postal Service and the Postal Regulatory Commission;
- members of the armed forces of the United States (*i.e.*, non-civilian military employees);
- state employees operating under federal grants;
- employees of federal contractors;
- other employees or federal agencies that are exempt under federal law; and
- Congressional or judicial branch employees.

ANONYMOUS SOURCES

While OSC will protect the identity of persons who make disclosures, it will not consider anonymous disclosures. If a disclosure is filed by an anonymous source, the disclosure will be referred to the Office of Inspector General in the appropriate agency. OSC will take no further action.

RETALIATION

Do you believe you suffered retaliation by your agency for disclosing wrongdoing? If yes, you may file a complaint of retaliation by navigating back to "My Cases" and selecting "New Complaint." Select Option 1 to complete and submit a Complaint of Prohibited Personnel Practice or other Prohibited Activity (PPPs). *If you have already completed the Complaint of Prohibited Personnel Practice or other Prohibited Activity above, please continue with this Disclosure.* PPPs are employment-related activities that are banned in the federal workforce.



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PPPs generally involve some type of personnel decision or action and may result in personal relief for people who have been subject to a PPP. For example, if we find that you were removed from federal service in retaliation for whistleblowing, OSC may act to get your job back. PPPs can also include allegations of harassment, failure to issue appraisals, and improper hiring. Do not file a disclosure to report retaliation or other PPPs.

CONTACT INFORMATION

Title:

First Name:* David

Middle Initial:

Last Name:* Medeiros

International Address?: No

Address:*

215 Mountain St
Willimantic, CT 06226

Cell Phone Number:

Home Phone Number:

Office Phone Number:

Ext.

Email Address:* aabiwr@live.com

Preferred means of contact:

Email: Yes

Cell phone: No

Home phone: No

Office phone: No

REPRESENTATIVE INFORMATION

Do you have representation? No

Information about representative, if applicable.

First Name:*

Middle Initial:

Last Name:*

International Address?:

Address: *