- Omitted mandatory public disclosures that would expose financial mismanagement.

Federal Oversight Bodies:

1. **Centers for Medicare & Medicaid Services (CMS):**
    - Failed to audit or investigate Connecticut's Medicaid program despite clear indicators of mismanagement.
2. **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.
3. **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:

1. **Retaliation Against Whistleblowers**:
    - Suppressed complaints and retaliated against individuals, including David Medeiros, who attempted to expose wasteful practices or seek transparency.
2. **Deliberate Obfuscation of Records**:

- Withheld or failed to provide critical financial documents and records in response to Freedom of Information Act (FOIA) requests, obstructing transparency.

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:

1. **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.
2. **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**.
3. **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 documented complaints of Medicaid mismanagement as early as **2021**, despite growing evidence of systemic financial inefficiencies.

4. **Delays in Transparency and Accountability Measures**

    - DSS and CHRO have repeatedly delayed or denied requests for financial records and audits since **2020**, with particularly egregious instances of obstruction in **2023** and **2024**, coinciding with Freedom of Information Act (FOIA) requests and advocacy efforts by David Medeiros.

5. **Legislative and Policy Failures**

    - Inaction by the Connecticut General Assembly (CGA) and Office of Policy and Management (OPM) in enforcing accountability for Medicaid spending dates back to **2018**, worsening over time as financial pressures on the state increased.

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:

1. **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.
2. **Complaints Filed and 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.
3. **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.

4. **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.
5. **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.
6. **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.

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

1. **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.

2. **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.

3. **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.

4. **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.

5. **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.

6. **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.

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.

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: *

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

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

	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-

	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

	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

	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