COMPLAINT OF PROHIBITED PERSONNEL PRACTICE OR OTHER PROHIBITED ACTIVITY

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

* Denotes Required Fields

IMPORTANT INFORMATION ABOUT FILING A PPP COMPLAINT

REQUIRED COMPLAINT FORM

Complaints alleging a prohibited personnel practice or a prohibited activity must be submitted using the Online Filing Portal or emailing OSC Form 14 to our office. Information not submitted on or accompanied by this form may be returned by OSC to the filer. The complaint will be considered filed on the date on which OSC receives the completed form. 5 C.F.R. § 1800.1, as amended.

NO OSC JURISDICTION

OSC cannot take any action on complaints filed by employees of –

- the FBI, CIA, DIA, NSA, National Geospatial-Intelligence Agency, ODNI, National Reconnaissance Office or other intelligence agencies excluded from coverage by the President;
- the Government Accountability Office;
- the Postal Rate Commission; and
- the uniformed services of the United States (*i.e.*, uniformed military employees). OSC does have jurisdiction over civilian employees of the armed forces.

LIMITED OSC JURISDICTION

For employees of some federal agencies or entities, OSC's jurisdiction is limited to certain types of complaints, as follows –

- FAA employees only for allegations of retaliation for whistleblowing under 5 U.S.C. § 2302(b)(8) and most allegations of retaliation for engaging in protected activities under 5 U.S.C. § 2302(b)(9).
- Employees of government corporations listed at 31 U.S.C. § 9101 only for allegations of retaliation for whistleblowing under 5 U.S.C. § 2302(b)(8) and most allegations of retaliation for engaging in protected activities under 5 U.S.C. § 2302 (b)(9).
- U.S. Postal Service employees only for allegations of nepotism.
- TSA employees only for allegations of discrimination under § 2302(b)(1), retaliation for whistleblowing under 5 U.S.C. § 2302(b)(8), and most allegations of retaliation for engaging in protected activities under 5 U.S.C. § 2302(b)(9).

ELECTION OF REMEDIES

You may choose only one of three possible methods to pursue your prohibited personnel practice complaint: (a) a complaint to OSC; (b) an appeal to the Merit Systems Protection Board (MSPB) (if the action is appealable under law or regulation); or (c) a grievance under a collective bargaining agreement. If you have already filed an appeal about your prohibited

personnel practice allegations with the MSPB, or a grievance about those allegations under the collective bargaining agreement (if the action is grievable under the agreement), OSC may lack jurisdiction over your complaint.5 U.S.C. § 7121(g).

COMPLAINTS INVOLVING DISCRIMINATION

- Race, Color, Religion, Sex, National Origin, Age, and Disability (or Handicapping Condition): OSC is authorized to investigate discrimination based upon race, color, religion, sex, national origin, age, or disability (or handicapping condition), as well as retaliation related to EEO activity. 5 U.S.C. § 2302(b)(1). However, OSC generally defers such allegations to agency procedures established under regulations issued by the Equal Employment Opportunity Commission (EEOC). 5 C.F.R. § 1810.1. If you wish to report allegations of discrimination based on these bases, you should contact your agency's EEO office immediately. There are specific time limits for filing such complaints. Filing a complaint with OSC will not relieve you of the obligation to file a complaint with the agency's EEO office within the time prescribed by EEOC regulations (at 29 C.F.R. Part 1614).
- Marital Status and Political Affiliation: OSC is authorized to investigate discrimination based on marital status or political affiliation. 5 U.S.C. § 2302(b)(1).
- Sexual Orientation and Gender Identity: OSC is authorized to investigate discrimination based on sexual orientation and gender identity. 5 U.S.C. §§ 2302(b)(1) and (b)(10). EEOC also may have jurisdiction over complaints of discrimination on these bases.

COMPLAINTS INVOLVING VETERANS' RIGHTS

By law, all complaints alleging denial of veterans' preference requirements or USERRA must be filed with the Veterans Employment and Training Service (VETS) at the Department of Labor (DOL). 38 U.S.C. § 4301, *et seq.*, and 5 U.S.C. § 3330a(a).

CONTACT INFORMATION

Title:
First Name:* David
Last Name:* Medeiros
Middle Initial: Daniel

International Address?: No
Address:*

215 Mountain St
Willimantic, CT 06226

Cell Phone Number:
Office Phone Number:
Email Address:* aabiwr@live.com

Home Phone Number:
Ext.

Preferred means of contact:
Email: Yes
Home phone: No

Cell phone: No
Office phone: No

REPRESENTATIVE INFORMATION

Do you have representation?* No

Information about representative, if applicable.
First Name:*

Last Name:*
Middle Initial:

International Address?:
Address:*

Office Phone Number:
Cell Phone Number:
Email Address:*

Ext.
Home Phone Number:

EMPLOYMENT INFORMATION

Name of Department/Agency about which you are filing this complaint.
Department:* Health and Human Services
Agency:* Other
Agency subcomponent: ABI Waiver Program / Medicaid Division Connecticut Department of Social Services
Street Address: 55 Farmington Avenue
City: Hartford **State:** CT
Zip Code: 06105

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

Title	Series	Grade

Please provide your dates of employment in this position.

Are you covered by a collective bargaining agreement? No

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

DETAILS OF YOUR COMPLAINT

Use this section to identify the type of Prohibited Personnel Practice (PPP) that you are alleging. You can enter more than one PPP, but you MUST choose one option. A customized series of questions will appear following your selection that you should use to provide detailed information about your complaint. You can return to this part at any time prior to submitting your complaint if you would like to add or remove allegations.

PPPs ALLEGED

Allegation	Retaliation for Whistleblowing - (b)(8)
What did you disclose? If you made your disclosure in writing, please attach a copy to your complaint before you submit it.	Systemic fraud in Connecticut Medicaid ABI Waiver program: kickbacks to unqualified care managers, improper billing for services not rendered or by unlicensed staff, medically unnecessary placements, and waste of federal Medicaid funds harming brain-injury survivors.
When did you disclose it?	Ongoing since January 2024 (public on X and direct complaints); most recent disclosures November 20, 2025 to

	FBI Civil Rights, DOJ Civil Rights (#674949-MSF), and three HHS-OIG cases.
To whom did you make your disclosure?	Public on X (@DavidMedeiros and @ABIResources), FBI Civil Rights Division, DOJ Civil Rights Division, and HHS Office of Inspector General (three cases submitted November 20, 2025).
How did you learn of the information you disclosed?	As founder/CEO of ABI Resources LLC, a licensed Medicaid provider in the ABI Waiver program, through direct business experience, FOIA documents, billing records, emails, and testimonies from families and survivors.
When and how did agency officials learn about your disclosure?	Agency officials (Connecticut DSS and Beacon Health Options) learned through my public X posts and direct complaints beginning in 2024. Retaliation began November 8, 2025.
What action did the agency take in response to your disclosure? (For example, did the agency investigate or otherwise look into what you disclosed or was disciplinary action taken against responsible parties?)	No investigation of the fraud. Instead, DSS and Beacon coordinated a mass false-reporting brigade on X (November 8–20, 2025) to trigger visibility suppression of my whistleblower account, confirmed by X engineering as state-linked reports.
Description of personnel action(s), if applicable.	Coordinated online suppression campaign. State actors weaponized X's reporting system to silence protected disclosures about federal Medicaid fraud, confirmed by X engineering as originating from DSS/Beacon-linked accounts. This is retaliation using third-party platform mechanisms to censor whistleblower activity. Creation of a hostile work environment through coordinated harassment and intimidation. Connecticut DSS and Beacon Health Options organized a 12-day mass false-reporting brigade (50–200+ reports per cluster from state-linked accounts) on X (Twitter) November 8–20, 2025 to suppress my whistleblower speech, making it impossible to effectively perform my professional duties as a Medicaid provider and advocate for brain-injury survivors. Coordinated mass false-reporting on X (Twitter) to trigger 12-day visibility suppression of whistleblower account, confirmed by X

	engineering as state-linked retaliation Disciplinary deplatforming and suppression of protected speech. The coordinated brigade triggered X's automated author-level visibility restriction, reducing my whistleblower account @DavidMedeiros impressions from hundreds of thousands to under 100 for 12 days, as punishment for exposing Medicaid fraud.
When was the personnel action(s) taken? By whom?	The retaliatory personnel actions were taken continuously from November 8, 2025 through November 20, 2025. The actions consisted of a coordinated mass false-reporting brigade (50–200+ reports per cluster) originating from Connecticut Department of Social Services (DSS) and Beacon Health Options accounts/IPs, triggering X's author-level visibility restriction that suppressed my whistleblower account @DavidMedeiros to under 100 impressions per post for 12 days. X engineering confirmed the reports were state-linked. The restriction was only removed on November 20, 2025 after executive escalation. Responsible parties: Connecticut DSS leadership and Beacon Health Options management.
What was the agency's stated reason for taking the personnel action(s)?	No stated reason was ever provided. The retaliation was covert: a coordinated mass false-reporting brigade on X (Twitter) using dozens of state-linked accounts to trigger an automated visibility restriction. There was never any official notice, warning, or explanation — only silence and suppression. This is classic covert retaliation designed to punish protected whistleblower activity while maintaining plausible deniability.
What facts demonstrate that the personnel action(s) is retaliatory? (For example, were comments made that suggest that agency officials were angry because of your disclosure or did your relationships	The retaliation is demonstrated by direct timing, coordination, and absence of any other explanation. I have been exposing Connecticut Medicaid ABI Waiver fraud (kickbacks, unqualified providers, improper billing) publicly and to agencies since January 2024 with zero retaliation until November 8–20, 2025.

cool following your disclosure?)	Immediately after my most recent high-impact threads documenting fraud and evidence destruction, my post impressions suddenly collapsed from hundreds of thousands to under 100. X engineering confirmed the cause was a coordinated mass false-reporting brigade (50–200+ reports in <48 hours) originating from ct.gov email domains, Beacon Health Options corporate IPs, and allied non-profit accounts — the exact entities I have been exposing. No comments were needed — the covert nature of the attack (using anonymous reports to trigger automated suppression) is itself proof of intent to retaliate while maintaining deniability. The restriction was only lifted November 20, 2025 after I tagged Elon Musk and filed five federal complaints (FBI Civil Rights, DOJ Civil Rights #674949-MSF, three HHS-OIG cases). There is no other plausible explanation for the sudden, surgically precise suppression other than retaliation for my protected disclosures about federal Medicaid fraud.
Why do you believe agency officials would retaliate against you? (For example, did agency officials suffer some adverse impact or embarrassment because of your disclosure?)	My disclosures directly threaten a long-running fraud scheme that enriches unqualified care managers, Beacon Health Options executives, and corrupt DSS officials while stealing millions in federal Medicaid dollars meant for brain-injury survivors. My public exposure on X, FOIA documents, and federal complaints have caused embarrassment, potential loss of funding criminal exposure and public scrutiny for DSS leadership and Beacon Health Options management. The timing is undeniable: the coordinated suppression brigade began immediately after my most damaging threads documenting kickbacks and evidence destruction, and ended only when I filed five federal complaints and

	tagged Elon Musk. There is no other motive. They retaliated because my disclosures expose their personal and professional liability in a massive federal-program fraud. The retaliatory action was carried out covertly through coordinated mass-reporting from multiple state-linked accounts, so exact individual names are not known at this time. Responsible officials are senior leadership at: 1. Connecticut Department of Social Services (DSS) - Commissioner Andrea Barton Reeves (or her successor) - Deputy Commissioner for Programs Kathleen Brennan - ABI Waiver Program Director Michael Gilbert 2. Beacon Health Options (Elevance Health) – Connecticut behavioral health contractor - Vice President of Network Performance Michael Medina - Connecticut Medical Director Dr. Joseph Siciliano These officials have direct oversight of the ABI Waiver program I have been exposing and are the only parties with motive and ability to organize a state-wide reporting brigade against my whistleblower account. X engineering data (available upon subpoena) shows the reports originated from DSS/Beacon IP ranges and ct.gov email domains under their control.
Were the agency officials involved in taking the personnel actions against you accused of wrongdoing in your disclosures? If yes, which ones?	Yes. The same officials responsible for the retaliation are the exact officials I accused in my disclosures of wrongdoing: - Connecticut DSS leadership (Commissioner Andrea Barton Reeves, Deputy Commissioner Kathleen Brennan, ABI Waiver Director Michael Gilbert) – accused of allowing and protecting kickbacks, unqualified providers, improper billing, and waste of federal Medicaid funds.

	- Beacon Health Options management (VP Michael Medina, Medical Director Dr. Joseph Siciliano) – accused of participating in and profiting from the fraud scheme. The retaliation was carried out to protect themselves from exposure and potential criminal liability.The retaliatory action was carried out covertly through coordinated mass-reporting from multiple state-linked accounts, so exact individual names are not known at this time. Responsible officials are senior leadership at: 1. Connecticut Department of Social Services (DSS) - Commissioner Andrea Barton Reeves (or her successor) - Deputy Commissioner for Programs Kathleen Brennan - ABI Waiver Program Director Michael Gilbert 2. Beacon Health Options (Elevance Health) – Connecticut behavioral health contractor - Vice President of Network Performance Michael Medina - Connecticut Medical Director Dr. Joseph Siciliano These officials have direct oversight of the ABI Waiver program I have been exposing and are the only parties with motive and ability to organize a state-wide reporting brigade against my whistleblower account. X engineering data (available upon subpoena) shows the reports originated from DSS/Beacon IP ranges and ct.gov email domains under their control.

PPP SUBJECTS

Agency official(s) responsible for the PPP(s) alleged:

First Name	Last Name	Title	Chain of Command	Allegation

Andrea Barton Reeves Title: Commissioner, Connecticut Department of Social Services (DSS)	Reeves	Commissioner, Connecticut Department of Social Services (DSS)		Retaliation for Whistleblowing - (b)(8)
Kathleen Brennan Title: Deputy Commissioner, Connecticut Department of Social Services Position in	Kathleen Brennan	Deputy Commissioner for Programs Kathleen Brennan	Deputy Commissioner for Programs Kathleen Brennan	Retaliation for Whistleblowing - (b)(8)
ABI Waiver Program Director Michael Gilbert	ABI Waiver Program Director Michael Gilbert	ABI Waiver Program Director Michael Gilbert	ABI Waiver Program Director Michael Gilbert	Retaliation for Whistleblowing - (b)(8)
Michael Medina	Michael Medina	Vice President of Network Performance Michael Medina	Beacon Health Options (Elevance Health) – Connecticut behavioral health contractor	Retaliation for Whistleblowing - (b)(8)
Dr. Joseph Siciliano	Dr. Joseph Siciliano	Connecticut Medical Director Dr. Joseph Siciliano	Connecticut Medical Director Dr. Joseph Siciliano These officials have direct oversight of the ABI	Retaliation for Whistleblowing - (b)(8)

PERSONNEL ACTIONS

What personnel action(s) do you believe was taken, not taken, or threatened as part of the prohibited personnel practice(s) alleged?

Personnel Actions

Harassment/Hostile Work Environment
Other Discipline
Other

REQUESTED OSC ACTION

What action would you like OSC to take?
Conduct a full investigation into the prohibited personnel practice (retaliation under 5 U.S.C. § 2302(b)(8) and (b)(9)).

Order immediate corrective action including:
- Permanent cease of all retaliation by Connecticut DSS and Beacon Health Options
- Full restoration of my ability to communicate as a Medicaid provider and whistleblower
- Disciplinary action against responsible officials

Grant me full whistleblower protection status and any additional relief available under law.

This retaliation was in direct response to protected disclosures about federal Medicaid fraud already under investigation by FBI, DOJ Civil Rights #674949-MSF, and three HHS-OIG cases opened November 20, 2025.

WHERE ELSE DID YOU REPORT THIS MATTER?

I have also reported this information to:

Other Report Type	Action Taken Date

ATTACHMENTS

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

I have attached the following documents to my filing:

File Name
11.20.2025 Report Whistleblower Retaliation.pdf
11.20.2025 Report Whistleblower Retaliation.pdf
11.20.2025 Report Healthcare Fraud.pdf
Step 7_ Review - Contact the Civil Rights Division _ Department of Justice.pdf
674949-MSF Submission complete.pdf
11.19.2025 DOJ CBIS Report Healthcare Fraud.pdf
NOTICE Formal Complaint and Demand for Compliance in Medicaid Connecticuts ABI Waiver Program.pdf
DOJ 674164-QFT Submission complete 2 .pdf
NED LAMONT Screenshot 2025-11-10 101426.png
DOJ 674164-QFT Submission complete.pdf
11.18.2025 Kellye Hudson Urgent Escalation ADA Retaliation Complaint Unanswered (Requesting CHRO Action) Sent Items - ABI RESOURCES 860 942-0365 - Outlook.pdf
11.18.2025 Urgent Escalation ADA Retaliation Complaint Unanswered (Requesting CHRO Action).pdf
12.16.2023 Complaint Against Connecticut CHRO for Disability Discrimination and Whistleblower Retaliations. RE David Medeiros v. State of CT Department of Social Services CHRO No. 2410220 .pdf
11.18.2025 Urgent Escalation ADA Retaliation Complaint Unanswered (Requesting CHRO Action).pdf
Cybersecurity Issue and Conflict of Interest IC3 Complaint I2507081647058791 CT GOV .pdf
FBI ARUA 11.13.2025 Sent Items - ABI RESOURCES 860 942-0365 - Outlook.pdf
CT GOV NED 11.10.2025 Electronic Tip Form _ FBI.pdf
Screenshot 2025-11-11 132414.png
Appeal of OSE Denial Nov 09 FOIA Request for Gov Lamont 2019 Recusal List Case Ref Nov 10 Denial from Diane P Buxo Constructive Denial per 1-205 9.pdf
Medeiros Response -Acknowledgment Nov 10 2025.pdf
Jonathan A. Kappan David Medeiros PULLMAN COMLEY LLC.png
Michael Elliott DCP Homemaker Companion Agency - Incomplete Renewal - Protected Whistleblower Demand for Immediate Approval & Oversight Disclosure.pdf
10.02.2025 Attorney General Fraud Unit FBI IC3 Complaint No. I2507081647058791 Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
10.02.2025 Attorney General Fraud Unit FBI IC3 Complaint No. I2507081647058791 Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf

CHRO 4 09.24.2025 Binder1.pdf
FBI CT GOV NED LAMONT 2025-11-10 123850.jpg
09.24.2024 Federal_Intervention_HHS_OIG_CMS_GAO_DOJ_OCR_Whistleblower_Report_2024 (1).pdf
RWB 1946 Pardo FBI CRT HHS .pdf
OCR Cases 25-633230 and 24-556944 Consolidation Confirmation Status Investigator Next Steps and 504 508 Accommodation.pdf
Comprehensive Grievance Report and Request for Clarity Whistleblower Report Mediciad ABI Waiver Programs (1).pdf
Auditors of Public Accounts ADA_FOIA_LitigationHold_CCC_Medicaid_Fraud_Retaliation_Kickbacks_2025-10-06 .pdf
Attorney General Tong Follow Up FBI DOJ CMS HHS CRT 10.27.2025 .pdf
ADA_FOIA_LitigationHold_CCC_Medicaid_Fraud_Retaliation_Kickbacks_2025-10-06 .pdf
10.28.2025 IMMEDIATE DOCKETING OF TIMELY FOIC APPEAL DOJ FBI HHS CMS CRT ABI .pdf
Chief Silva Mail - ABI RESOURCES 860 942-0365 - Outlook.pdf
CT_APA_FOIA_Request_Medicaid_Fraud_Whistleblower_Records_2025-10-16.pdf
doj crt connecticut ct gov mediciad .png
CT GOV COVER UP CRIMES MEDICAID DOJ FBI POLICE CRT HHS CMS LAMONT MURPHY SENATORS CONGRESS CHRO MEDEIROS (6).png
Screenshot (47).png
Screenshot (1110).png
Screenshot 2025-11-18 132413.png
Screenshot 2025-11-18 132413.png
Screenshot 2025-11-18 124535.png
Screenshot 2025-11-10 101426.png
Screenshot 2025-11-11 132414.png
Screenshot 2025-11-10 084736.png

CONSENT

OSC asks everyone who files a complaint alleging a possible prohibited personnel practice or other prohibited activity to select one of three Consent Statements shown below. Please: (a) select and check one of the Consent Statements below; and (b)

keep a copy for your own records.*

If you initially select a Consent Statement that restricts OSC's use of information, you may later select a less restrictive Consent Statement. If your selection of Consent Statement 2 or 3 prevents OSC from being able to conduct an investigation, an OSC representative will contact you, explain the circumstances, and provide you with an opportunity to select a less restrictive Consent Statement.

You should be aware that the Privacy Act and other applicable federal laws allow information in OSC case files to be used or disclosed for certain purposes, regardless of which Consent Statement you sign. Information about certain circumstances under which OSC can use or disclose information under the Privacy Act appears in the Form Submission part of this form.

Consent Statement 1
I consent to OSC's communication with the agency involved in my complaint. I agree to allow OSC to disclose my identity and information about my complaint if OSC decides that such disclosure is needed to investigate my complaint (for example, to request information from the agency or seek a possible resolution).
Yes

Consent Statement 2
I consent to OSC's communication with the agency involved in my complaint, but I do not agree to allow OSC to disclose my identity to that agency. I agree to allow OSC to disclose only information about my complaint, without disclosing my name or other identifying information, if OSC decides that such disclosure is needed to investigate my complaint (for example, to request information from the agency, or seek a possible resolution). I understand that in some circumstances, OSC could not maintain my anonymity while communicating with the agency involved about a specific personnel action. In such cases, I understand that my request for confidentiality may prevent OSC from taking further action on the complaint.
No

Consent Statement 3
I do not consent to OSC's communication with the agency involved in my complaint. I understand that if OSC decides that it cannot investigate my complaint without communicating with that agency, my lack of consent will probably prevent OSC from taking further action on the complaint.
No

CERTIFICATION

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

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

This complaint of Prohibited Personnel Practice(s) was received by OSC on:
11/20/2025

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