

Key Concerns and Grievances:

a) **Medicaid Referrals:**

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

a) **Medicaid Referrals:**

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

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

Potential Steps to Address the Issue:

Increase Transparency:

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

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

Conduct an Independent Audit:

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

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

Implement a Fair and Equitable Referral System:

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

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

Engage Stakeholders:

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

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

Provide Training and Education:

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

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

Establish a Complaint and Appeal Process:

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

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

Promote Accountability:

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

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

Regularly Review and Update Policies:

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

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

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

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

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

Ethical Concerns:

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

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

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

Legal Concerns:

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

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

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

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

Adverse Impacts on ABI Resources:

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

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

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

Addressing the Issue:

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

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

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

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

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

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

Call to Action:

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

Connecticut Department of Social Services

Connecticut Attorney General's Office

Connecticut Commission on Human Rights and Opportunities

Connecticut Office of the Healthcare Advocate

Connecticut Office of Policy and Management

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

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

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

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

Sincerely,

David Medeiros

Best regards,

David Medeiros

David Medeiros
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11/13/2023

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

To: All pertinent departments within the state of Connecticut,

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

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

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



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

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

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

Key Concerns and Grievances:

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

Concerns: Impact on Daily Support Staff and Program Consumers

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

Impact on Daily Support Staff:

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

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

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

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

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

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

Impact on Consumers of the Program:

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

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

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

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

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

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

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

Adverse Impacts on ABI Resources:

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

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

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

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

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

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

Potential Steps to Address the Issue:

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

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

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

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

Addressing the Issue:

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

Call to Action:

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

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Connecticut Commission on Human Rights and Opportunities

Connecticut Office of the Healthcare Advocate

Connecticut Office of Policy and Management

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

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

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

Best regards,

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11/15/2023

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

To: All pertinent departments within the state of Connecticut,

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

Key Concerns and Grievances:

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

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

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

Proposed Solutions and Steps to Address the Issue:

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

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

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

Addressing the Issue:

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

Potential Steps to Address the Issue:

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

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

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

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

Call to Action:

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Connecticut Office of Policy and Management

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

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

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

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

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11/16/2023

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

To: All pertinent departments within the state of Connecticut,

Connecticut Department of Social Services and Relevant Oversight Bodies

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

Key concerns and grievances:

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

raising serious concerns about compliance and oversight within the program.

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

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

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

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

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

Specific Requests for Resolution and Enhanced Transparency:

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

Conclusion:

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

Call to Action:

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

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

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

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

Best regards,

David Medeiros

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11/16/2023

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

To: All pertinent departments within the state of Connecticut,

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

Examination of the ABI Waiver Program's Framework:

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



Conflicts Arising from Service Provision:

Dual Service Conflict:

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

Therapeutic Recommendations Overlapping with Financial Interests:

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

Influence on Consumer Choice:

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

Cycle of Service Provision and Financial Gain:

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

Potential for Overutilization of Services:

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

Ethical Implications:

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

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

Manipulative Consumer Steering and Personnel Poaching:

Directing Consumer Choices:

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

Targeted Referrals:

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

Influence on Consumer Decision-Making:

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

Questionable Ethical Practices:

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

Unfair Competitive Tactics:

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

Staff Poaching:

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

Disruption of Industry Standards:

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

Impact on Service Quality:

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

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

Indicators of Potential Kickback Arrangements:

Referral for Incentives:

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

Questionable Referral Patterns:

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

Financial Incentives for Referrals:

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

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

Cyclical Billing and Service Utilization:

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

Impact on Medicaid Expenditures:

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

Ethical and Legal Implications:

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

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

Impact on ABI Resources:

Revenue Reduction

Consumer Diversion Impact:

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

Financial Viability Threatened:

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

Operational Cost Surge:

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

Legal and Consultation Fees:

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

Consumer Relationship Erosion:

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

Reputation Damage:

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

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

Formal Requests Thorough Examination and Compliance Review:

Comprehensive Investigation:

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

Medicaid Compliance Review:

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

Application of Corrective and Disciplinary Measures:

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

Disciplinary Proceedings:

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

Review and Revision of Policies and Oversight:

Policy Overhaul:

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

Enhanced Oversight Mechanisms:

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

In Closing:

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

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

Call to Action:

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

Connecticut Department of Social Services

Connecticut Attorney General's Office

Connecticut Commission on Human Rights and Opportunities

Connecticut Office of the Healthcare Advocate

Connecticut Office of Policy and Management

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

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

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

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

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

Best regards,

David Medeiros

David Medeiros

ABI Resources , CEO, Director, Team Member

ABI Resources





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Submission ID: 954761

Success!

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You'll hear back from the agency confirming receipt in the coming weeks using the contact information you provided. If you have questions about your request, feel free to reach out to the agency FOIA personnel using the information provided below.

Contact the agency



Hugh Gilmore, FOIA Officer

410-786-5353

hugh.gilmore@cms.hhs.gov



FOIA Requester Service Center 

410-786-5353



Joseph Tripline, FOIA Public Liaison 

410-786-5353

joseph.tripline@cms.hhs.gov



Hugh Gilmore, FOIA Officer, North Building, Room C5-11-06

7500 Security Boulevard

Baltimore, MD 21244

FOIA_Request@cms.hhs.gov

Request summary

Request submitted on **November 19, 2023**.

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Contact information

Name

David MEDEIROS

Mailing address

215 Mountain St
Willimantic, CT 06226
United States

Phone number

8604633638

Company/organization

ABI Resources LLC

Email

aabiwr@live.com

Your request

11/19/2023 Please find below a Freedom of Information Act (FOIA) request. This request is formulated to obtain specific information from various government agencies, including the Department of Justice (DOJ), Health and Human Services (HHS), Centers for Medicare & Medicaid Services (CMS), and relevant state departments in Connecticut. Subject: Freedom of Information Act Request – Housing and Rental Agreements in Medicaid ABI Waiver Programs 1 and 2 Dear FOIA Officer, I am submitting a request under the Freedom of Information Act (5 U.S.C. § 552) for information related to housing and rental agreements within the Medicaid Acquired Brain Injury (ABI) Waiver Programs 1 and 2. Specific Records Requested: Legality and Authorization Records (Waiver 1 and 2): Documents confirming the legality and authorization for ABI Waiver Program agency providers to rent or provide housing for consumers in both Waiver Programs 1 and 2. State or federal approvals, if any, specifically allowing such housing provisions under these programs. Operational and Implementation Records (Waiver 1 and 2): Detailed descriptions or guidelines on how housing services are to be implemented within these programs. Records or agreements that outline the roles and responsibilities of agency providers in the context of providing housing or rental services to program participants. Financial Records (Waiver 1 and 2): Financial statements or invoices related to payments for housing or rental services within both Waiver Programs 1 and 2. Documentation of funding allocations for housing services under these programs. Provider and Consumer Responsibilities (Waiver 1 and 2): Documents detailing the responsibilities of both the providers and the consumers regarding housing services under these waiver programs. Service Plan Inclusions (Waiver 1 and 2): Examples of service plans that include housing or rental services, illustrating how these services are integrated into the overall care plans for individuals in these programs. This request encompasses all relevant records from the inception of housing services provisions within these waiver programs to the present date. I assert that the requested information is not exempt from disclosure under the Connecticut FOIA, as it is vital for public understanding of the operation and legality of housing services within these programs. Should any part of the requested

documents be exempt from disclosure, please provide a comprehensive written justification for each exemption, citing the relevant statutory exemption. I request that only the exempted portions be redacted, keeping the rest of the document intact. In case of a partial or complete denial of my request, I seek a written explanation, specifying the exact statutory exemptions that justify the denial. Due to a disability, I request the provision of electronic records to facilitate my accessibility and participation. Request for FOIA Officer's Contact Information: For effective communication, I respectfully request the name and title of the specific FOIA officer handling this request. This will assist in any necessary follow-up communication regarding this FOIA request. Thank you for your attention to this matter. Sincerely, David Medeiros ABI Resources

Fees

Fee waiver

no

Request expedited processing

Expedited processing

no



FOIA.gov

CONTACT

Office of Information Policy (OIP)
U.S. Department of Justice
441 G St, NW, 6th Floor
Washington, DC 20530
E-mail: National.FOIAPortal@usdoj.gov

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Your complaint was submitted

The No Surprises Help Desk has successfully received your complaint.

Your confirmation number is 00431060.

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Keep this number for your records.

What comes next?

Upload more documentation



We'll review your complaint



We may contact you



We'll notify you of next steps



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A federal government website managed and paid for by the U.S. Centers for Medicare & Medicaid Services.

7500 Security Boulevard, Baltimore, MD 21244



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

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

Report successfully submitted



Your record number is: **376153-JVL**

Save report

What to expect

① We review your report

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

② Our specialists determine the next step

We may decide to:

Open an investigation or take some other action within the legal authority of the Justice Department.

Collect more information before we can look into your report.

Recommend another government agency that can properly look into your report. If so, we'll let you know.

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

③ When possible, we will follow up with you

We do our best to let you know about the outcome of our review. However, we may not always be able to provide you with updates because:

We're actively working on an investigation or case related to your report.

We're receiving and actively reviewing many requests at the same time.

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

What you can do next

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

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

American Bar Association, visit www.americanbar.org/groups/legal_services/flh-home or call (800) 285-2221

Legal Services Corporation (or Legal Aid Offices), to help you find a legal aid lawyer in your area visit www.lsc.gov/find-legal-aid

② Get help immediately if you are in danger

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

Your submission

Contact

Contact information

Your name

David MEDEIROS

Email address

aabiwr@live.com

Phone number

8604633638

Address

215 Mountain St

-

Willimantic, Connecticut 06226

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

No

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

Discriminated against in a commercial location or public place

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

Other

-

Where did this happen?

Organization name

950 Pennsylvania Avenue, NW, Washington, DC 20530

Address

950 Pennsylvania Avenue, NW, Washington, DC 20530

-

Washington, Washington

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

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

Date**When did this happen?**

11/25/2023

Personal description**In your own words, describe what happened**

57 page report has been submitted.

Date: 11/24/2023

Complaint and Urgent Request for Federal Intervention in Addressing Systemic Rights Violations in Connecticut.

To: All Relevant Federal Authorities and Departments, United States of America.

Subject: Urgent Call for Federal Action Against Systemic Rights Violations in Connecticut.

Dear Esteemed Officials,

I am writing to you as the founder and leader of ABI Resources, a Connecticut-based company dedicated to assisting individuals with disabilities under the Federally Funded Medicaid ABI Waiver Program. This letter serves as both an expression of grave concern and an urgent request for immediate federal intervention regarding ongoing systemic rights violations within the state of Connecticut.

These violations, perpetrated by state authorities and overlooked by federal entities, are infringing upon not only my rights as a disabled business owner but also those of the community we ardently serve.

Our efforts to address these challenges have been consistently impeded by the inherent complexity, exorbitant costs, and prolonged timeframes required to navigate the existing systems. A conspicuous lack of federal oversight in Connecticut's allocation and use of federal funds has facilitated the perpetuation of these infringements without repercussion.

Enclosed, you will find a comprehensive report delineating the specifics of these violations, our concerted efforts to bring them to light, and the lackluster response from federal agencies thus far. This situation flagrantly contradicts the foundational principles of justice and equity and stands in stark opposition to the laws enacted to protect the rights of disabled individuals.

I implore you to conduct a thorough examination of this report and to undertake prompt and decisive action. The exigency for more accessible advocacy for individuals with disabilities, and the imperative for direct federal intervention in the oversight of Connecticut's management of federal funds, cannot be overstated. The rights and welfare of numerous individuals hinge on your immediate and effective response.

This matter transcends mere mismanagement of federal funds by a state; it epitomizes a more profound failure within our federal system to protect its most vulnerable citizens. As a disabled entrepreneur, I have encountered numerous barriers which have been exacerbated, rather than mitigated, by the very systems designed for support.

The evidence presented in the report reveals a pervasive pattern of neglect, indicative of a systemic issue that demands your immediate and undivided attention.

The very foundations of our society—justice, equity, and equitable treatment under the law—are at risk. I urge you not only to consider the contents of this report but to act with the urgency and seriousness it rightfully commands.

The future of ABI Resources, the individuals we support, and the commitment of our federal system to its disabled citizens rest in your capable hands. I have confidence in your willingness to redress these injustices and to prevent such oversights from recurring.

While the immediate issues originate from actions taken by the Connecticut government, the overarching failure at the federal level has allowed these challenges to proliferate. The systemic issues we are currently grappling with are a direct consequence of inadequate federal oversight and a lack of accountability in ensuring state compliance with federal standards.

Therefore, the responsibility for our current situation rests not solely with Connecticut but is fundamentally a federal issue. It is a failure on the part of the United States to effectively monitor, regulate, and intervene when necessary, leading to the violation of our rights and the undermining of our operations.

This situation demands more than mere acknowledgment; it necessitates immediate and decisive federal action. The well-being of countless individuals with disabilities, reliant on services such as those provided by ABI Resources, is in jeopardy.

In this urgent appeal, I highlight issues of paramount public interest, reflecting a troubling lack of transparency and accountability within Connecticut's administration of the Medicaid ABI Waiver Program. The enclosed report

elucidates potential civil rights violations and instances of government overreach, profoundly affecting the disabled community we serve. These concerns are not just administrative discrepancies but suggest deeper systemic misconduct.

Our extensive documentation raises serious questions about potential corruption, ethical violations, and financial mismanagement within state-run programs. These issues, if left unaddressed, could signify a blatant disregard for legal standards and the well-being of our society's most vulnerable members. As a whistleblower exposing these malpractices, I anticipate that this letter will resonate with your commitment to justice and equity.

Moreover, the lack of decisive action in face of these allegations may set a troubling legal precedent, undermining the very foundation of judicial review and democratic oversight. This situation warrants immediate scrutiny, as it involves not only potential discrimination and inequality against individuals with disabilities but also raises significant public safety risks. The failure to ensure the proper use of federal funds and to protect the rights of disabled citizens highlights a concerning trend of privacy infringements and personal rights violations.

As someone at the forefront of addressing these challenges, I have witnessed firsthand the detrimental effects of such systemic issues on our clients and their families. It's not merely a matter of policy failure; it's a matter of failing those who rely on us for support and protection. The responsibility to rectify these issues lies not only with the state of Connecticut but also at the federal level, where a more robust oversight mechanism is urgently needed.

In conclusion, the situation we are confronting is not an isolated incident but a manifestation of national concern. It demands more than passive acknowledgment; it requires proactive and decisive federal intervention. The

well-being of countless individuals, dependent on the integrity and efficacy of our federal and state systems, hangs in the balance.

I beseech you to acknowledge the gravity of this situation and the federal government's role in its development. It is imperative that the United States assume responsibility for these systemic failures and implement tangible solutions.

I thank you for your consideration of this critical matter and await your prompt response. I am prepared to provide any additional information or assistance as required.

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



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Submission ID: 959671

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Your FOIA request has been created and is being sent to the Council of the Inspectors General on Integrity and Efficiency .

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Contact the agency



FOIA Requester Service Center 

202-616-1210



Elizabeth Sweetland, FOIA Public Liaison 

202.924.3940

elizabeth.sweetland@cigie.gov



FOIA Contact, Suite 825
1717 H Street, NW
Washington, DC 20006

Request summary

Request submitted on **November 26, 2023**.

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Contact information

Name

David MEDEIROS

Mailing address

215 Mountain St
Willimantic, CT 06226
United States

Phone number

8604633638

Company/organization

ABI Resources LLC

Email

aabiwr@live.com

Your request

FOIA Request to CMS for Oversight Records on Connecticut DSS's Compliance with ABI Waiver Program Subject: FOIA Request for CMS Oversight Records of Connecticut DSS Compliance with ABI Waiver Program To: Appropriate FOIA Officer or Department Contact Date: 11/26/2023 Dear FOIA Officer Under the Freedom of Information Act (FOIA), I, David Medeiros, am requesting access to and copies of records held by the Centers for Medicare & Medicaid Services (CMS) pertaining to the oversight and evaluation of the Connecticut Department of Social Services (DSS) in its administration of the Acquired Brain Injury (ABI) Waiver Program. This request is focused on obtaining CMS records that demonstrate or evaluate the extent to which Connecticut DSS adheres to its designated responsibilities under Section 17b-260a-10 of the Regulations of Connecticut State Agencies, specifically: 1) CMS Evaluations or Audits of DSS Information Dissemination: Records assessing how DSS informs individuals about their options under the ABI waiver program, including alternative choices between institutional or home and community-based services. 2) CMS Oversight on DSS's Social Work Services: Documentation or reports of CMS oversight on DSS assessments for individuals' eligibility, service plan development, and implementation assistance. 3) CMS Reviews of DSS Service Plan Management: Records of CMS reviews or audits pertaining to DSS's service plan reviews, annual reassessments, and record maintenance protocols. 4) CMS Assessment of DSS Advisory on Rights: Documentation of how DSS informs individuals of their rights to administrative hearings in case of grievances, as reviewed or audited by CMS. 5) CMS Analysis of DSS Waiting List Procedures: Records detailing CMS's evaluation of the DSS-managed waiting list for individuals ineligible for ABI services. 6) CMS Reports on DSS Provider Management: Assessments or audits by CMS regarding DSS's criteria for establishing provider qualifications and maintenance of provider directories. 7) CMS Review of DSS Payment Rate Policies: Documents or evaluations by CMS regarding how DSS sets and revises payment rates for services. 8) CMS Records of DSS Service Payments: Records or audits of DSS's processes and practices in making payments for ABI waiver services. 9) CMS Analysis of DSS Financial Eligibility Determinations: Evaluations by CMS on DSS's procedures for determining individuals' financial eligibility for the program. 10) CMS Overall Oversight Reports on DSS Compliance: Comprehensive reports or audits by CMS examining DSS's overall compliance, oversight, and quality measures in relation to the ABI waiver program. 11) Should any part of the requested documents be exempt from disclosure, please provide a comprehensive written justification for each exemption, citing the relevant statutory exemption. Please redact only the exempted portions, keeping the rest of the document intact. 12) In case of a

partial or complete denial of my request, I seek a written explanation, specifying the statutory exemptions justifying the denial. 13) Due to a disability, I request the provision of electronic records to facilitate accessibility and participation. 14) Please provide the requested documents electronically, 15) If my request is denied in whole or part, I ask for justification of all deletions by reference to specific exemptions of the Act. Thank you for your attention to this matter. Sincerely, David Medeiros ABI Resources

Additional information



11.24.2023 Complaint and Urgent Request for Federal Intervention in Addressing Systemic Rights Violations in Connecticut All Relevant Federal Authorities and Departments United States of America.pdf

Fees

Fee waiver

no

Request expedited processing

Expedited processing

yes

Justification for expedited processing

Justification for Expedited Processing: I respectfully request expedited processing of this FOIA request based on the compelling need to inform the public about the Connecticut Department of Social Services' administration of the Acquired Brain Injury (ABI) Waiver Program. This program is of significant public interest as it directly impacts the well-being and rights of individuals with acquired brain injuries – a vulnerable and often underrepresented group in our community. The timely dissemination of this information is crucial for ensuring public confidence in the program's administration and effectiveness. It will also assist in fostering informed public dialogue and potential advocacy regarding the quality of care and services provided to individuals under this program. Delay in the release of this information could potentially impact the welfare of individuals relying on the services provided under the ABI Waiver Program and hinder public understanding of the program's current efficacy. Therefore, an expedited review and response to this request would significantly contribute to the public's understanding of a matter of considerable importance. I understand that under FOIA guidelines, expedited processing can be granted if the requester demonstrates a compelling need related to public interest or urgency. I believe this request meets these criteria, given its focus on a critical public health and social welfare issue. Thank you for considering this request for expedited processing. Sincerely, David Medeiros



FOIA.gov

CONTACT

Office of Information Policy (OIP)
U.S. Department of Justice
441 G St, NW, 6th Floor
Washington, DC 20530
E-mail: National.FOIAPortal@usdoj.gov

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Contact the agency



FOIA Requester Service Center 

202-616-1210



Elizabeth Sweetland, FOIA Public Liaison 

202.924.3940

elizabeth.sweetland@cigie.gov



FOIA Contact, Suite 825
1717 H Street, NW
Washington, DC 20006

Request summary

Request submitted on **November 26, 2023**.

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Contact information

Name

David MEDEIROS

Mailing address

215 Mountain St
Willimantic, CT 06226
United States

Phone number

8604633638

Company/organization

ABI Resources LLC

Email

aabiwr@live.com

Your request

11.26.2023 Dear Freedom of Information Officer, Subject: FOIA Request for Email Communications Involving Connecticut Community Care and The Supported Living Group I am writing to request access to and copies of all email communications to and from Connecticut Community Care (CCC), a statewide nonprofit receiving federal funds, and The Supported Living Group, under the Connecticut Freedom of Information Act, Conn. Gen. Stat. § 1-200 et seq. This request specifically seeks to obtain all such email communications for the period from 2013 to the present date. The scope of this request includes, but is not limited to, emails between any representatives, employees, or agents of CCC and The Supported Living Group. As per the FOIA guidelines, if any part of the requested documents is exempt from disclosure, please provide a comprehensive written justification for each exemption, citing the relevant statutory exemption. Only the exempt portions should be redacted, with the rest of the document left intact. In case of a partial or complete denial of my request, I seek a detailed written explanation, specifying the statutory exemptions justifying the denial. Disability Accommodation: Due to a disability, I request that the provided records be in an accessible electronic format. This accommodation is essential to ensure my equal access to the requested information. Statement of Uniqueness: This request is unique and should be treated independently, not combined with any other FOIA requests. It seeks specific information that may not be covered by other requests. Request for FOIA Officer's Contact Information: For effective communication, please provide the name, title, and contact information of the FOIA officer handling this request. I prefer to receive the requested documents electronically. Thank you for your attention to this request. Sincerely, David Medeiros ABI Resources

Fees**Fee waiver**

no

Request expedited processing**Expedited processing**

yes

Justification for expedited processing

Justification for Expedited Processing of FOIA Request Dear Freedom of Information Officer, In conjunction with my FOIA request dated [Insert Date] for email communications involving Connecticut Community Care and The Supported Living Group, I am requesting expedited processing of this request based on the following justifications: Urgency to Inform the Public: The information sought is urgently needed to inform the public about significant activities or operations involving a nonprofit organization receiving federal funds and its interactions with The Supported Living Group. This information is of considerable current public interest and concern, as it relates to the accountability and transparency of organizations that operate with federal funding and provide essential community services. Compelling Need Due to Personal Circumstances. Impact on Public Understanding: The release of this information will significantly enhance the public's understanding of [describe the specific issue or situation that the FOIA request addresses], which is not currently well understood but should be due to its implications on public welfare and governance. I assert that these conditions meet the criteria for expedited processing as outlined in the Freedom of Information Act and its implementing regulations. The delay in obtaining this information could reasonably be expected to pose a significant risk to the public interest. Given these factors, I respectfully request that my FOIA request be processed on an expedited basis. Your prompt attention to this request is greatly appreciated.

**FOIA.gov****CONTACT**

Office of Information Policy (OIP)
U.S. Department of Justice
441 G St, NW, 6th Floor
Washington, DC 20530
E-mail: National.FOIAPortal@usdoj.gov

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Submission ID: 959676

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Contact the agency



FOIA Requester Service Center 

202-616-1210



Elizabeth Sweetland, FOIA Public Liaison 

202.924.3940

elizabeth.sweetland@cigie.gov



FOIA Contact, Suite 825
1717 H Street, NW
Washington, DC 20006

Request summary

Request submitted on **November 26, 2023**.

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Contact information

Name