requests in which the estimated fees exceed $250.00, the law authorizes us to collect the fees *in advance* prior to processing the request.

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

If you are not satisfied with any aspect of the processing and handling of this request, please contact Angelica Holland.

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

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

and/or:

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

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

Sincerely yours,

Hugh Gilmore
Deputy Director/FOIA Officer
Freedom of Information Group

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

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

Request has been assigned: Control Number **060520237010** and PIN **RRY4**

6/7/2023

DAVID MEDEIROS.
39 Kings Highway, STE C.
Gales Ferry, CT 06335

Dear Mr. Medeiros:

The purpose of this letter is to acknowledge receipt of your Freedom of Information Act (FOIA) request (5 U.S.C. § 552) and to provide you with a tracking number for your request. Your FOIA request, dated **6/5/2023** was received on **6/5/2023** by the Centers for Medicare & Medicaid Services (CMS). To check the status of your request as it is being processed, please refer to the CMS FOIA website http://www.cms.gov/apps/FOIA and enter the control number and PIN (listed above) that have been assigned to your request.

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

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

The FOIA law assumes that requesters are willing to pay fees up to $25.00. If estimated fees to process your request exceed $25.00, we will notify you and may suspend processing until we receive written confirmation that you are willing to pay the estimated fees. Additionally, for

requests in which the estimated fees exceed $250.00, the law authorizes us to collect the fees *in advance* prior to processing the request.

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

If you are not satisfied with any aspect of the processing and handling of this request, please contact Angelica Holland.

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

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

and/or:

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

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

Sincerely yours,

Hugh Gilmore
Deputy Director/FOIA Officer
Freedom of Information Group

Who: Medicaid Consumers, The Connecticut Department of Social Services CT DSS, and The Supported Living Group LLC.

What: Medicaid Programs; ABI Waiver Program l and ll and the Money Follows the Medicaid Consumer Program, MFP.

How: Using the Medicaid Consumer's disabilities against the Medicaid Consumer, the need for financial support to recover at home and the family's need to return to work, and the Medicaid Consumer's economic desperation against the Medicaid Consumer to gain.

Why: To cut CT DSS operation costs for monetary gain.

The Connecticut Department of Social Services is manipulating Medicaid Consumers for financial gain. Medicaid services for consumers recovering from brain injuries. CT DSS uses the Medicaid Consumer's disabilities against them. DSS is Monopolizing on desperation, time constraints, compromised communication skills, memory challenges, and cognition. CT DSS is fostering and praying on disabled Medicaid consumers' lack of informed knowledge and awareness of the policies of Medicaid programs. CT DSS is arranging and assigning The Supported Living Group to Medicaid consumers forcing, misleading, and tricking the unaware into using the Medicaid services of the Supported Living Group LLC.

The Connecticut Department of Social Services first provides the Supported living group the Medicaid consumer's Medicaid Consumer information. Secondly, CT DSS informs Medicaid consumers when home Medicaid services will begin through The Supported Living Group LLC. This process is completed verbally, mostly over phone calls, leaving the Medicaid Consumer at the will of CT DSS directives and conversation time constraints. During this time, the Medicaid Consumer is not made aware of the DSS-approved agency provider list and that there are numerous Medicaid-approved agencies to select from. Medicaid-approved provider list or that they have the right to choose. In most cases, CT DSS specifies and dictates The Supported living group LLC to the Medicaid Consumer. If by chance, during this process, the Medicaid Consumer independently discovers they are being misled, CT DSS verbally explains that the DSS-approved Medicaid provider list is not good or outdated.

The Connecticut Department of Social Services is violating the policies of the Medicaid MFP Money Follows the Medicaid Consumer Program and the Medicaid ABI Waiver Program by forcing, tricking, or misleading Medicaid program consumers to use Medicaid services by The Supported living Group LLC.

It may appear that Connecticut is benefiting financially from a kickback system of manipulations.

CT DSS is forcing Medicaid consumers to make quick decisions before they can research, discover, and invoke their rights.

CT DSS monopolizes a crafted system expecting Medicaid consumers to know their rights under the Medicaid program before they know the specifics.

CT DSS care management is the only Medicaid program information source permitted to communicate with Medicaid consumers about their Medicaid services. Medicaid Agency-provided verbal information

or communication about Medicaid services is not allowed calling this manipulation of the care management process.

CT DSS retaliates on Medicaid agency providers communicating with Medicaid consumers about Medicaid services.

CT DSS makes it clear that Medicaid agency provider efforts to inform Medicaid consumers Informing Medicaid Consumers where to locate information about Medicaid programs result in possible removal from CT DSS Medicaid-managed programs and threats of DSS audits.

CT DSS is masking Medicaid program information.

CT DSS is misleading Medicaid consumers and complicating their ability to make informed decisions.

CT DSS is funneling directly to and promoting The Supported Living Groups Medicaid services.

CT DSS is providing Medicaid Consumer programs directly to the Supported Living Group LLC.

CT DSS gives little or no attention to reports of manipulations or kickbacks.

CT DSS provides no system to report care management discrimination. CT DSS does not need to investigate or fix problems if there is no way of reporting problems.

CT DSS uses a covert internet-based lock and key system to hinder disabled Medicaid consumers from viewing the approved Medicaid agency provider list. Using disability against the Medicaid consumer, knowing that individuals cannot ask for what they don't know exists. The ability of Medicaid consumers to make informed decisions about their Medicaid service provider choices.

CT DSS is hiding the Medicaid-approved provider list from Medicaid consumers' awareness, using complex and misleading website processes.

CT DSS fosters a complex online self-discovery method to confuse and frustrate Medicaid consumers to follow their instructions.

CT DSS will use requests and directives from people that are not Medicaid consumers or legal conservators to their vantage.

CT DSS' Medicaid Approved provider list is intentionally biased and manipulated to benefit CT DSS operation costs, not the Medicaid consumer.

CT DSS promotes the Supported living Group LLC's contact information more than four times on the Medicaid agency provider List.

They are turning a blind eye to the challenge as it benefits them financially and reduces the time, they must use to ensure Medicaid services.

CT is promoting kickback systems.

CT DSS Care Management agencies display valuable artwork in their offices. This art is a promotional tool to advertise to Medicaid consumers within their offices consistently. The Supported Living Group LLC provides the art.

CT DSS care management uses the Supported living Groups artwork for website advertising and internet-based social media sites promoting The Supported Living Group Medicaid Services.

CT DSS care management agencies save money by reducing their time and effort. Some of the cost practical benefits of CT by having one place to contact and one location to have multiple required meetings on the same day.

CT DSS is forcing The Supported Living Groups' Medicaid Therapist on clients.

CT DSS uses the Medicaid Consumers' disabilities against them to achieve the agenda using verbal conversation verses as this documented communication to hide their actions and avoid a paper trail.

Vision and mobility challenges.

The number of consumers on the program versus the number of clients The Supported Living Group serves. Grossly disproportionate to the amount of Medicaid service providers.

Provider list that is arranged and presented to confuse, frustrate, and manipulate Medicaid consumers

Not collecting data to manipulate FOIA requests. Information such as

The Connecticut Department of Social Services covertly forced 25 people on the Medicaid ABI program, receiving around-the-clock Medicaid home services, to use a Medicaid agency called The Supported Living Group LLC in a kickback scheme. CT DSS, Betty Miller-Jaynes, a Goodwill Industries of Western and Northern ABI manager, and The Supported living Group LLC organized and implemented the kickback plan. Medicaid clients were tricked and forced to receive their services from The Supported Living Group llc. CT DSS helped to organize and implement the plan. Betty Miller-Jaynes is now the supported living group’s director and the 25 clients were forced to use supported living group Medicaid services and may be trapped into keeping that company. 60 Medicaid staff also were forced to change and be with them to. We are afraid to report this.

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

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

Tue 9/26/2023 8:24 AM

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

David –

Your request for information has been received.

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

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

Thank you.

FOIA Officer
Department of Social Services

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

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

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

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

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

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

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

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

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

Aabiwr@live.com

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

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

Sincerely,

David Medeiros
ABI Resources LLC

RE: Verification Request | Fw: Request for Documentation to Update and Confirm Information on Provider Registries unsecure

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

Mon 3/20/2023 3:56 PM

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

Good Afternoon,

Your request for information has been received.

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

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

Thank you.

FOIA Officer
Department of Social Services
55 Farmington Avenue
Hartford, Connecticut 06105

From: ABI RESOURCES 860 942-0365 <aabiwr@live.com>
Sent: Monday, March 20, 2023 7:12 AM
To: Cavallaro, Jennifer <Jennifer.Cavallaro@ct.gov>; Chase, Paul <Paul.Chase@ct.gov>; Slitt, Michael <Michael.Slitt@ct.gov>; DSS, FOIA <FOIA.DSS@ct.gov>; Dumont, Amy E <Amy.Dumont@ct.gov>; Orejuela, Elizabeth <Elizabeth.Orejuela@ct.gov>
Cc: ABI Resources HIPAA Secure Correspondence www.CTBRAININJURY.com <abi@ctbraininjury.com>
Subject: Re: Verification Request | Fw: Request for Documentation to Update and Confirm Information on Provider Registries unsecure

Dear COU/CT DSS Recipients,

I hope this email finds you well. I am writing to inquire about a discrepancy in the correspondence I have been receiving from the COU/CT DSS.

On 3/10/2023, I received an email from ACR containing certain information that is crucial for ABI Resources to provide effective services to our clients and ensure the community has complete access to our services. However, I have not been receiving any correspondence from the COU/CT DSS regarding this matter. This has raised concerns about the accuracy and reliability of the information provided.

In light of this, I would like to kindly request your assistance in verifying the accuracy of the information provided by ACR in the email below:

[Again, Included within this email thread is the ACR email in reference]

Please confirm the accuracy of this information. If you find any inaccuracies or outdated information, kindly inform us and provide the correct details.

Additionally, I would appreciate it if you could look into the issue of why I have not been receiving correspondence from the COU/CT DSS on this subject, and advise on any necessary steps to rectify the situation.

Your assistance in ensuring that our organization has access to accurate and up-to-date information is greatly appreciated. Please let us know if there are any further steps we need to take in order to obtain this verification.

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

All the best,
David Medeiros

A.B.I. RESOURCES

WEBSITE | FACEBOOK | BLOG | YOUTUBE

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

An amazing opportunity to be a part of something much greater than ourselves, supporting people become the best version of themselves.

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

From: ABI RESOURCES 860 942-0365 <aabiwr@live.com>
Sent: Tuesday, March 14, 2023 8:47 AM
To: Jennifer.cavallaro@ct.gov <Jennifer.Cavallaro@ct.gov>; Paul <paul.chase@ct.gov>; Slitt, Michael <Michael.Slitt@ct.gov>; foia.dss@ct.gov <FOIA.DSS@ct.gov>; Amy Dumont <amy.dumont@ct.gov>; elizabeth orejuela <Elizabeth.Orejuela@ct.gov>
Cc: ABI Resources HIPAA Secure Correspondence www.CTBRAININJURY.com <abi@ctbraininjury.com>
Subject: Fw: Verification Request | Fw: Request for Documentation to Update and Confirm Information on Provider Registries unsecure

Hello COU / CT DSS,

I am reaching out on behalf of ABI Resources to request verification of the accuracy of the information provided by ACR within this email below.

As you know, it is crucial that our organization has access to accurate and up-to-date information in order to effectively provide services to our clients as well as ensure the community has complete access to our services. Therefore, we would like to request that DSS verify the accuracy of the following information provided by ACR bellow:

We kindly request that you confirm the accuracy of this information as soon as possible. If any of the information is found to be inaccurate or out of date, would you please let us know and provide us with the correct information?

We greatly appreciate your help in ensuring that our organization has access to accurate information. Please let us know if there are any additional steps we need to take in order to obtain this verification.

Thank you for your time and attention to this matter. We look forward to hearing back from you soon.

All the best,
David Medeiros

A.B.I. RESOURCES

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

From: ABI RESOURCES 860 942-0365 <AABIWR@LIVE.COM>
Sent: Monday, March 13, 2023 9:49 AM
To: Amy Dumont <amy.dumont@ct.gov>
Cc: ABI Resources HIPAA Secure Correspondence www.CTBRAININJURY.com <abi@ctbraininjury.com>
Subject: Verification Request | Fw: Request for Documentation to Update and Confirm Information on Provider Registries unsecure

Hello Amy,

I am reaching out on behalf of ABI Resources to request verification of the accuracy of the information provided by ACR.

As you know, it is crucial that our organization has access to accurate and up-to-date information in order to effectively provide services to our clients as well as ensure the community has complete access to our services. Therefore, we would like to request that DSS verify the accuracy of the following information provided by ACR bellow:

We kindly request that you confirm the accuracy of this information as soon as possible. If any of the information is found to be inaccurate or out of date, would you please let us know and provide us with the correct information?

We greatly appreciate your help in ensuring that our organization has access to accurate information. Please let us know if there are any additional steps we need to take in order to obtain this verification.

Thank you for your time and attention to this matter. We look forward to hearing back from you soon.

All the best,
David Medeiros

A.B.I. RESOURCES

WEBSITE | FACEBOOK | BLOG | YOUTUBE

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

An amazing opportunity to be a part of something much greater than ourselves, supporting people become the best version of themselves.

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

From: Marihonor Flagg <mflagg@alliedgroup.org>
Sent: Monday, March 13, 2023 8:25 AM
To: ABI RESOURCES L.L.C. 860 942-0365 <AABIWR@LIVE.COM>
Cc: Valerie Giannelli <vgiannelli@alliedgroup.org>; Nicole Simmons <nsimmons@alliedgroup.org>
Subject: FW: Request for Documentation to Update and Confirm Information on Provider Registries unsecure

Greetings – the answers are in red. Also, the acr@alliedgroup.org is for general document submission only. You do not need to CC that email address on correspondences.

Marihonor Flagg
Outreach & Training Coordinator
Allied Community Resources
Fax: (860) 627-0230

From: ABI RESOURCES 860 942-0365 <AABIWR@LIVE.COM>
Sent: Saturday, March 11, 2023 6:59 AM
To: Marihonor Flagg <mflagg@alliedgroup.org>; ACR@alliedgroup.org
Cc: ABI Resources HIPAA Secure Correspondence www.CTBRAININJURY.com <abi@ctbraininjury.com>
Subject: Re: Request for Documentation to Update and Confirm Information on Provider Registries unsecure

Thank you Marihonor,

I hope this email finds you well. I am reaching out to inquire about the ACR Provider List and our listing on it. I noticed that several agencies are listed 3 to 4 times with the same information, and I was wondering if ABI Resources may do the same? Would ACR please list ABI Resources on the ACR Provider List in the same manner as other agencies listed 3 to 4 times with the same information? The directory is produced by program. ABI Resources participates in the ABI Program and appears on that directory only.

What is the process for being listed at the top of the ACR Provider List and how may ABI Resources ensure that we are consistently listed at the top of the list? The directory is sorted by alphabetical order.

As a reputable agency, we would like to ensure that our services are easily accessible to those seeking care, and being listed at the top of the provider list would help us achieve this goal. Therefore, I would appreciate any information you can provide on how this process works and what we can do to be listed at the top consistently. The directory is sorted by alphabetical order

Additionally, the ACR PIU document provided does not show areas and locations, which raises the concern that ABI Resources may not be listed for all areas. Therefore, I would like to ensure that we are listed for all areas to better serve our clients. ABI Resources is listed for statewide services as indicated on the directory page I sent you on Friday.

Furthermore, the ACR PIU document provided does not show service types, including PCA services. As ABI Resources offers a wide range of services, I would like to ensure that we are listed for all services, including PCA services, to make it easier for our clients to find us and access the care they need. We have you in our system for the ABI Program only. If you wish to add the PCA Program, please send in current copies of your insurance certificates (liability, WC, theft) and your DCP. We will process your request and send you the letter you will need to enroll for PCA Waiver billing.

Lastly, we would like to inquire about the accessibility of the ACR Provider List to the public and what steps consumers need to take to access the list? Per DSS directive, the directory is not for public view. It is for program participants/reps and DSS care managers

As a provider of services, we would like to ensure that our clients and potential clients can easily access the list to find the services they need. Therefore, I would appreciate it if you could provide information on the accessibility of the list and any steps that consumers need to take to access it. It is not for public view

Would it be possible for you to provide us with the link to the public ACR Provider List, so we may share it with our clients and make it easier for them to access? There is no link to the Provider Directory that Allied produces and maintains

Please let me know if there are any steps we need to take to update our listing or if you require any additional information from us.

Thank you for your time and consideration.

All the best,
David Medeiros

A.B.I. RESOURCES

WEBSITE | FACEBOOK

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

An amazing opportunity to be a part of something much greater than ourselves, supporting people become the best version of themselves.

From: Marihonor Flagg <mflagg@alliedgroup.org>
Sent: Friday, March 10, 2023 2:59 PM
To: ABI RESOURCES 860 942-0365 <aabiwr@live.com>
Cc: ABI Resources HIPAA Secure Correspondence www.CTBRAININJURY.com <abi@ctbraininjury.com>
Subject: RE: Request for Documentation to Update and Confirm Information on Provider Registries unsecure

Hi David – attached please find the directory listing for your agency. I have attached an Update form to make any changes in the contact information if need be.
Thank you.

Marihonor Flagg
Outreach & Training Coordinator
Allied Community Resources
Fax: (860) 627-0230

From: ABI RESOURCES 860 942-0365 <aabiwr@live.com>
Sent: Friday, March 10, 2023 2:33 PM
To: ACR@alliedgroup.org; Marihonor Flagg <mflagg@alliedgroup.org>
Cc: ABI Resources HIPAA Secure Correspondence www.CTBRAININJURY.com <abi@ctbraininjury.com>
Subject: Request for Documentation to Update and Confirm Information on Provider Registries

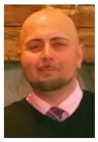
Hello Allied Community Resources,

I am writing on behalf of ABI Resources to request an update and confirmation of our information on your provider registries. We value our partnership with your organization and want to ensure that our information is accurate and up-to-date.

Could you kindly provide us with the documentation necessary to update and confirm our information on your provider registries? We are committed to providing quality services to our clients and believe that accurate information is essential to maintaining our reputation and credibility as a provider.

Thank you for your assistance in this matter. We appreciate your efforts to help us maintain the highest standards of professionalism and quality in our services.

All the best,
David Medeiros



A.B.I. RESOURCES

WEBSITE | FACEBOOK

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

An amazing opportunity to be a part of something much greater than ourselves, supporting people become the best version of themselves.

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

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

Tue 9/26/2023 7:10 AM

To:foia.dss@ct.gov <FOIA.DSS@ct.gov>;Commis DSS <commis.dss@ct.gov>

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

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

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

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

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

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

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

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

Aabiwr@live.com

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

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

Sincerely,

David Medeiros
ABI Resources LLC

FOIA Request 772431

The following list contains the entire submission submitted July 05, 2023 01:30:12pm ET, and is formatted for ease of viewing and printing.

Contact information

First name	DAVID
Last name	MEDEIROS
Mailing Address	39 Kings Highway, STE C
	STE C
City	Gales Ferry
State/Province	CT
Postal Code	06335
Country	United States
Phone	8604633638
Company/Organization	ABI RESOURCES LLC
Email	aabiwr@live.com

Request

Request ID	772431
Confirmation ID	771871
Request description	Subject: Freedom of Information Act Request: Connecticut Medicaid ABI Waiver Program Protocols I am writing to you under the Freedom of Information Act (FOIA), 5 U.S.C. § 552, on behalf of our agency, ABI RESOURCES. We seek access to records related to the Connecticut Medicaid Acquired Brain Injury (ABI) Waiver Program. We are particularly interested in acquiring the following: 1) Official procedures and protocols for reporting solicitation and poaching within the ABI Waiver Program. 2) Policies and guidelines that the Department of Social Services (DSS) has established to address such concerns. 3) The forms or documents required to be submitted for lodging such complaints. 4) Policies safeguarding clients and the whistleblowing entity from potential retaliation or backlash. We are aware that this request falls under the purview of public records, and we do not believe this request should incur fees as it is in the public interest. Sincerely, David Medeiros

Supporting documentation

Fees

Fee waiver	no

Expedited processing

Expedited Processing	yes

FOIA Request 667181

The following list contains the entire submission submitted April 04, 2023 11:45:05am ET, and is formatted for ease of viewing and printing.

Contact information

First name	DAVID
Last name	MEDEIROS
Mailing Address	39 Kings Highway, STE C
	STE C
City	Gales Ferry
State/Province	CT
Postal Code	06335
Country	United States
Phone	8604633638
Company/Organization	ABI RESOURCES LLC
Email	aabiwr@live.com

Request

Request ID	667181
Confirmation ID	666641
Request description	Dear Office of Information Policy (OIP) team, I would like to receive information regarding Connecticut's federally funded programs, specifically the Money Follows the Person (MFP) and the Acquired Brain Injury (ABI) Waiver programs. I am seeking clarity on the role of the Connecticut Community Options Units (COUs) in managing these programs. In particular, I would like to know if COU is responsible for managing these federally funded programs or if it is the Connecticut Department of Social Services (DSS) that manages them. I am also interested in finding out if COU receives federal funds to manage these programs. I would greatly appreciate any relevant information you can provide regarding these inquiries. Thank you for your attention to this matter. Sincerely, David Medeiros

Supporting documentation

Fees

Request category ID	media
Fee waiver	no

Expedited processing

Expedited Processing	no
Explanation	Dear Office of Information Policy (OIP) team, I am writing to request expedited processing of my FOIA request for information regarding Connecticut's federal funded programs, Money Follows the Person and the ABI Waiver program. I believe that my request meets the criteria for expedited processing under 5 U.S.C. § 552(a)(6)(E)(v)(II). The information I am seeking is urgently needed to protect the health and safety of vulnerable individuals enrolled in these programs.

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

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

10/16/2023

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

Dear Mr. Medeiros,

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

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

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

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

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

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

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

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

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

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

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

Respectfully,

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

Ongoing Silence! Lack of Transparency in Connecticut's Federally Funded Programs Raises Alarm

Secret Directory and Practices: Concerns Rise for Brain-Injured Individuals in Connecticut Medicaid

Federal Anti-Kickback Statute | Medicaid Referral Fraud | ABI RESOURCES

Transparency and Accountability Concerns in CT's Federally Funded Programs for Brain Injury Care

Care Managers. Do you have the right to change yours? Understanding Protecting Your Freedoms

Investigating the Legality and Impact of CCC's Secret Electronic Randomization System on Federally

Disability Rights Connecticut (DRCT) Team

Dear Brain Injury Alliance of Connecticut (BIAC)

Dear Governor Ned Lamont, Advocacy Request for Brain Injury Survivors

Alleged Discrimination at Connecticut Community Care | Calls for Internal Investigation

The Importance of Informed Choice in Achieving Free Choice in Healthcare.

Informed Choice and Its Implications for Connecticut's ABI Waiver and MFP Programs

Steps for Consumers to Officially Change Care Managers in MFP and ABI Waiver Programs.

Enhancing Ethical Systems / Advocating for Consumer Rights and "Request to change Care Manager Form

Are They Leaving People with Slower Recovery Behind? MFP and ABI Waiver Programs

Freedom of Information Act Request - Connecticut ABI 1549P Consultation Services Funding.

- Ongoing Silence! Lack of Transparency in Connecticut's Federally Funded Programs Raises Alarm
- Secret Directory and Practices: Concerns Rise for Brain-Injured Individuals in Connecticut Medicaid
- Federal Anti-Kickback Statute | Medicaid Referral Fraud | ABI RESOURCES
- Transparency and Accountability Concerns in CT's Federally Funded Programs for Brain Injury Care
- Care Managers. Do you have the right to change yours? Understanding Protecting Your Freedoms
- Investigating the Legality and Impact of CCC's Secret Electronic Randomization System on Federally
- Disability Rights Connecticut (DRCT) Team
- Dear Brain Injury Alliance of Connecticut (BIAC)
- Dear Governor Ned Lamont, Advocacy Request for Brain Injury Survivors
- Alleged Discrimination at Connecticut Community Care | Calls for Internal Investigation
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- Informed Choice and Its Implications for Connecticut's ABI Waiver and MFP Programs
- Steps for Consumers to Officially Change Care Managers in MFP and ABI Waiver Programs.
- Enhancing Ethical Systems / Advocating for Consumer Rights and "Request to change Care Manager Form
- Are They Leaving People with Slower Recovery Behind? MFP and ABI Waiver Programs
- Freedom of Information Act Request - Connecticut ABI 1549P Consultation Services Funding.

COMPLAINANT CONSENT FORM

The Department of Health and Human Services' (HHS) Office for Civil Rights (OCR) has the authority to collect and receive material and information about you, including personnel and medical records, which are relevant to its investigation of your complaint.

To investigate your complaint, OCR may need to reveal your identity or identifying information about you to persons at the entity or agency under investigation or to other persons, agencies, or entities.

The Privacy Act of 1974 protects certain federal records that contain personally identifiable information about you and, with your consent, allows OCR to use your name or other personal information, if necessary, to investigate your complaint.

Consent is voluntary, and it is not always needed in order to investigate your complaint; however, failure to give consent is likely to impede the investigation of your complaint and may result in the closure of your case.

Additionally, OCR may disclose information, including medical records and other personal information, which it has gathered during the course of its investigation in order to comply with a request under the Freedom of Information Act (FOIA) and may refer your complaint to another appropriate agency.

Under FOIA, OCR may be required to release information regarding the investigation of your complaint; however, we will make every effort, as permitted by law, to protect information that identifies individuals or that, if released, could constitute a clearly unwarranted invasion of personal privacy.

Please read and review the documents entitled, *Protecting Personal Information in Complaint Investigations* and *Notice to Complainants and Other Individuals Asked to Supply Information to the Office for Civil Rights* for further information regarding how OCR may obtain, use, and disclose your information while investigating your complaint.

In order to expedite the investigation of your complaint if it is accepted by OCR, please read, sign, and return one copy of this consent form to OCR with your complaint. Please make one copy for your records.

- As a complainant, I understand that in the course of the investigation of my complaint it may become necessary for OCR to reveal my identity or identifying information about me to persons at the entity or agency under investigation or to other persons, agencies, or entities.

- I am also aware of the obligations of OCR to honor requests under the Freedom of Information Act (FOIA). I understand that it may be necessary for OCR to disclose information, including personally identifying information, which it has gathered as part of its investigation of my complaint.

- In addition, I understand that as a complainant I am covered by the Department of Health and Human Services' (HHS) regulations which protect any individual from being intimidated, threatened, coerced, retaliated against, or discriminated against because he/she has made a complaint, testified, assisted, or participated in any manner in any mediation, investigation, hearing, proceeding, or other part of HHS' investigation, conciliation, or enforcement process.

After reading the above information, please check ONLY ONE of the following boxes:

☐ **CONSENT**: I have read, understand, and agree to the above and give permission to OCR to reveal my identity or identifying information about me in my case file to persons at the entity or agency under investigation or to other relevant persons, agencies, or entities during any part of HHS' investigation, conciliation, or enforcement process.

☐ **CONSENT DENIED**: I have read and I understand the above and do not give permission to OCR to reveal my identity or identifying information about me. I understand that this denial of consent is likely to impede the investigation of my complaint and may result in closure of the investigation.

Signature: _____ Date: _____

**Please sign and date this complaint. You do not need to sign if submitting this form by email because submission by email represents your signature.*

Name (Please type or print): _____

Address: _____

Telephone Number: _____

NOTICE TO COMPLAINANTS AND OTHER INDIVIDUALS ASKED TO SUPPLY INFORMATION TO THE OFFICE FOR CIVIL RIGHTS

Privacy Act

The Privacy Act of 1974 (5 U.S.C. §552a) requires OCR to notify individuals whom it asks to supply information that:

— OCR is authorized to solicit information under:
(i) Federal laws barring discrimination by recipients of Federal financial assistance on grounds of race, color, national origin, disability, age, sex, religion under programs and activities receiving Federal financial assistance from the U.S. Department of Health and Human Services (HHS), including, but not limited to, Title VI of the Civil Rights Act of 1964 (42 U.S.C. §2000d et seq.), Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. §794), the Age Discrimination Act of 1975 (42 U.S.C. §6101 et seq.), Title IX of the Education Amendments of 1972 (20 U.S.C. §1681 et seq.), and Sections 794 and 855 of the Public Health Service Act (42 U.S.C. §§295m and 296g);
(ii) Titles VI and XVI of the Public Health Service Act (42 U.S.C. §§291 et seq. and 300s et seq.) and 42 C.F.R. Part 124, Subpart G (Community Service obligations of Hill-Burton facilities);
(iii) 45 C.F.R. Part 85, as it implements Section 504 of the Rehabilitation Act in programs conducted by HHS; and
(iv) Title II of the Americans with Disabilities Act (42 U.S.C. §12131 et seq.) and Department of Justice regulations at 28 C.F.R. Part 35, which give HHS "designated agency" authority to investigate and resolve disability discrimination complaints against certain public entities, defined as health and service agencies of state and local governments, regardless of whether they receive federal financial assistance.
(v) The Standards for the Privacy of Individually Identifiable Health Information (The Privacy Rule) at 45 C.F.R. Part 160 and Subparts A and E of Part 164, which enforce the Health Insurance Portability and Accountability Act of 1996 (HIPAA) (42 U.S.C. §1320d-2).

OCR will request information for the purpose of determining and securing compliance with the Federal laws listed above. Disclosure of this requested information to OCR by individuals who are not recipients of federal financial assistance is voluntary; however, even individuals who voluntarily disclose information are subject to prosecution and penalties under 18 U.S.C. § 1001 for making false statements.

Additionally, although disclosure is voluntary for individuals who are not recipients of federal financial assistance, failure to provide OCR with requested information may preclude OCR from making a compliance determination or enforcing the laws above.

OCR has the authority to disclose personal information collected during an investigation without the individual's consent for the following routine uses:

(i) to make disclosures to OCR contractors who are required to maintain Privacy Act safeguards with respect to such records;
(ii) for disclosure to a congressional office from the record of an individual in response to an inquiry made at the request of the individual;
(iii) to make disclosures to the Department of Justice to permit effective defense of litigation; and
(iv) to make disclosures to the appropriate agency in the event that records maintained by OCR to carry out its functions indicate a violation or potential violation of law.

Under 5 U.S.C. §552a(k)(2) and the HHS Privacy Act regulations at 45 C.F.R. §5b.11 OCR complaint records have been exempted as investigatory material compiled for law enforcement purposes from certain Privacy Act access, amendment, correction and notification requirements.

Freedom of Information Act

A complainant, the recipient or any member of the public may request release of OCR records under the Freedom of Information Act (5 U.S.C. §552) (FOIA) and HHS regulations at 45 C.F.R. Part 5.

Fraud and False Statements

Federal law, at 18 U.S.C. §1001, authorizes prosecution and penalties of fine or imprisonment for conviction of "whoever, in any matter within the jurisdiction of any department or agency of the United States knowingly and willfully falsifies, conceals or covers up by any trick, scheme, or device a material fact, or makes any false, fictitious or fraudulent statements or representations or makes or uses any false writing or document knowing the same to contain any false, fictitious, or fraudulent statement or entry".

PROTECTING PERSONAL INFORMATION IN COMPLAINT INVESTIGATIONS

To investigate your complaint, the Department of Health and Human Services' (HHS) Office for Civil Rights (OCR) will collect information from different sources. Depending on the type of complaint, we may need to get copies of your medical records, or other information that is personal to you. This Fact Sheet explains how OCR protects your personal information that is part of your case file.

HOW DOES OCR PROTECT MY PERSONAL INFORMATION?

OCR is required by law to protect your personal information. The Privacy Act of 1974 protects Federal records about an individual containing personally identifiable information, including, but not limited to, the individual's medical history, education, financial transactions, and criminal or employment history that contains an individual's name or other identifying information.

Because of the Privacy Act, OCR will use your name or other personal information with a signed consent and only when it is necessary to complete the investigation of your complaint or to enforce civil rights laws or when it is otherwise permitted by law.

Consent is voluntary, and it is not always needed in order to investigate your complaint; however, failure to give consent is likely to impede the investigation of your complaint and may result in the closure of your case.

CAN I SEE MY OCR FILE?

Under the Freedom of Information Act (FOIA), you can request a copy of your case file once your case has been closed; however, OCR can withhold information from you in order to protect the identities of witnesses and other sources of information.

CAN OCR GIVE MY FILE TO ANY ONE ELSE?

If a complaint indicates a violation or a potential violation of law, OCR can refer the complaint to another appropriate agency without your permission.

If you file a complaint with OCR, and we decide we cannot help you, we may refer your complaint to another agency such as the Department of Justice.

CAN ANYONE ELSE SEE THE INFORMATION IN MY FILE?

Access to OCR's files and records is controlled by the Freedom of Information Act (FOIA). Under FOIA, OCR may be required to release information about this case upon public request. In the event that OCR receives such a request, we will make every effort,

as permitted by law, to protect information that identifies individuals, or that, if released, could constitute a clearly unwarranted invasion of personal privacy.

If OCR receives protected health information about you in connection with a HIPAA Privacy Rule investigation or compliance review, we will only share this information with individuals outside of HHS if necessary for our compliance efforts or if we are required to do so by another law.

DOES IT COST ANYTHING FOR ME (OR SOMEONE ELSE) TO OBTAIN A COPY OF MY FILE?

In most cases, the first two hours spent searching for document(s) you request under the Freedom of Information Act and the first 100 pages are free. Additional search time or copying time may result in a cost for which you will be responsible. If you wish to limit the search time and number of pages to a maximum of two hours and 100 pages; please specify this in your request. You may also set a specific cost limit, for example, cost not to exceed $100.00.

If you have any questions about this fact sheet, please contact OCR
http://www.hhs.gov/ocr/contact.html

OR

Contact your OCR Regional Office
(see Regional Office contact information on page 2 of the Complaint Form)

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

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

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

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

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

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

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

Thank you for your cooperation.

David Medeiros

A.B.I. RESOURCES

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

An amazing opportunity to be a part of something much greater than ourselves, supporting people become the best version of themselves.

From: Dumont, Amy E <Amy.Dumont@ct.gov>
Sent: Tuesday, May 23, 2023 3:29 PM
To: ABI RESOURCES 860 942-0365 <aabiwr@live.com>; Slitt, Michael <Michael.Slitt@ct.gov>; Orejuela, Elizabeth <Elizabeth.Orejuela@ct.gov>; DSS, Commis <Commis.DSS@ct.gov>
Cc: ABI Resources HIPAA Secure Correspondence www.CTBRAININJURY.com <abi@ctbraininjury.com>
Subject: RE: Solicitation of ABI Waiver Consumers by CCSNCT

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

Amy

Amy Dumont, LCSW
Interim Director/Program Manager
CT Department of Social Services
Community Options Unit
55 Farmington Avenue
Hartford CT 06105-3725
Tel: 860 424-5173
Fax: 860 424:4963
amy.dumont@ct.gov

From: ABI RESOURCES 860 942-0365 <aabiwr@live.com>
Sent: Tuesday, May 23, 2023 12:49 PM
To: Dumont, Amy E <Amy.Dumont@ct.gov>; Slitt, Michael <Michael.Slitt@ct.gov>; Orejuela, Elizabeth <Elizabeth.Orejuela@ct.gov>; DSS, Commis <Commis.DSS@ct.gov>
Cc: ABI Resources HIPAA Secure Correspondence www.CTBRAININJURY.com <abi@ctbraininjury.com>
Subject: Re: Solicitation of ABI Waiver Consumers by CCSNCT

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

05/23/2023

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

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

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

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

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

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

Thank you in advance for your attention to this matter. I have full faith that the Department will take appropriate action to rectify this situation.
Will DSS provide detailed information on the specific steps the department plans to take in rectifying the ongoing issue of unauthorized solicitation and steering by CCSNCT towards ABI Waiver consumers for Project Genesis.

Your prompt response is highly appreciated.

All the best,
David Medeiros

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An amazing opportunity to be a part of something much greater than ourselves, supporting people become the best version of themselves.

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

From: ABI RESOURCES 860 942-0365 <aabiwr@live.com>
Sent: Tuesday, May 23, 2023 11:59 AM
To: Amy Dumont <amy.dumont@ct.gov>; Jennifer.cavallaro@ct.gov <Jennifer.Cavallaro@ct.gov>; Slitt, Michael <Michael.Slitt@ct.gov>; elizabeth orejuela <Elizabeth.Orejuela@ct.gov>
Cc: ABI Resources HIPAA Secure Correspondence www.CTBRAININJURY.com <abi@ctbraininjury.com>; ABI RESOURCES 860 942-0365 <aabiwr@live.com>
Subject: Solicitation of ABI Waiver Consumers by CCSNCT

05/23/2023

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Your prompt response is highly appreciated.

All the best,
David Medeiros

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

State of Connecticut domain may be subject to the Freedom of Information statutes and regulations. ABI-639-DSSIACCCACTIPSLGLHFSCSWCRCTACRCWCAAAR-REF-417

ABI Resources is grateful for a response from DSS COU and has presented this advocacy request letter accordingly;

Enhancing Ethical Systems and Advocating for Consumer Rights

Dear [DSS and COU Representative],

I am writing on behalf of ABI Resources to address the challenges faced by our consumers when requesting a change of care managers. We understand that various factors, such as conflicts or other concerns, may prompt consumers to consider this change. Our organization is committed to advocating for consumer rights, and we request that DSS and COU collaborate with us to improve the current system for changing care managers.

Ethical Concerns in the Current Process:

The current process poses several ethical concerns, including:

- Fear of retaliation or negative consequences resulting from requesting a change.
- Uncertainty about the process and whom to contact for assistance.
- Concerns about the confidentiality of the request and potential breaches of privacy.
- Anxiety over potential disruptions in care and support services during the transition.
- Apprehension about establishing a new relationship with a different care manager.
- Worries that the new care manager may not understand or respect their individual needs and preferences.

Conflicts Arising from Case Manager Availability:

The DSS COU response statement, "The request will be granted based on case manager availability," may create conflicts and not align with the best interests of the individuals served. These conflicts include:

- Prioritizing agency interests over consumer needs.
- Restricting consumer choice.
- Inconsistency with person-centered care.

- Challenging self-advocacy.

- Potential for strained relationships.

We request that the system be revised to align with the principles of person-centered care, consumer choice, and individual rights.

Proposed Solutions:

We kindly request that DSS and COU work to implement transparent, effective and ethical systems for consumer self-advocacy. These may include:

- Developing easy-to-understand written materials and an online resource to document the request. Including a printable "Request to change Care Manager Form"

- Designating a dedicated neutral contact person within DSS / COU and not the Care Management access agency itself.

- Implementing regular training and education for care managers and relevant staff.

- Establishing transparent and accessible channels of communication.

- Regularly reviewing and assessing the effectiveness of the system.

- Developing a clear protocol for requesting care manager changes.

- Establishing a confidential reporting system.

- Ensuring all parties involved in the process are trained in effective communication, conflict resolution, and ethical conduct.

- Providing support and resources during the transition to a new care manager.

- Encouraging ongoing feedback from consumers.

Such a system would ideally offer transparency in terms of the decision-making processes, policies, and procedures that directly affect the consumers. Furthermore, it would provide them with easy access to relevant information, enabling them to make informed decisions and assert their rights and preferences.

Would you please provide some information on whether DSS COU will implement such a system? If so, what is the anticipated timeline for its rollout, and what steps are being taken to ensure its successful integration?

By working together, we can create a streamlined and accessible system, empowering our consumers to advocate for themselves during care manager changes. This will promote a positive and supportive relationship between consumers, care managers, and the wider service system.

We look forward to collaborating with you on this important matter.

Best regards,

ABI Resources

David Medeiros

All the best,
David Medeiros

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An amazing opportunity to be a part of something much greater than ourselves, supporting people become the best version of themselves.

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

From: Dumont, Amy E <Amy.Dumont@ct.gov>
Sent: Monday, April 24, 2023 12:50 PM
To: ABI RESOURCES 860 942-0365 <aabiwr@live.com>; Cavallaro, Jennifer <Jennifer.Cavallaro@ct.gov>
Cc: Orejuela, Elizabeth <Elizabeth.Orejuela@ct.gov>; Slitt, Michael <Michael.Slitt@ct.gov>
Subject: RE: Steps for Consumers to Officially Change Care Managers in MFP and ABI Waiver Programs

David- If an individual would like to change case managers, they are permitted to do so by contacting their current case manager, access agency, or supervisor at the access agency to request such a change. The request will be granted based on case manager availability.

Amy

Amy Dumont, LCSW
Program Manager
CT Department of Social Services
Community Options Unit
55 Farmington Avenue
Hartford CT 06105-3725
Tel: 860 424-5173
Fax: 860 424:4963
amy.dumont@ct.gov

From: ABI RESOURCES 860 942-0365 <aabiwr@live.com>
Sent: Monday, April 24, 2023 6:20 AM
To: Cavallaro, Jennifer <Jennifer.Cavallaro@ct.gov>
Cc: Dumont, Amy E <Amy.Dumont@ct.gov>; Orejuela, Elizabeth <Elizabeth.Orejuela@ct.gov>; Slitt, Michael <Michael.Slitt@ct.gov>
Subject: Steps for Consumers to Officially Change Care Managers in MFP and ABI Waiver Programs

Steps for Consumers to Officially Change Care Managers in MFP and ABI Waiver Programs.

Dear CT DSS and COU,

As a provider of waiver services for the Money Follows the Person (MFP) and Acquired Brain Injury (ABI) programs, ABI resources is reaching out to request information regarding the steps consumers must take to officially change their care managers. Your guidance in this matter would be greatly appreciated, as we aim to have a clear understanding of the process.

To help us have a comprehensive understanding of the procedures involved, kindly provide details on the following aspects:

The necessary forms or paperwork to be completed by the consumers, if any.

The appropriate channels or points of contact for consumers to submit the required documentation.

The expected timeframe for processing the change request and the potential impact, if any, on the clients' current services.

Any additional steps or considerations that consumers should be aware of during this process to ensure a seamless transition.

We appreciate your support in providing this information, as it will allow us to better understand the process and ensure that our practices align with the proper procedures. If possible, please provide any resources or guidance materials that could be helpful in understanding and completing the process.

Thank you in advance for your assistance. I look forward to receiving your response and any additional information you can provide.

Sincerely,
ABI Resources

All the best,
David Medeiros

A.B.I. RESOURCES

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An amazing opportunity to be a part of something much greater than ourselves, supporting people become the best version of themselves.

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

State of Connecticut domain may be subject to the Freedom of Information statutes and regulations. ABI-639-DSSIACCCACTIPSLGLHFSCSWCRCTACRCWCAAAR-REF-417

Dear Erin,

It is important for me to apologize and ask for your forgiveness, I am sorry. I would like to express my gratitude for your previous response on March 13th. Your assistance and guidance have been valuable to me, and I truly appreciate your willingness to help.

As a TBI (Traumatic Brain Injury) survivor of 45 years and a recent stroke survivor, I sometimes have a hard time reading between the lines, making assumptions, and clearly communicating requests. I understand the importance of providing the best possible care and support for our clients and staff. In order to further enhance my understanding of the CCC process, I requested more clarity on certain aspects of the program. My goal is to utilize this information to better serve the individuals under our care and to contribute effectively to the growth of our community.

I understand that you have mentioned directing further programmatic questions to the Department of Social Services. However, I was hoping you could provide some initial guidance or point me in the right direction before I approach the department. DSS has established your agency team as our first point of contact. Your insights, based on your experience and expertise, would be invaluable in helping me navigate this process more efficiently.

My aim is to gather as much knowledge as possible to ensure that our practices are aligned with the broader goals and initiatives of the greatest good. As we both share a deep commitment to supporting TBI survivors, I believe that working together and exchanging information can be a crucial factor in achieving the best outcomes for our clients and staff.

Thank you in advance for your time and consideration. I look forward to hearing from you soon and hope to establish a productive and collaborative relationship in our efforts to support TBI survivors. I only wish to help the greatest good and provide real support for those in need, this is why I have asked you these questions. Would you please help me understand your team processes better?

Wishing you a great day!

David Medeiros

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From: Erin Kane <Erin.Kane@ctcommunitycare.org>
Sent: Monday, March 27, 2023 10:44 AM
To: ABI RESOURCES 860 942-0365 <aabiwr@live.com>
Cc: Julia Evans Starr <Julia.Evans.Starr@ctcommunitycare.org>
Subject: FW: Subject: Request for Attention to Unacknowledged Inquiries and Concerns Related to Medicaid Waivers.

Hi David,
The below was brought to my attention by Julia Evans Starr. I responded to your initial inquiry on March 13th and felt I was forthcoming in my response. As I mentioned then, additional programmatic questions should be directed to the Department of Social Services. The nature of these questions are much more global than CCC internal practices/processes.
Have a nice day,
Erin

Erin Kane
Head of Quality and Performance Improvement
43 Enterprise Dr, Bristol, CT 06010-7472
860-314-2227
WWW.CTCOMMUNITYCARE.ORG
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Caring From Every Perspective

From: ABI RESOURCES 860 942-0365 <aabiwr@live.com>
Sent: Monday, March 27, 2023 9:45 AM
To: Julia Evans Starr <Julia.Evans.Starr@ctcommunitycare.org>
Subject: Subject: Request for Attention to Unacknowledged Inquiries and Concerns Related to Medicaid Waivers.
Importance: High

Subject: Request for Attention to Unacknowledged Inquiries and Concerns Related to Medicaid Waivers

Dear
Julia Evans Starr, President,

I hope this email finds you well. I am writing to express our concern regarding a series of unanswered inquiries and concerns that we at ABI Resources have raised with Connecticut Community Care pertaining to Medicaid federally funded waivers. As we both strive to serve the same community, it is vital that our questions be addressed promptly to ensure the best possible support for the individuals who rely on our services.

Below is a list of unacknowledged email inquiries sent to Connecticut Community Care, Head of Quality and Performance Improvement detailing inquiries and concerns which have yet to receive a response:

Subject: Comprehensive Inquiry: Referral Process, Provider List, and Care Manager's Role.

a. Sent: Fri 3/17/2023 5:43 AM

b. Sent: Wed 3/22/2023 5:01 PM

Subject: Inquiry Regarding Client's Option to Change Agency Service or Care Management Provider. MFP, ABI and PCA Waivers.

a. Sent: Fri 3/17/ 2023 7:30 AM

b. Sent: Wed 3/22/2023 5:00 PM

Subject: Care Management Referral Process Inquiry for MFP Program and Waivers.

a. Sent: Sat 3/11/2023 7:17 AM

Subject: To the attention of David Medeiros CBIS.

a. Sent: Wed 3/22/2023 5:02 PM

b. Pertaining to the received communication from
Thu 9/1/2022 12:16 PM

We kindly request that these concerns be brought to the attention of the Board of Directors at the earliest opportunity, as they directly affect our mutual mission to serve the community. We believe that addressing these questions and concerns will not only strengthen our collaboration but also ensure that the individuals we serve receive the highest quality of care and support.

The lack of response to our inquiries is causing growing concerns for numerous reasons, particularly in relation to the well-being of Medicaid consumers and providers. This situation not only impairs our capacity to offer optimal care to our clients, but it also casts doubt on the effectiveness of communication and collaboration between our organizations, as well as the ability of care managers to effectively provide for the Medicaid waiver brain injured population while ensuring the rights of the person served are adhered to. It is vital to address these concerns swiftly to preserve trust and nurture a positive working relationship moving forward. At ABI Resources, we are committed to partnering with your organization to develop practical solutions to the challenges faced by Medicaid consumers. By working together, we can make a meaningful difference and enhance the quality of care provided to these individuals, ultimately improving their well-being and overall experience.

Please provide a timeline for when we can expect a response to the aforementioned inquiries. We appreciate your attention to this matter and look forward to a productive dialogue.

Thank you for your cooperation.

Sincerely,

David Medeiros

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It may appear that Care Management and DSS are using the same tactics. How would DSS like providers to document what is verbally said at quarterly meeting?

ABI Resources wishes to provide ethical services not to police and politic.

Sent from my Verizon, Samsung Galaxy smartphone
Get Outlook for Android

From: Dumont, Amy E <Amy.Dumont@ct.gov>
Sent: Friday, December 9, 2022 9:17:06 AM
To: aabiwr@live.com <aabiwr@live.com>
Cc: DSS, FOIA <FOIA.DSS@ct.gov>; Cavallaro, Jennifer <Jennifer.Cavallaro@ct.gov>; Slitt, Michael <Michael.Slitt@ct.gov>; Orejuela, Elizabeth <Elizabeth.Orejuela@ct.gov>
Subject: RE: This appears to be a corruption of decision-making, patient steering, unfair competition, monopolization efforts, kickbacks, and/or inducements for Medicaid Referrals.

Good morning! I am not sure the accuracy of this. I believe what you are referencing is a case that CCSN is the provider for however as we indicated yesterday in our meeting please provide specific examples to both Jenn and I for research. Thank you!!

Amy

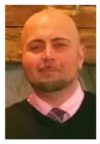
Amy Dumont, LCSW
Program Manager
CT Department of Social Services
Community Options Unit
55 Farmington Avenue
Hartford CT 06105-3725
Tel: 860 424-5173
Fax: 860 424:4963
amy.dumont@ct.gov

From: aabiwr@live.com <aabiwr@live.com>
Sent: Friday, December 9, 2022 5:35 AM
To: Dumont, Amy E <Amy.Dumont@ct.gov>
Cc: DSS, FOIA <FOIA.DSS@ct.gov>; Cavallaro, Jennifer <Jennifer.Cavallaro@ct.gov>; Slitt, Michael <Michael.Slitt@ct.gov>; Orejuela, Elizabeth <Elizabeth.Orejuela@ct.gov>
Subject: Re: This appears to be a corruption of decision-making, patient steering, unfair competition, monopolization efforts, kickbacks, and/or inducements for Medicaid Referrals.

Here we go again, blowing the whistle.
Yesterday
CCCi Care Manager Doreen Andrews informed a client during a quarterly meeting that she referred him to SLG CBT provider Dr Bissman without his consent. Doreen informed the Team that Dr Brissman is the only person he can use. This appears to be a corruption of decision-making, patient steering, unfair competition, monopolization efforts, kickbacks, and/or inducements for Medicaid Referrals. Storrs Mansfield consumer A.J.

Will DSS please stop care management from forcing Medicaid referrals on consumers?
The client may be reporting this to Fed Medicaid fraud.

All the best,
David Medeiros CBIS



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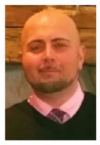
From: aabiwr@live.com <aabiwr@live.com>
Sent: Thursday, December 8, 2022 3:35 PM
To: Dumont, Amy E <amy.dumont@ct.gov>
Cc: DSS, FOIA <FOIA.DSS@ct.gov>; Cavallaro, Jennifer <Jennifer.Cavallaro@ct.gov>; Slitt, Michael <Michael.Slitt@ct.gov>; Orejuela, Elizabeth <Elizabeth.Orejuela@ct.gov>
Subject: Re: This appears to be a corruption of decision-making, patient steering, unfair competition, monopolization efforts, kickbacks, and/or inducements for Medicaid Referrals.

All the best,
David Medeiros CBIS



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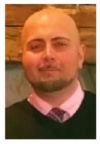
From: A.B.I. RESOURCES L.L.C. 860 942-0365 <AABIWR@LIVE.COM>
Sent: Thursday, December 8, 2022 2:45 PM
To: Dumont, Amy E <amy.dumont@ct.gov>
Cc: DSS, FOIA <FOIA.DSS@ct.gov>; Cavallaro, Jennifer <Jennifer.Cavallaro@ct.gov>; Slitt, Michael <Michael.Slitt@ct.gov>; Orejuela, Elizabeth <Elizabeth.Orejuela@ct.gov>
Subject: Re: This appears to be a corruption of decision-making, patient steering, unfair competition, monopolization efforts, kickbacks, and/or inducements for Medicaid Referrals.

Thank you for taking the time to speak with me today. Please forgive me if I seemed upset, I am sorry. I am a brain injury survivor myself and have PTSD. Sometimes in stressful situations, I have challenges communicating clearly. Here are some examples of some challenges. Now that I know not to contact Dr Giffard with challenges and I will try not to bother you. I do believe that something appears off with past and current referrals and a consumer's right to choose.

Again
All the best,
David Medeiros



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From: Dumont, Amy E <Amy.Dumont@ct.gov>
Sent: Tuesday, December 6, 2022 12:19 PM
To: A.B.I. RESOURCES L.L.C. 860 942-0365 <AABIWR@LIVE.COM>
Cc: DSS, FOIA <FOIA.DSS@ct.gov>; Cavallaro, Jennifer <Jennifer.Cavallaro@ct.gov>; Slitt, Michael <Michael.Slitt@ct.gov>; Orejuela, Elizabeth <Elizabeth.Orejuela@ct.gov>
Subject: RE: This appears to be a corruption of decision-making, patient steering, unfair competition, monopolization efforts, kickbacks, and/or inducements for Medicaid Referrals.

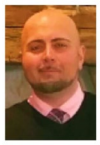
Thanks David! They are aware of this. If the client doesn't like to see the CBT at her office, they can either work out a different arrangement for a setting for a team meeting of the clients choice or the client can find a different CBT to work with. There is no pressure for the client to go anywhere. Looking forward to speaking further to you Thursday.

Amy

From: A.B.I. RESOURCES L.L.C. 860 942-0365 <AABIWR@LIVE.COM>
Sent: Tuesday, December 6, 2022 11:18 AM
To: Dumont, Amy E <Amy.Dumont@ct.gov>
Cc: DSS, FOIA <FOIA.DSS@ct.gov>; Cavallaro, Jennifer <Jennifer.Cavallaro@ct.gov>; Slitt, Michael <Michael.Slitt@ct.gov>; Orejuela, Elizabeth <Elizabeth.Orejuela@ct.gov>
Subject: Re: This appears to be a corruption of decision-making, patient steering, unfair competition, monopolization efforts, kickbacks, and/or inducements for Medicaid Referrals.

Would DSS please ask Care Management to advise the consumer of their right to choose, as they may feel pressured and obligated to go to the SLG location? The SLG CBT is also scheduling weekly CBT services with the consumer at the SLG location.

All the best,
David Medeiros CBIS



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From: Dumont, Amy E <Amy.Dumont@ct.gov>
Sent: Tuesday, December 6, 2022 11:11 AM
To: A.B.I. RESOURCES L.L.C. 860 942-0365 <AABIWR@LIVE.COM>
Cc: DSS, FOIA <FOIA.DSS@ct.gov>; Cavallaro, Jennifer <Jennifer.Cavallaro@ct.gov>; Slitt, Michael <Michael.Slitt@ct.gov>; Orejuela, Elizabeth <Elizabeth.Orejuela@ct.gov>
Subject: RE: This appears to be a corruption of decision-making, patient steering, unfair competition, monopolization efforts, kickbacks, and/or inducements for Medicaid Referrals.

If the consumer wishes to hold the Team meeting at SLG then yes the ILST should go as part of the team. If he or she is not comfortable going is there another person who knows the client that can attend? Thanks!

Amy