

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

**UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA**

Case Title:

*John R. Fouts, MBA (“Plaintiff” aka “JRF”, “J.R.F.”), and Jackie Fouts (a minor aka Jacquelyn A. Fouts, legal name Jack A. Fouts, “Plaintiff’s Child”, “J.A.F.”, “JAF”, “Co-Plaintiff”, “Child”),
Plaintiffs,*

v.

*Commonwealth of Kentucky, Cabinet for Health and Family Services, Department of
Community-Based Services, and Other Named Defendants, Defendants – Action for
Emergency Injunctive Relief, Permanent Restraining Order, Permanent Protective Order,
Punitive and Compensatory Damages.*

Plaintiff(s):

John R. Fouts, MBA, and Jackie A. Fouts (aka Jacquelyn A. Fouts, legal name Jack A. Fouts,
“Plaintiff’s Child”, J.A.F., JAF)

**EMERGENCY PRELIMINARY INJUNCTION, PERMANENT
RESTRAINING AND PROTECTIVE ORDERS, AND PUNITIVE
AND COMPENSATORY DAMAGES**

INTRODUCTION

Plaintiff, **John R. Fouts, MBA**, respectfully moves this Court for an **Emergency Preliminary Injunction, Permanent Restraining Order, and Permanent Protective Order** to address ongoing **willful endangerment, malicious intent to harm, harassment, obstruction of**

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

justice, and systemic violations of federal law, constitutional rights, and civil rights protections by the Defendants. Plaintiff reserves the right to add further violations and responsible parties as additional evidence emerges.

Plaintiff suffers from **complex, rare, and debilitating medical conditions**, including but not limited to **Complex Regional Pain Syndrome (CRPS), Sjögren's Disease, Graves' Disease (post-radioactive iodine), dysautonomia, gastroparesis, advanced brain atrophy, small fiber neuropathy, erythromelalgia, TNFRSF13B deficiency, and more.**

These conditions have been **exacerbated by the Defendants' deliberate actions, omissions, and systemic failures** to provide legally mandated care and protections. Plaintiff and Plaintiff's child are **subjected to retaliation, discrimination, and deprivation of essential services**, including those mandated under federal law.

Defendants have engaged in **systemic discrimination, lack of transparency, malicious retaliation, and intentional obstruction of justice**, depriving Plaintiff and Plaintiff's child of critical services and fundamental rights under federal and constitutional law. Plaintiff and Plaintiff's child face **imminent and ongoing harm**, including threats to life, safety, and quality of life, due to the Defendants' collective failures and misconduct.

The Defendants include not only the named state entities but also **federal agencies**, including but not limited to the **Centers for Medicare and Medicaid Services (CMS)**, the **U.S. Department of Agriculture Food and Nutrition Service (USDA-FNS)**, and **other federal entities** involved in systemic violations of law and policy. These agencies have demonstrated **willful neglect** in addressing Plaintiff's grievances, contributing to the harm inflicted upon Plaintiff and Plaintiff's child.

Additionally, the Plaintiff is doing his best to provide this Court with a comprehensive account of the violations and harm but is hindered by reduced memory, executive functioning, and cognitive impairments caused by advanced brain atrophy and other health challenges.

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

Plaintiff pleads the Court to recognize this difficulty and respectfully requests any opportunity to amend or supplement this filing as new information becomes available or as memory improves with appropriate treatment .

BACKGROUND

A. Health and Disability:

- Plaintiff is permanently disabled, as recognized under SSA SSDI Title II with official date of disability onset of June 30, 2022, and suffers from rare and numerous complex conditions **including CRPS, PTSD, Sjögren's Disease, Graves' Disease (post-radioactive iodine), dysautonomia, gastroparesis, advanced brain atrophy, small fiber neuropathy, erythromelalgia, TNFRSF13B deficiency, and more.**
- Plaintiff's child also suffers from complex medical and developmental conditions, including autism, PTSD from bullying, auditory processing disorder, small fiber neuropathy, gastroparesis, and temperature dysregulation, ADHD, heterozygous TNFRSF13B deficiency, and more.
 - Plaintiff's child is also disabled under SSI as provided per SSA. Child is now noted through SSA, however, as child of a disabled worker.
 - Everyone in the household is disabled.

B. Violations:

Defendants have engaged in systemic violations, including, and not limited to:

a. Constitutional Amendments Violations:

i. 1st Amendment:

- Retaliation for Plaintiff's whistleblowing activities and advocacy for rights, suppressing freedom of speech and petitioning the government for grievances.

ii. 4th Amendment:

- Unlawful surveillance and excessive monitoring (e.g., repeated credit checks without authorization) constituting unreasonable searches and seizures.

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

iii. 5th Amendment:

- Deprivation of due process and property rights through wrongful denial of benefits, falsification of records, and failure to provide procedural safeguards.

iv. 8th Amendment:

- Cruel and unusual punishment through systemic neglect, refusal to provide medical care, and conditions causing severe physical and mental suffering and lasting severe and permanent irreparable harm.

v. 9th Amendment:

- Denial of fundamental rights to health, safety, and well-being, not explicitly enumerated but protected under broader constitutional principles.

vi. 13th Amendment:

- Involuntary servitude through excessive administrative burdens placed on Plaintiff to repeatedly prove eligibility for benefits and rights already established.

vii. 14th Amendment:

- Denial of equal protection and due process through systemic discrimination, targeted retaliation, and deprivation of rights without just cause or procedural fairness.

b. Federal Law Violations:

i. Americans with Disabilities Act (ADA), including the Olmstead Act:

- Violation: Systemic denial of reasonable accommodations, access to services, and integration into the community in **violation of disability rights.**

ii. Section 504 of the Rehabilitation Act:

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

- Violation: Discrimination in federally funded programs by failing to provide equal access and reasonable accommodations for a person with disabilities.

iii. **Fair Credit Reporting Act (FCRA):**

- Violation: Unlawful repeated credit checks by state and federal agencies without authorization, causing undue harm to Plaintiff's privacy and rights.

iv. **Health Insurance Portability and Accountability Act (HIPAA):**

- Violation: Unauthorized disclosure and mishandling of Plaintiff's sensitive medical information.

v. **Violence Against Women Act (VAWA):**

- Violation: Systemic failures in federally funded housing programs (HUD/LMHA) to provide safety and security, placing Plaintiff and Plaintiff's child at risk.

vi. **Conspiracy Against Rights**

- Collusion between state agencies, healthcare providers, or other entities to deny Plaintiff access to medical care, benefits, or services.

vii. **Conspiracy to Obstruct Justice 18 U.S.C. § 371**

- Coordination among state agencies, healthcare providers, or other entities to delay or obstruct Plaintiff's access to federally mandated benefits, medical treatments, or due process protections.

viii. **Conspiracy to Commit Offense or to Defraud the United States (18 U.S.C. § 371)**

- Violation: Denial of necessary Medicaid Waiver services, including home and community-based services mandated under federal law.

ix. **Racketeer Influenced and Corrupt Organizations Act (RICO) (18 U.S.C. §§ 1961-1968):**

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

- Violation: RICO addresses patterns of racketeering activity, including fraud, that affect interstate or foreign commerce. Potential involvement by KY entities, agencies, individuals, et. al. Requesting a formal investigation.
- x. **Social Security Act 1915(c):**
 - Violation: Denial of necessary Medicaid Waiver services, including home and community-based services mandated under federal law.
- xi. **Right to Try Act:**
 - Violation: Blocking access to potentially life-saving experimental treatments for Plaintiff's rare and complex conditions.
- xii. **Supremacy Clause:**
 - Violation: State actions and policies directly contradicting federal laws and regulations, demonstrating a lack of adherence to constitutional supremacy.
- xiii. **Color of Law Violations:**
 - Violation: Abuse of authority by state and federal officials, leading to systemic retaliation and denial of federally protected rights.
- xiv. **Civil Rights Act:**
 - Violation: Discriminatory practices in public services and programs based on disability and socioeconomic status.
- xv. **Medical Malpractice and Neglect:**
 - Violation: Repeated refusal to provide medically necessary treatments and care, leading to worsening health outcomes.
- xvi. **Federal Medicaid Regulations (Out-of-State Services):**
 - Violation: Denial of Medicaid coverage for out-of-state treatments where no in-state provider is available, directly contradicting federal Medicaid laws.

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

xvii. Breach of Contract and Breach of Good Faith:

- Violation: Failure of agencies to uphold agreements and fair practices in administering public benefits and healthcare.

xviii. Obstruction of Justice:

- Violation: Withholding information, removing hearings without consent, and blocking avenues for Plaintiff to challenge systemic violations effectively.

xix. Whistleblower Protections:

- Violation: Retaliation and inaction following Plaintiff's whistleblower complaints to federal agencies, failing to ensure protections mandated by law.

xx. Tort Acts (Negligence, Intentional Infliction of Emotional Distress):

- Violation: Actions causing unnecessary physical, emotional, and financial harm to Plaintiff through neglect and malicious intent.

xxi. Transparency (Lack of):

- **Violation:** Refusal to provide clear information, failure to identify correspondents, and repeated lies in writing to mislead and obstruct Plaintiff.

xxii. Willful Endangerment:

- **Violation:** Deliberate actions and inactions by Defendants knowingly placing Plaintiff and Plaintiff's child in harm's way.

xix. Willful Neglect:

- **Violation:** Repeated refusal to act on Plaintiff's medically documented needs, resulting in severe and irreversible harm.

xx. Willful Abandonment:

- **Violation:** Abandonment of legal and ethical duties to provide care and support mandated under federal and state laws.

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

xxi. Harassment:

- **Violation:** Persistent and targeted actions causing emotional and psychological distress to Plaintiff, including unnecessary administrative burdens and retaliatory measures.

xxii. Refusal to Correct Falsified Records:

- **Violation:** Failure to amend demonstrably false and damaging information in Plaintiff's medical and official records, perpetuating harm and misinformation.

Further Elaboration:

Malicious Intent to Harm:

Defendants' actions and inactions demonstrate deliberate and malicious intent to harm the Plaintiff and Plaintiff's child by:

- Willfully denying federally mandated benefits and necessary medical care, despite clear evidence of eligibility and medical necessity.
- Falsifying records and perpetuating false narratives (e.g., CPS reports and medical records) to obstruct justice and discredit Plaintiff.
- Retaliating against Plaintiff for whistleblowing through systemic discrimination, administrative burdens, and obstruction of due process.
- Exposing Plaintiff and Plaintiff's child to unsafe living conditions and refusing to provide safe and secure housing or appropriate remedies.
- Causing irreparable harm through deliberate acts of willful endangerment, neglect, and abandonment.

These actions rise to the level of criminal violations **under 18 U.S.C. § 242 (Deprivation of Rights Under Color of Law)** and constitute **willful endangerment, willful neglect, and harassment**, all of which are **punishable under state and federal law**.

Failure of Duty to Provide Care

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

Defendants failed in their legal and ethical duty to provide care by:

- Denying necessary medical treatments, prescriptions, and diagnostic tests, including life-sustaining and medically required interventions, despite medical necessity and federal mandates.
- Refusing to ensure access to care providers and specialists capable of treating Plaintiff's rare and complex conditions, thereby exacerbating Plaintiff's health deterioration.
- Neglecting to correct systemic failures in programs such as Medicaid, SNAP, and housing assistance, leaving Plaintiff without the support required for survival and well-being.
- Violating the **Social Security Act (SSA) Section 1915(c)** and **Americans with Disabilities Act (ADA)** by failing to provide necessary accommodations and support services.
- Allowing administrative delays, denials, and retaliation to impede Plaintiff's access to care, in direct conflict with federal requirements and ethical responsibilities.

This failure to act constitutes **willful neglect, medical malpractice, and gross negligence**, resulting in irreparable harm and systemic discrimination.

Personal Vulnerability and Major Safety Concerns:

Federal Neglect: Lack of Response from the FBI

- Plaintiff submitted whistleblower letters detailing systemic violations of federal law and personal safety concerns to the FBI.
- Due to the lack of a fax number for the Louisville FBI office, Plaintiff directed these letters to the Chicago FBI office.

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

- Despite the serious nature of the allegations, Plaintiff received no acknowledgment, follow-up, or action from the FBI.
- The failure of the FBI to respond reflects a breakdown in federal oversight and protection mechanisms for whistleblowers.
- Not only did the FBI not respond, but not one single agency, entity, nor individual responded nor acknowledged receipt in any way despite the Plaintiff being able to track even the number of opens of the emails sent. This inaction leaves Plaintiff without critical federal protection and exacerbates the risk of retaliation or harm.
- It also highlights systemic failures in addressing whistleblower concerns across multiple levels of law enforcement.
- The Jefferson County Sheriff's Department in Kentucky nor the Louisville Metro Police Department responded to claims as well.
- Many other federal agencies are also implicated in this major lack of response potentially leading to catastrophic harm for the Plaintiff.
- Plaintiff sent whistleblower letters detailing systemic violations of federal and state laws to the **Jefferson County Sheriff's Department** and the **Louisville Metro Police Department**.
- Neither agency provided a response, follow-up, or acknowledgment of these letters, despite the urgent nature of the allegations and the significant risks to Plaintiff's and Plaintiff's Child's safety and well-being.
- The failure to respond to whistleblower letters left Plaintiff without recourse to address ongoing violations and compounded Plaintiff's vulnerability.
- This inaction undermines public trust in law enforcement and highlights systemic issues of neglect and failure to uphold federal protections for whistleblowers.
- This lack of action represents a failure of law enforcement to fulfill their duty to investigate and protect individuals reporting systemic wrongdoing.
- Shortly after sending out the Whistleblower letters and receiving no response, the Plaintiff received a letter stuffed in his doorjamb along with a Grinch Who Stole

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

Christmas flyer for an event at Station Jtown, current place of residence. The letter stated that the lease at Station Jtown would not be renewed and no cause was given.

- The Plaintiff and child had planned to renew the lease until gaining access to the housing program, but now the Plaintiff has yet another overly burdensome situation on his hands to contend with when already completely overwhelmed and while steadily losing function, and not able to get help needed in most ways.
- The Plaintiff would like to point out that he is particularly vulnerable as he requires unseen figures such as infusion pharmacies to mix up medications that could easily be used to harm patient without patient's knowledge and leaves him and his child in a dangerous position – especially considering not one entity even acknowledged receipt of Whistleblower letter. Exhibits will show all agencies sent to and delivery certificates, which will include showing the number of times opened by each person or email sent to.

Potential Mail Tampering – Plaintiff Filed For Investigation

- Plaintiff has initiated a request for an investigation into mail tampering with regard to mail for destination to 2904 Sitka Dr. Apt. L29 Louisville, KY 40299.
- Plaintiff has had many pieces of mail go missing – 2 social security checks, multiple pieces of mail from CHFS/DCBS although Plaintiff voices concerns over trust believing information those agencies provide.
- Plaintiff has received prescription medications that appear to most definitely have been tampered with from Louisville Compounding Pharmacy making Plaintiff unsure whether or not the product was unadulterated.
 - The medication shipped from Louisville Compounding Pharmacy was Ketotifen which comes in 1mg doses in capsule form.
 - The Plaintiff received a box that had been opened, and it was unclear if the medication had been modified in some way.

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

- The Plaintiff could not afford to buy it again, however, so monitored health very carefully when first taking. See exhibits for photos.

Environmental Neglect and Health Consequences / Record Requests

Mold and Mycotoxin Exposures

Plaintiff experienced exposure to mold and mycotoxins due to negligent maintenance of 2321 Glenmary Ave, and lived in apartment 2 in 2018-2022. In 2021, Plaintiff and child both lived in an environment that is considered contaminated by the HERTSMI2 report.

This exposure was documented in inspection reports and medical consultations. While the connection between the exposure and Plaintiff's current health conditions remains under investigation,

After Plaintiff vacated the property, substantial renovations were undertaken, including **gutting significant portions of the building.**

These renovations occurred shortly after Plaintiff repeatedly raised concerns about mold, bacterial contamination, and unsafe living conditions, suggesting the property owner and management were aware of the hazardous environment.

Plaintiff believes these renovations were initiated as a preemptive measure to mitigate potential legal liabilities rather than addressing health and safety concerns while Plaintiff resided there.

Plaintiff reserves the right to present evidence of harm resulting from this exposure as it relates to ongoing systemic negligence and harm caused by Defendants. The Plaintiff is dealing with many disabilities along with a his only child who also has special needs.

These actions reinforce the claims that Plaintiff and child were subjected to harmful environmental conditions during their tenancy.

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

The lack of proactive remediation while Plaintiff lived at the property demonstrates negligence and a disregard for the health and safety of tenants.

The timing of the renovations raises questions about potential efforts to destroy evidence of hazardous conditions.

Environmental Testing and Records Request

Plaintiff respectfully requests the Court to order the release of all records of any environmental testing conducted at Plaintiff's current residence, including but not limited to mold, mycotoxins, bacterial contamination, air quality, and water quality assessments.

- If no such records exist, Plaintiff requests that the Court mandate comprehensive environmental testing of the current residence 2904 Sitka Dr. Apt. L29 Station Jtown (formerly Chestnut Ridge Apts) Building L owned by Vida-Management, Inc. to identify any conditions that may impact health or safety. These tests should include assessments for:
 - Mold and mycotoxins including those tested for and metabolites thereof by groups such as Great Plains Labs, Genova Diagnostics, Real Time Labs, and other
 - Bacterial, parasitic and fungal contamination including those organisms tested for by the HERTSMI2 test
 - Air quality (including volatile organic compounds)
 - Water quality and contaminants including PFAAs and PFAs along with level of pharmaceuticals and other found in water, also test for heavy metals, and other inorganic compounds.
 - The Court should also direct the release of these records to Plaintiff for inclusion in this case and to inform further medical and environmental interventions

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

- The testing must be done by a third party certified testing specialist familiar with the context of Chronic Inflammatory Response Syndrome type illnesses and regularly inspecting buildings related to the illnesses associated with Chronic Inflammatory Response Syndrome (CIRS).

Environmental Health Consequences

- Plaintiff and Plaintiff's child, Jackie, suffered significant harm due to hazardous living conditions at **2321 Glenmary Ave, Apt. 2 Louisville, KY 40202**, managed by Property Management of Louisville (PMOFL) and owned by **Jerry Kerchik**.
- Despite repeated attempts to resolve a severe water leak and mold growth beginning in 2018, including certified letters and direct communication with the owner, no proper remediation was undertaken for too long. Eventually a contractor was hired to come out and installed an air scrubbing machine and plastic and other devices. Plaintiff requested reduction in rent and other appropriate safe accommodations during this time but was denied by Property Management of Louisville. **Key PMOFL employees involved are listed in the Defendants section.**
- Testing ordered by Plaintiff from Real Time Labs revealed **Trichothecenes and Gliotoxin** in Plaintiff's body, consistent with mold exposure, and elevated specific toxin and mold levels in the apartment environment. Plaintiff has not been able to afford the 100% out of pocket costs of actual treatment for mold exposure and development of CIRS as insurance does not pay for it, and standard providers in school are taught that mold only causes allergies which is not true.
- The refusal to act on known hazards directly contributed to the deterioration of Plaintiff's health, as well as that of Plaintiff's child, who suffers from chronic health conditions as well. Renovations made after Plaintiff vacated the property in 2022 suggest a preemptive attempt to avoid liability rather than address longstanding issues during the tenancy.
- **Owner Contacted Directly along with PMOFL:** Plaintiff obtained Jerry Kerchik's contact information through a paralegal friend and wrote to him directly about the environmental hazards at **2321 Glenmary Ave, Apt. 2**. Plaintiff received no response from Mr. Kerchik, and denial of any resolution from PMOFL. The only thing that initiated movement was the Plaintiff

Emergency Preliminary Injunction, Permanent Restraining and Protective Orders, and Punitive and Compensatory Damages

involving City Inspectors who came out and gave PMOFL 10 days to address the issue.

- **Evidence Presented:** Plaintiff provided detailed testing results, including:
 - Positive findings for Trichothecenes and Gliotoxin in Plaintiff's urine (RealTimeLabs) in 2021 (after living at the apartment for a few years)
 - EnviroBiomics environmental testing, which deemed the property unsafe for reoccupation without remediation (HERTSMI2 Report Results)
- **Owner's Response:** Despite being informed of the hazards in 2018, **Jerry Kerchik, an attorney**, failed to take any corrective actions or address the documented health and safety concerns.
- **Impact:**
 - The property remained in a hazardous condition, directly contributing to Plaintiff's and Jackie's health issues until they moved out in 2022 in December.
 - This inaction constitutes a breach of the **implied warranty of habitability** and demonstrates willful neglect, as the owner was fully aware of the risks yet chose not to act.
 - There were several other incidents involving unsafe conditions at that property in which Property Management of Louisville did nothing to remedy or resolve problems.

Legal Representation Failures and Ethical Violations

Plaintiff's legal representative, Lisa Hinkle, failed to uphold her ethical and professional obligations by:

- **Stating that Plaintiff's absence in a hearing, despite Plaintiff providing advanced notice and invoking ADA-protected rights, constituted a failure that "compromised the case greatly."**

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

- **Ignoring Plaintiff's explicit needs and rights under the Americans with Disabilities Act (ADA)** for reasonable accommodations during legal proceedings, demonstrating **negligence and lack of advocacy**.
 - **Refusing to pursue critical legal remedies such as filing an emergency protective order (EPO) or injunction, despite clear evidence of harm and imminent danger to Plaintiff.**
 - **Requiring Plaintiff to fill out an affidavit verifying medical expenses and then suggesting Plaintiff defend each expense line-by-line during hearings, placing undue burden on Plaintiff and failing to act as a zealous advocate.**
 - Acting in alignment congruously with the same manners and behaviors of the Commonwealth of Kentucky as opposed to representing the Plaintiff for the wrongdoings and illegal activities along with criminal conduct of the other entities, agencies, agents, and individuals involved in this case. This is in alignment with Conspiracy to
- The **Kentucky Bar Association (KBA)** failed in its duty to address grievances against Ms. Hinkle and other attorneys, ignoring repeated requests for assistance or acknowledgment, thereby denying Plaintiff due process and leaving Plaintiff vulnerable to systemic harm and neglect.

These actions constitute **legal malpractice, gross negligence, and ethical violations**, further exacerbating Plaintiff's harm and undermining Plaintiff's ability to pursue justice.

Dr. Knuckles: Verbal False Accusations and Threats

- Dr. Knuckles made **verbal accusations** of Munchausen's syndrome directly to the Plaintiff during a phone call, claiming Plaintiff was fabricating medical conditions, including small fiber neuropathy and chronic venous insufficiency, despite **objective medical evidence** confirming these diagnoses.
- Dr. Knuckles threatened to:

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

- Report Plaintiff to **Medicaid** to have Plaintiff restricted to one provider, without just cause or due process.
 - Accuse Plaintiff of lying about medical conditions to discredit Plaintiff's legitimate medical needs.
 - These actions constitute:
 - **Harassment and intimidation**, directly violating Plaintiff's rights under the ADA and civil protections.
 - **Defamation of Character**, as the false statements have undermined Plaintiff's reputation with providers and Medicaid
 - **Abuse of authority** as a medical professional, demonstrating malicious intent to harm Plaintiff through systemic channels.
 - Despite a formal complaint to the **Kentucky Board of Medical Licensure (KBML)** detailing these incidents, the KBML failed to take action even after a secondary request, demonstrating negligence and a failure in their duty to protect patients from retaliatory and harmful practices.
-

CPS Report: Munchausen by Proxy False Claims

- Plaintiff was the subject of a **Child Protective Services (CPS)** investigation for approximately **two years** without being informed of the investigation until near the 2 year mark.
- The investigation, which originated from unknown source, but also involved **Norton Pediatric Protective Services** and an **outsourced agency**, falsely alleged Munchausen by Proxy, accusing Plaintiff of fabricating or exaggerating the medical conditions of Plaintiff's child, including:
 - **Autism Spectrum Disorder, gastroparesis**, and other documented conditions—all supported by **objective medical evidence**.

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

- **Child's need/recommendation by Dr. Julie Manche, Auditory Processing Evaluation Specialist** for low gain hearing aids to help with confirmed Auditory Processing Disorder, and other.

During the investigation:

- Providers were interviewed along with teachers and staff and misrepresented truths using false narratives and made false claims against the Plaintiff (e.g. **Dr. Pendleton at Baptist Health [Dr. Michael Eli Pendleton] – child's current PCP, Dr. Langford at Norton Children's Medical Group [Sheridan Langford]**)
- Plaintiff understands now, that some of the treatment of Plaintiff and Child over these years was likely related to this ongoing report that Plaintiff was not notified of until around 2 years after it was opened against him.
- Plaintiff was denied the opportunity to **review or amend the CPS report**, which includes multiple false narratives and accusations.
- The agency recommended **removing Plaintiff's child** from Plaintiff's care, despite no substantiating evidence and extensive documentation supporting the child's medical needs. The irony is that the report stated that Plaintiff was being medically neglectful by not getting child care, but at the same time claimed Plaintiff was taking child to doctor too often.
- The Plaintiff was not notified until around the 2 year mark that there was an open CPS investigation involving him which remains unexplained.
- The state refuses to allow Plaintiff to connect with CPS supervisor who would need to arrange potential addendum or addition or removal completely. Plaintiff wishes for report to be destroyed as the evidence within the report contains so many instances of false and defaming statements about the Plaintiff.
- Plaintiff wishes responsible parties that falsified government documents to be held accountable for what they have done and prosecuted to the fullest extent of the law.

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

- The CPS report was ultimately closed as **unsubstantiated**, but the **false claims and uncorrected records continue to harm Plaintiff's reputation** and relationships with the child's providers. Harm and outfall from this continue through this day at present on the 7th of December in 2024.

Systemic Neglect by Agencies Over Many Years

Medical Neglect and Dismissiveness by Providers
Chronic Nature of Systemic Neglect Across Agencies

Accountability for Dismissive Providers

Medical Neglect / Failure Dr. Sheridan Langford Norton Children's Medical Group

Dismissive and Misleading Medical Advice by Dr. Sheridan Langford of Norton Children's Medical Group.

- **Doctor: Dr. Sheridan Langford, Norton Children's Medical Group, former Primary Care Physician (PCP) for Plaintiff's child.**

Key Incidents:

- When presented with documented evidence of mold/mycotoxin exposure (e.g., Trichothecenes and Gliotoxin) through reputable laboratory testing, Dr. Langford dismissed these concerns, stating that "mold only causes allergies." She stated that she had seen other families get rid of everything in their homes and she believed that they did not see any benefit to doing so because she was of the belief that mold exposure only causes allergic reactions.
- This statement disregards established research linking mold exposure to a broader range of health issues, including Chronic Inflammatory Response Syndrome (CIRS) and other systemic illnesses.
- Dr. Langford refused to acknowledge or investigate potential impacts of mold exposure on Jackie's and Plaintiff's health, denying them access to adequate care and further exacerbating health challenges. And further exacerbating ongoing discriminatory actions they were

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

facing and scrutiny from the school despite immense attempts by the Plaintiff to meet unfounded and unnecessary administrative burdens placed upon him by multiple agencies and entities involved.

Impact of Misleading Advice:

- This statement reflects a lack of understanding or refusal to engage with evolving medical knowledge about mold-related illnesses, including their systemic effects. Articles provided in Exhibits.
- It undermined Plaintiff’s ability to advocate for necessary testing, treatment, and accommodations for Plaintiff’s child and contributed to the systemic neglect outlined in this case. Worsened by inaccurate medical records in nearly every situation as well..
- Such dismissiveness contributed to Plaintiff’s and Jackie’s deteriorating health and placed them at increased risk for long-term harm for which Plaintiff and child have suffered consequences including false claims such as the Munchausens by Proxy false claim made leading to opening of CPS case against Plaintiff, eventually found to be unsubstantiated, but closed with false information, and Plaintiff has not been permitted in any way to correct the falsities contained within.

Dismissive and Harmful Actions by Front Office Staff at Norton Children’s Medical Group

Relevant Details:

- **Location:** Norton Children’s Medical Group, during Plaintiff’s visit with Dr. Sheridan Langford.
- **Incident:**

After a discussion with Dr. Langford regarding mold exposure and related health concerns, Plaintiff requested information about the food pantry, which Plaintiff believed was available at Norton

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

Children’s locations to assist families in need – and this was indeed the case...but Plaintiff and Child were disallowed.

- The front office staff denied Plaintiff access to this resource, told Plaintiff to leave, and provided no explanation or assistance.
- This occurred at a time when Plaintiff was experiencing significant financial hardship due to health issues, facing bankruptcy, facing a school system that refused to provide security or safety from bullying for Plaintiff’s child, and refused to adhere to 504 plan protections. It was a very difficult time. Access to the food pantry could have provided critical relief, however, now, due to that incident, the plaintiff has flashbacks due to PTSD and medical PTSD to that situation which makes going to a food pantry difficult and even more challenging than it already is physically for the Plaintiff.

Impact:

- The abrupt dismissal and lack of support left Plaintiff confused when Plaintiff was already struggling with mental health issues due to so much other lack of support and resources from the community that were not available that should have been..., Unsupported, and devastated, Plaintiff states this indeed contributed to further ongoing emotional and physical strain and lasting harm and trauma. Trauma cannot be ‘healed’ – it always stays with the body and mind.
- This incident reflects systemic failures at Norton Children’s Medical Group to provide equitable and compassionate care, especially for families experiencing financial or health crises.
- Plaintiff states this continues, to this day, to make Plaintiff feel as if not good enough or worthy of such basic needs, and experiences trauma every time and any time attending a food pantry.

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

- Food pantries are very limited in what the Plaintiff can gain as needed support as well because Plaintiff has been instructed by physicians to eat non-gmo, organic, and gluten free (out of medical necessity). The cost of gluten free foods as of 2023 was 180% to 540% more expensive than regular foods that are not gluten free adding even more excessive undue burden to the Plaintiff's already overwhelming and overflowing plate of negative excesses.

Dismissive and Inadequate Care by Dr. Reeves at Norton Infectious Disease and Dr. Murphy at Baptist Health Infectious Disease

Relevant Details:

Dr. Reeves (Infectious Disease, Norton):

- **Refused to acknowledge the existence of mold-related illnesses beyond "allergies,"** despite Plaintiff presenting credible test results (e.g., positive Trichothecenes and Gliotoxin results).
- Plaintiff asked for further testing and was denied with Dr. Reeves citing, "... the Fungitell tests are positive ... they are positive but that does not tell us anything, there are not any next steps that make sense with regard to testing.", so Plaintiff was again abandoned willfully and left to try to figure things out on his own.
- Plaintiff is exhausted from constantly trying to do the work that doctors are supposed to help with due to being willfully abandoned, willfully neglected medically, willfully endangered as well.
- Plaintiff is thankful for the experience with Dr. Reeves, however, that led to Dr. Reeves prescribing Remdesivir during acute episode of Covid in 2022 in August. Thank you Dr. Reeves.

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

- Dr. Reeves, to reiterate, stated there is "**no mold illness syndrome,**" effectively dismissing Plaintiff's concerns without providing alternative diagnostic or treatment options also stated there is no real "Post Lyme Disease Syndrome" or "Post Viral Illness Syndrome". Plaintiff is uncertain if Dr. Reeves meant in the official listing that he could diagnose with per system restrictions, or in general, but believes Dr. Reeves meant he did not believe in those entities at the time of the visits.

Dr. Murphy (Baptist Health):

- Echoed similar statements, claiming mold exposure only causes allergies and disregarding documented evidence provided by Plaintiff.
- **Offered no meaningful support or investigation into Plaintiff's worsening symptoms, forcing Plaintiff to abandon further attempts to seek care at Baptist Health** or of any matter further after multiple repeat experiences going down that route Plaintiff had to attempt to get appropriate care in other ways.
- Dismissed Plaintiff's lab results as invalid although they are not invalid. Labs were all CLIA certified and 100% valid...and meaningful. Results provided in Exhibits.

**Dr. Erin Murphy University of Louisville (Different Dr. Murphy) –
Former Plaintiff PCP – Internal Medicine**

- Wrote the referral for Plaintiff to see the other Dr. Murphy at Baptist (unsure if related to one another). Dr. Erin Murphy thought perhaps they would treat Plaintiff at Infectious Disease. She stated if they find reason or cause, they might treat the patient. Unfortunately, when patient was dismissed, and later asked Dr. Erin Murphy about treatment through her, she declined.
- Dr. Murphy strongly advocated for Plaintiff in other areas but behavior was far reserved in this area leading Plaintiff to question

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

overall motives of many physicians in general – after all – with so many negative experiences, the Plaintiff believes that any reasonable person would form or arrive at the same conclusions.

Dr. Abigail Stocker University of Louisville GI Motility & Gastroenterology

- Dr. Stocker’s office was instrumental in providing orders for many of the required mold and CIRS lab tests for mold illness, and I am so grateful and thankful for her and her staff, however, after getting the results, and asking for other testing, it seemed almost as if someone had come down hard on her or reprimanded her for helping or assisting the Plaintiff with testing. Plaintiff does not know this with certainty as it is only through experience that Plaintiff believes that this may have happened. It is being presented here simply for context to the court.

Ever since around that time, Dr. Stocker’s office has been less helpful than before causing the Plaintiff further distress and again more feelings of worthlessness or not good enough to be helped or too high of a cost to treat this chronically ill person appropriately.

Impact of Systemic Dismissiveness:

- These repeated dismissals by Dr. Reeves and Dr. Murphy created significant barriers to accessing proper diagnosis and treatment for mold-related illness and potential systemic fungal infections.
- Their unwillingness to engage with or explore emerging medical conditions (e.g., **Chronic Inflammatory Response Syndrome or fungal infections**) exacerbated Plaintiff’s health issues, leading to increased suffering and financial burden.
- The overall experiences of these examples and dozens of others, has led to extreme feelings of distress and despair for Plaintiff whose health has declined a great deal more, the Plaintiff asserts, than if Plaintiff would have been able to receive appropriate timely therapies and treatments and if insurance would

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

have covered these medically necessary treatments instead of Plaintiff having to shoulder many thousands of dollars of costs to try to survive – literally.

- There is certainly no shortage of other examples for Plaintiff or Plaintiff’s Child. The Court may request additional examples upon request.
- This systemic neglect reflects a broader issue within healthcare institutions failing to adequately address complex or emerging medical conditions.
- Chronic Inflammatory Response Syndrome is only one form of how this neglect and dismissiveness has impacted Plaintiff and Plaintiff’s Child.
- Plaintiff needs assistance from Assistants and the Court, and requests, please, for the remedies for relief to be granted. The Plaintiff is no longer able to maintain the heavy burden of juggling all things noted in this document and more including sudden loss of housing safety with little time to address changes, continuing deprivation of federal rights, refusals of reimbursements due to the Plaintiff, and so many more things not even yet noted.

DOJ Findings and Broader Implications

Breonna Taylor and DOJ Mental Health Report:

- Plaintiff’s experiences of **systemic neglect and discrimination** reflect broader **patterns of institutional failures documented in Louisville, KY** already including:
 - The **Department of Justice’s findings on the lack of adequate mental health resources in Louisville**, leading to **systemic harm for vulnerable populations**.
 - **The tragic death of Breonna Taylor**, which underscores the **systemic disregard for marginalized individuals and communities in Louisville, particularly in interactions with government agencies**.
- These findings highlight a systemic culture of neglect, inefficiency, and discrimination that has directly impacted Plaintiff’s and Plaintiff’s child’s ability to access necessary care and support in any ways in which they have tried, and the

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

Plaintiff has been relentlessly trying to, as much as health will allow, try to provide the best life possible surrounding the circumstances, for his child. Unfortunately, both have been let down or turned away at nearly every attempt.

Illegal Caps on Medical Expense Deductions

- Kentucky while previously not considering any medical expenses despite submissions spanning years, has recently imposed **arbitrary caps** on medical expense deductions that are in direct violation of **federal law**, and still continues to deny the vast majority of allowable medical expense deductions. A number of the arbitrary caps are listed below including:
 - A monthly cap of **\$158.xx** for prescription expenses.
 - A **one-time gas/travel reimbursement** of **\$306.xx**, despite the Plaintiff having documented over **5,000 miles** of travel for medical purposes.
 - A cap of **\$22.14 per month** for a **vision insurance plan (VSP)**, which fails to account for the Plaintiff's documented vision-related medical needs, including conditions requiring advanced treatment and coverage.
 - The Plaintiff is also not able to find a way to get Medicaid to fulfill its obligations in terms of following federal law as the entire system seems to be working together in conspiracy to deny federal benefits Plaintiff and Plaintiff's Child are entitled to under federal law.
 - Additionally, DCBS, and CHFS refuse to identify the charges they have counted on a spreadsheet containing all the required backup, and detailed line by line items, by month by day, maps and mileages, copies of the federal laws, the guidebook for medical expense deductions and more. From the evidence in the exhibits, it is clear that CHFS willfully and with intention has maliciously harmed the Plaintiff and Child time and time again, incident after incident, without concern, remorse, any type of reaction that any reasonable person would expect to be humane treatment of one human to another.

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

- These caps disregard **federal mandates of law for accurate and reasonable medical expense deductions under SNAP and other assistance programs.**

These actions result in:

- The Plaintiff and Child have both been **irreparably harmed** in ways that are not possible to recover from by the actions of the Defendants.
- **Economic harm**, forcing Plaintiff to bear unreasonable out-of-pocket costs, and to suffer greatly.
- **Violation of federal law**, which mandates states to allow deductions for verified medical expenses without arbitrary limitations and without causing excess burden on the participant.
- The Plaintiff even, as directed by former counsel, Lisa Hinkle of McBrayer Firm, provided the state with an Affidavit stating all expenses were real and valid. The state, even with that, continues to deny the vast majority of expenses.
- Defendants stated to Lisa Hinkle, prior to the hearing that most recently took place, that no medical expenses would be allowed, which Lisa Hinkle relayed on in email to Plaintiff. This was prior to the hearing thus indicating that no fair hearing could take place.
- The exhibits shall show that the Defendants picked and chose only select expenses to highlight during the hearing that most recently took place that Plaintiff was unable to attend due to PTSD.

Waiver Program Violations

- The **Kentucky Medicaid Waiver HCBS 1915(c)** program is violating **federal law** and **Plaintiff's rights** by:
 - Limiting participants to addressing **only one issue at a time**, resulting in severe delays in accessing critical care and services.

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

- Imposing a **false annual cap of \$2,500 per participant**, which is not compliant with federal Medicaid regulations that require coverage for necessary services without arbitrary limits.
- Plaintiff most recently received an email from Sibal K., case worker at Access ADHC, stating to Plaintiff that he only had a couple of hundred dollars left before hitting the capped limit, so most needs would not be able to be accommodated that are medically necessary.
- Plaintiff notified Sibal K., et. al. from Access ADHC of their inclusion in this case, after receiving Sibal's communication. Plaintiff provided a listing of the legal violations that could be included along with what the penalties for those violations are, but of course, the court shall decide those details, and the Plaintiff simply wishes to note that the communication was made. The email Sibal sent along with the Plaintiff's notice shall be included in the exhibits section. Aiding and abetting and collusion was not included in the letter, but those and other criminal conduct or activities are very relevant and valid.

These violations:

- Delay medically necessary care, exacerbating Plaintiff's health conditions leading to irrecoverable health situations such as furthering brain atrophy, such as exacerbating long covid damage from microclots, etc.....
- Cause further economic harm, as Plaintiff is unable to access services that should be covered under the waiver program.
- The Plaintiff had to use a great deal of the lumpsum backpay from disability to pay for services that are medically necessary that the Medicaid Waiver HCBS 1915(c) should cover, and still has to pay today as the medically necessary goods and services continue to be denied. It is as if the agencies involved and individuals' wish for the Plaintiff to cease to exist.
- Reflect **systemic neglect and abuse** of authority, prioritizing cost-cutting over the well-being, healthcare, or the life of disabled individuals and special needs

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

children. This too has led to severe irreparable physical and emotional harm for both the Plaintiff and the Plaintiff's Child.

Waiver program violations and illegal medical expense deduction caps, both, highlight **blatant violations of federal law** and **discrimination against disabled individuals**. These practices **impose severe financial and health-related burdens on the Plaintiff**, further supporting the need for immediate judicial intervention and relief.

1. Defendants have:

- **Refused to provide necessary medical care and testing, including experimental treatments, advanced imaging, second opinion services covered, nutritional testing, diagnostic testing, access to higher institute of medicine, and life-sustaining medications and services, all of which are essential to the Plaintiff's quality of life and survival.**
- **Denied access to federally mandated benefits, including medical expense deductions and reimbursement for travel related to medical care.,** in violation of IRS guidelines <https://www.irs.gov/publications/p502> and federal Medicaid law. [https://www.ecfr.gov/current/title-7/subtitle-B/chapter-II/subchapter-C/part-273#p-273.9\(d\)\(3\)](https://www.ecfr.gov/current/title-7/subtitle-B/chapter-II/subchapter-C/part-273#p-273.9(d)(3))
- Caps on medical expense deductions in violation of federal law (e.g., \$158/month for prescriptions and \$306 for medical travel). [See Exhibits]
- Mismanagement and delays in Medicaid Waiver program services, including false annual caps of \$2,500. Access ADHC aka Access Adult Health Day Care Center, LLC. On one form the cap (illegal cap) is listed at \$3,500. Either way, the cap on waiver medically necessary goods and services is not legal. The Plaintiff continues to be harmed detrimentally and without any concern or regard from the state. The Plaintiff's Child is harmed as well by the Plaintiff being harmed.
 1. **42 CFR § 441.302(c)(2)** requires that Home and Community-Based Services (HCBS) Waivers are based on **person-centered planning** and must address the specific assessed needs of individuals to avoid institutionalization and/or remain independent in the community.

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

2. **Olmstead v. L.C. (1999)**, which enforces the **Americans with Disabilities Act (ADA)** and mandates that states provide community-based services to individuals with disabilities when such services are appropriate, reasonable, and do not impose an undue burden.
3. Failing to meet Plaintiff and Plaintiff's Child's needs directly violates Plaintiff's and Plaintiff's Child's rights under Olmstead because it could lead to unnecessary institutionalization if continuing harm caused by the Defendants' actions across multiple systems does not cease.

Letters from multiple healthcare providers have been provided repeatedly to CHFS, and they have not impacted the ways in which Defendants continue to treat Plaintiff and Plaintiff's Child despite clearly illustrating the following:

- 1 The medical necessity of exceeding the capped amount.
 - 2 The health risks or costs of failing to provide the services.
 - 3 How the services will prevent a major decline or institutionalization.
4. Under **42 CFR § 441.302(e)**:

The Medicaid agency must assure that the average per capita Medicaid expenditures under the waiver program will not exceed 100 percent of the average per capita Medicaid expenditures that would have been made for the level of care provided in a hospital, nursing facility, or intermediate care facility for individuals with intellectual disabilities."

- Disallowed Plaintiff to know information such as provider directory (accurate), dental providers, formularies, even with the formulary, Medicaid refuses to cover some things listed even as preferred medications on the formulary causing the Plaintiff further financial and emotional harm along with physical harm.
- **Subjected Plaintiff and Plaintiff's child to retaliation**, including false narratives in **Child Protective Services (CPS)** reports, misrepresentations of truth, misdiagnoses, and refusal to correct falsified medical records.
- **Created an unsafe living environment**, exposing Plaintiff and Plaintiff's child to gang-related violence and systemic neglect in federally funded housing, and that neglect and discrimination system-wide against Plaintiff and Plaintiff's Child

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

continues with questions asked, and answers refused or complete silence from agencies required to respond such as Louisville Metro Housing Authority.

- Plaintiff and Plaintiff’s Child were sitting in their apartment this Summer in 2024, when they heard what seemed like gunshots, but Child thought there were fireworks.
- Shortly afterward, the Plaintiff and Child learned that a perpetrator of that murder, had pulled up, to a car with a man and woman sitting in a parked car...shot and killed the man, and the woman was also injured by gunshot wounds.
- The murder occurred within 200 feet of the apartment complex where they live, and in broad daylight.
- There have been other instances where six police vehicles and many police have been standing outside their building where they live on multiple occasions (Plaintiff and Plaintiff’s Child’s Apartment Building), and this has had zero explanation as to why – but something had to be going on...
- Maintenance has little regard or concern for tenants that live at Station Jtown.
 - There are often large cockroach infestations in hallways and within apartments.
 - Water issues often occur leading to inconveniences for many hours.
 - Valet Trash is supposed to be collected daily, and tenants pay \$25 per month for trash removal, but there have been several days, and a minimum, for several weeks, that trash sits outside in cans in the hallways and on the ground, and attracts bugs, food rots and maggots are present, and crime goes up in areas like that.
 - Maintenance gets angry if any request is put in.
 - When first moving in, Plaintiff and Plaintiff’s Child had to ask some 20+ times in writing to get management to address literally anything. Then had the audacity to ask Plaintiff to remove one star review noted after management asked for a review to be left.

1 Costs are not transparent and change monthly greatly

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

- 2 Repairs are not made on any kind of timely basis
 - 3 Plaintiff has a disabled placard, and before moving in, was assured that a disabled spot would be labeled in front of building L where Plaintiff lives, however, the spot does still not exist, despite multiple communications with management.
 - 4 The last communication re disability spot was months ago, and Plaintiff was told they were waiting for a stencil/template to come in. Plaintiff wants to make clear that this is another direct violation of the **ADA**.
- Plaintiff, on Monday 12/2/2024, missed a housing inspection by LMHA (that was a follow up inspection request) due to a complaint Plaintiff had to make in order to get Station Jtown to spray for bugs. Plaintiff was not home because Child had to go to Emergency Room for Bad Infection and Cyclical Vomiting issues. Plaintiff immediately communicated to LMHA, despite Plaintiff also being very ill with an infection, however to date, as of 2024-12-08, Plaintiff has heard nothing. More refusal of agencies to communicate – showing further neglect, discrimination, willful abandonment, neglect, and endangerment.
 - On 12/04/2024, Plaintiff came home with Child in afternoon, to find two envelopes stuck in the door jamb between the door and the jamb.
 - 1 One document was about an even tat the apartment complex, at Station Jtown, called Merry Grinchmas with a picture of the Grinch on the envelope.
 - 2 The other was a letter about non-renewal of lease with no reason given. It was almost as if it were someone’s idea of a cruel joke about taking away housing stability.
 - 3 Plaintiff and Child have been through too much, and have a great deal of PTSD from the many wrongful situations.
- Station Jtown, a Vida-Management, Inc. company at 9601 Balsam Way, is the location of the current address of the Plaintiff and Plaintiff’s Child. Plaintiff’s Child has Autism and other conditions leading to special needs – the overall environment here with the violence, the police presence that is unexplained, the constant insect infestation, and dirty conditions due to trash not being removed, lack of transparency, and failures to uphold the ADA, have contributed

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

significantly to harm – especially now taking away any stability Plaintiff and Child had hoped for just in time for Christmas.

- Providers of healthcare, have been completely dismissive of Plaintiff and Plaintiff's child's symptoms of real disease and symptoms and environmental hazard created illness causing real harm, systemically, and without any accountability.
- Harms continue even to this day by providers not even taking serious and potentially deadly infections seriously for Plaintiff and Child.
- Retaliation and harassment, including false CPS allegations, refusal to correct falsified records – Norton, University of Louisville Physicians, Baptist Health, and others, and threats by providers such as Dr. Knuckles.
- **Falsified records and obstructed the Plaintiff's ability to correct errors, including malicious accusations of Munchausen's by Proxy and Munchausen's by Proxy leading to further harm that continues and is ongoing.**
- DCBS, specifically Lucinda Lawrence at CHFS – DCBS in KY continues to deny repeatedly many lines of medical mileage, and other eligible expenses on a monthly basis that are legally allowable to be deducted. While Lisa Hinkle, albeit temporarily, was the counsel for the Plaintiff, Lucinda met with Lisa and Lisa stated in email that prior to the hearing that was scheduled which I had to bypass due to too much PTSD, Anxiety, Stress, and chance of triggering a CFS/ME crash or narcolepsy with cataplexy attack, that DCBS had already, prior to the hearing, decided that they were not going to allow any of the medical expenses.
- Defendants' actions leading Plaintiff to the brink of ongoing severe CFS/ME is severe consequence of severe harm inflicted by Defendants. Patients such as Plaintiff sometimes crash, and never recover from lower baseline.
- DCBS falsely claims that only 'select' expenses were submitted to them which they have listed on exhibits for the hearing noted in the former point, however, the exhibits they sent are also ironic because:
 1. They were received AFTER the hearing by 2 days, after the hearing took place – which is not very helpful.

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

2. They include a copy of the federal law, which further strengthens that they are aware of the law violations. I have sent it to them many times within Excel files and PDF files via fax, upload through KyNect.gov and through email.
 3. They mention things that seem to be listed to try to embarrass the Plaintiff, but the Plaintiff refuses to accept that their attempts to do so will lead to their seemingly desired effect on the Plaintiff.
- Engaged in **deliberate breaches of good faith, contractual obligations, and fiduciary responsibilities** to Plaintiff and Plaintiff's child.
 - Refused to calculate medical expense deductions properly, knowingly, willfully, and with the understanding that this will cause harm to the Plaintiff and Plaintiff's Child.
 - Refuse to elaborate on how they arrive at SNAP medical deduction calculations nor identify specifics of what they state they have considered.
 - Refuse to accurately account for shelter and utility expenses as well among others.
 - Continue to place undue burden on Plaintiff and Child and cause a situation of non-stop involuntary servitude and violations of other federal laws and constitutional rights without concern or regard for the consequences of their actions on Plaintiff and Child.
 - The above list is not a fully comprehensive list, and so, the case should not be limited to only what is listed. The Plaintiff suffers from extreme fatigue, short term memory issues, PTSD, Narcolepsy with cataplexy, and much more. The Plaintiff often writes things down to help with memory issues, which may be helpful in the course of this case.

2. **Plaintiff's Whistleblower Status:**

Plaintiff has filed whistleblower complaints with federal agencies, including DOJ, HUD, HHS, CMS, and USDA-FNS, which have gone unanswered, leaving Plaintiff vulnerable to continued harm. Plaintiff also submitted the same whistleblower complaints to the FBI, local Jefferson County Sheriff's Department, and Louisville Metro Police Department. The complete lack of response from all organizations contacted have caused Plaintiff to question just how deep the corruption and discrimination issues penetrate the local, state, and federal government. Plaintiff requests assurances of safety precautions

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

and Whistleblower Rights to be immediately in force and retroactively with written confirmation of all things throughout this document from the court.

3. Plaintiff has an active **ADA OCR case (federal investigation)** addressing systemic violations of the **Olmstead Act**, which underscores the severity and credibility of the Plaintiff's claims.
4. **Violated federal Medicaid law**, which mandates coverage of services provided out-of-state when such services are unavailable within the state.
 - Plaintiff has been denied access to treatment by Dr. Vaughn, who is the only provider in the U.S. currently treating long COVID-related microclots and employing specialized triple anticoagulation therapy essential to Plaintiff's care.

Educational Neglect and Failure to Address Special Needs.

Systemic Neglect by Agencies Over Many Years

Widespread Federal Law Violations and Broader Systemic Issues

LEGAL ARGUMENT

Plaintiff satisfies the criteria for emergency relief:

1. **Likelihood of Success:** The evidence demonstrates clear violations of federal law, constitutional amendments (1st, 4th, 5th, 8th, 9th, 13th, and 14th), and civil rights protections, and all other mentioned above.
2. **Irreparable Harm:** Plaintiff and Plaintiff's child face escalating threats to health, safety, and well-being. The harm caused is severe, permanent, and irreparable.

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

3. **Balance of Equities:** The requested relief imposes no undue burden on Defendants and ensures compliance with existing laws.
 4. **Public Interest:** Granting relief reinforces accountability, protects vulnerable populations, and upholds federal and constitutional law.
-

RELIEF REQUESTED

Plaintiff respectfully requests that this Court:

1. Immediate Medical Access and Lifetime Medical Coverages:

- **Approve higher-dose stimulant medications and experimental treatments effective immediately** (e.g., MDMA, ketamine infusions and nasal spray, medical cannabis, WST-057, Cibenetide Peptide injections, psilocybin therapies, and autologous tear serum).
 1. **Plaintiff and child must be able to have access without fear of negative consequence regardless of local conflicts with federal law and/or special program allowing right to try among other.**
- **Ensure no harm, punitive actions, or negative listings are imposed on Plaintiff or their providers for prescribing or receiving such treatments.** Assign a qualified, experienced medical provider familiar with rare diseases and individualized treatments to oversee care without delay or restriction with all goods, services, treatments, medications, etc., to be covered at 100% to be effective immediately.
- **Mandate coverage for all necessary supplements, durable medical equipment, and therapies** (e.g., hyperbaric oxygen, testosterone replacement therapy, autologous tear serum, IPL treatment, PEMF, Frequency Specific Microcurrent, vitamin infusions, red light therapy, mitochondrial dysfunction testing and therapies, NutrEval testing and nutrition or dietary therapies, and others) at 100%.

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

- **Cover all related travel expenses** (including lodging and meals for Plaintiff, Plaintiff's Child and caregiver(s)).
- **Mandate coverage under federal Medicaid law for out-of-state services** when medically necessary and not available within Kentucky, including treatment by Dr. Vaughn and other specialists uniquely qualified to address the Plaintiff's rare conditions and complex medical needs, dating back to June 30, 2022.
- **Lifetime Coverage for Medical Needs:** Guarantee lifetime coverage for all medical care, testing, supplements, and treatments at 100%, with no gatekeeping for Plaintiff and Plaintiff's child. Allow the Plaintiff to order necessary tests and treatments directly to prevent delays caused by systemic barriers.
- **Lifetime Coverage for Alternative Medicine Therapies** or Eastern Medicine including but not limited to, herbs and supplements, functional medicine providers, naturalists, homeopathic doctors, osteopathic doctors, naturopathic doctors, Lyme literate medical doctors (LLMDs), telehealth, massage therapy including in-home massage therapy, chiropractic, acupuncture, reflexology, thermography, cryotherapy, infrared sauna, and others not appearing on this list to be covered at 100% for remainder of Plaintiff's life and covered at 100% for Plaintiff's child's life.
- **Dental /Periodontal/Orofascial/TMJ Related/Endodontal Care:** 100% coverage for all dental and/or other needs, including, but not limited to, restorative procedures (e.g., crowns, ceramic implants), preventive care, and safe mercury amalgam removal by IAOMT SMART-certified biological dentists. All types and titles of oral care are included and requested. This coverage must include any necessary evaluations, testing, procedures, and follow-ups to be covered at 100% for Plaintiff's life, and for Plaintiff's child's life.
- **Vision and Eyecare:** Comprehensive coverage for all eyecare needs, including scleral lenses, compounded eye drops, IPL treatment for meibomian gland dysfunction, higher-order corneal aberrations management, and prescription eyeglasses that are progressive lenses and single vision lenses including all add-ons such as transitions, fog resistant, oil resistant, FL-41 tint, or other, lenses as required for the Plaintiff's conditions, and Plaintiff's child's condition for life at 100%. All costs associated with vision-related medical and surgical interventions are included and covered at 100% for life, and Plaintiff's child's costs to be covered at 100% for life.

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

- **Surgeries and Procedures:** 100% coverage for all necessary medical procedures and surgeries, including preoperative and postoperative care, anesthesia, travel, and recovery support for life, and 100% coverage for Plaintiff's child for child's life.
- **Administrative Assistance Fund:** Establish a fund allowing the Plaintiff to hire caregivers and administrative assistants of their choice without restrictions. This fund shall also cover private rideshare services and gratuities, ensuring independence and reducing reliance on state programs. Plaintiff is in need of immediate assistance for this service to help relieve the burden of involuntary servitude and lack of due process that is an on-going detrimental consequence of behavior of the Defendants' toward the Plaintiff and Plaintiff's Child for trying to exercise their rights under federal law.

2. **Appointed Medical Provider or True Multidisciplinary Team**

- **Physician Appointment:** The Court shall appoint or approve a physician to oversee and manage the Plaintiff's medical care, with the authority to prescribe all medications and treatments. This includes higher-dose stimulant medications starting at 120mg of Adderall per day or equivalent, titrated as necessary, without punitive tracking or reporting to regulatory agencies, and effective immediately as a physician with familiarity with Plaintiff's conditions and unique genetic makeup is not available to Plaintiff presently and this represents an urgent need. The physician must specialize in chronic illnesses, post-viral syndromes, and neuropsychiatric conditions along with familiarity with Long Covid, CFS/ME, mold exposure aka Chronic Inflammatory Response Syndrome CIRS, Mast Cell Activation Syndrome, and Lyme Disease and co-infections among others. The provider or team must openly communicate and must respond to plaintiff and plaintiff's child's needs urgently.

3. **Mold / Mycotoxins Remedy Relief**

Owner Accountability:

Request the Court to hold **Jerry Kerchik**, owner of 2321 Glenmary Ave Apt. 2, Louisville, KY 40204 accountable for neglecting his duty as a property owner, and PMOFL (Property Management of Louisville) accountable, for not making required repairs while knowledgeable of hazards posed to tenants including:

- Subpoenaing all communications, inspection reports, and records related to environmental conditions at the property.

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

- Requiring him to disclose details about the renovations performed after Plaintiff vacated the property.

Mandated Compensation:

Request compensation for medical expenses, relocation costs and mental and physical and spiritual harm, and damages resulting from the environmental conditions at the property.

4. Standing Lab Order and Unrestricted Access to Testing

Plaintiff respectfully requests that the Standing Lab Order include access to all medically relevant testing, including but not limited to: microbiological, pathology, genetic, immune function, nutritional, neurological, cardiovascular, gastrointestinal, and specialized diagnostic testing, as outlined in this request. Laboratories shall perform requested tests without obstruction or denial, including those from research and academic labs

- Microbiological tests, including cultures (bacterial, fungal, viral, parasitic) and pathogen DNA/RNA analysis;
- Pathology tests, including biopsies, histology, immunohistochemistry, and molecular analyses;
- Blood, urine, stool, saliva, and other specimen-based tests for diagnostic or exploratory purposes;
- Comprehensive panels for immune, genetic, endocrine, nutritional, cardiovascular, neurological, gastrointestinal, and allergy-related evaluations;
- Specialized and research-based testing through academic or independent laboratories, including but not limited to RealTimeLabs, Genova Diagnostics, Great Plains Labs, LabCorp, Quest Diagnostics, and other institutions.

Expanded List of Testing for Standing Lab Order

- **Microbiological Testing:**
 - Cultures (bacterial, fungal, viral, parasitic)
 - Sensitivity and resistance testing (e.g., antibiotic/antifungal panels)
 - Pathogen DNA/RNA analysis (e.g., PCR testing)
 - Mycotoxin testing (for mold-related issues)

Emergency Preliminary Injunction, Permanent Restraining and Protective Orders, and Punitive and Compensatory Damages

- **Pathology Testing:**
 - Biopsies (tissue samples for histology and cytology)
 - Molecular pathology (e.g., cancer markers, genomic profiling)
 - Immunohistochemistry (IHC) for inflammatory or autoimmune markers
- **Blood-Based Testing:**
 - Complete blood counts (CBC) with differentials
 - Comprehensive metabolic panels (CMP)
 - Immunoglobulin panels (IgG, IgA, IgM, IgE)
 - Inflammatory markers (e.g., CRP, ESR, TNF-alpha, IL-6, TGF-beta)
 - Coagulation studies (e.g., D-dimer, fibrinogen, clotting factors)
 - Lipid profiles
 - Heavy metal and toxin panels (e.g., mercury, lead)
- **Advanced Genetic Testing:**
 - Whole-genome sequencing
 - Mitochondrial DNA analysis
 - Pharmacogenomics (drug metabolism testing)
 - Hereditary disease panels (e.g., connective tissue disorders, immune deficiencies)
- **Immune Function Testing:**
 - T-cell, B-cell, and natural killer (NK) cell function tests
 - Cytokine profiling
 - Autoantibody panels (e.g., ANA, ENA, anti-dsDNA)
- **Endocrine Testing:**
 - Hormonal panels (e.g., thyroid, adrenal, reproductive hormones)
 - Cortisol testing (serum, saliva, urine for circadian rhythms)
 - ACTH stimulation and suppression tests
- **Nutritional and Metabolic Testing:**
 - Vitamin and mineral panels (e.g., B12, D, folate, iron studies, copper, zinc)
 - Essential fatty acids and amino acids analysis
 - Methylation pathway and homocysteine testing
 - NutrEval
 - Organic Acids Testing
 - Amino Acids Profile
- **Neurological Testing:**
 - Neurotransmitter testing (e.g., dopamine, serotonin levels)
 - Cerebrospinal fluid (CSF) analysis
 - Advanced brain imaging biomarkers (e.g., neurofilament light chain)
- **Cardiovascular and Hematological Testing:**
 - Lipoprotein(a) and advanced lipid panels
 - Blood clotting disorders (e.g., Factor V Leiden, protein C/S deficiencies)

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

- Microclot analysis
- **Gastrointestinal and Microbiome Testing:**
 - Comprehensive stool analysis (bacteria, fungi, parasites, digestive markers)
 - Gut permeability tests (e.g., zonulin, lactulose-mannitol)
 - Small intestinal bacterial overgrowth (SIBO) testing
- **Allergy and Sensitivity Testing:**
 - Environmental allergy panels (e.g., mold, dust mites, pollen)
 - Food sensitivity and intolerance panels (e.g., gluten, histamine intolerance)
 - Mast cell activation testing (e.g., tryptase, prostaglandin D2)
- **Specialized and Research-Based Testing:**
 - Proteomics and metabolomics studies
 - Exosome analysis (for systemic inflammatory markers)
 - Advanced infection panels (e.g., Lyme disease, co-infections, HHV6, EBV)

This standing order shall enable Plaintiff to request any tests deemed necessary by the Plaintiff for the Plaintiff or Plaintiff's Child without obstruction, denial, or the imposition of restrictive criteria.

Providers and laboratories shall fulfill Plaintiff's testing requests promptly and without requiring external validation, unless a specific test is demonstrably unsafe and poses an immediate risk, and results shall be provided directly to Plaintiff as soon as they become available. Partial results are also to be released to the Plaintiff immediately as they become available.

The Court shall also establish a system to verify the legitimacy of the standing order on the Plaintiff and Plaintiff's Child's behalf, such as an online portal or direct contact with Court-appointed compliance officers, to ensure adherence by all laboratories, healthcare providers, and institutions, or other entity not listed explicitly.

5. Aiding and Abetting Accountability

Plaintiff respectfully requests the Court to:

Recognize Aiding and Abetting Violations:

Identify individuals, entities, or agents who knowingly assisted, enabled, or provided substantial assistance to the unlawful acts described in this case, including but not limited to violations of federal and constitutional rights.

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

Enforce Prosecution for "Color of Law" Violations:

Ensure that each individual violation meeting the criteria for "color of law" offenses (18 U.S.C. § 242) is prosecuted to the fullest extent of the law. Examples include, but are not limited to:

1. Each instance of denied or unaccounted-for medical mileage reimbursement.
2. Denial or obstruction of federally mandated benefits, services, or medical expenses.
3. Any action or inaction that willfully deprives Plaintiff of federally protected rights under the guise of legal authority.

○ **Impose Equal Liability:**

Hold all individuals and entities who aided and abetted systemic violations equally liable for the harm caused, whether through direct actions, omissions, or facilitation of unlawful conduct.

○ **Mandate Corrective Actions:**

Require all parties found to have participated in aiding and abetting to take immediate corrective actions, including the reversal of harmful policies, rectification of false records, and compliance with federally mandated protections.

○ **Impose Sanctions for Non-Compliance:**

Authorize penalties for any continued violations or refusals to comply with the Court's orders, including fines, suspension of licenses, or other Court-determined remedies.

6. Conspiracy Against Rights

- Plaintiff respectfully requests the Court to recognize and enforce accountability under **18 U.S.C. § 241 (Conspiracy Against Rights)** for individuals or entities who conspired to deprive Plaintiff of federally protected rights.
- This includes, but is not limited to:
 1. **Collusion** between state agencies, healthcare providers, or other entities to deny Plaintiff access to medical care, benefits, or services.

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

2. **Coordination to obstruct Plaintiff's lawful rights to due process, medical access, and financial protections.**
3. **Any agreement or actions designed to intimidate, oppress, or harm Plaintiff through systemic denials, delays, or false representations.**
4. **Plaintiff requests full prosecution and penalties for all parties found to have participated in such conspiracies.**

7. **Conspiracy to Obstruct Justice**

Plaintiff respectfully requests the Court to recognize and enforce accountability under **18 U.S.C. § 371 (Conspiracy to Obstruct Justice)** for individuals or entities who knowingly conspired to hinder Plaintiff's access to lawful remedies, care, or services.

This includes, but is not limited to:

1. Coordination among state agencies, healthcare providers, or other entities to delay or obstruct Plaintiff's access to federally mandated benefits, medical treatments, or due process protections.
2. Actions taken to suppress or distort evidence, including falsification of medical records, denial of essential tests or treatments, and refusal to correct errors or provide transparency.
3. Collusion to perpetuate systemic failures that prevent Plaintiff from securing justice or accessing basic rights guaranteed under federal law.

Plaintiff requests full prosecution and penalties for all parties, individuals, entities, and federal agencies found to have participated in such conspiracies, including fines, imprisonment, and mandatory corrective actions to prevent future harm

8. **Conspiracy to Commit Offense or to Defraud the United States (18 U.S.C. § 371)**

Plaintiff requests the Court to investigate and hold accountable any individuals or entities involved in conspiracies to defraud the United States by mismanaging Medicaid funds, those designated for waiver programs, and other. This includes, but is not limited to:

1. **Collusion among state officials and healthcare providers** to divert funds away from intended recipients.

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

2. **Coordinated efforts to obstruct justice** by falsifying records or intentionally delaying services to eligible participants.

9. **Racketeer Influenced and Corrupt Organizations Act (RICO) (18 U.S.C. §§ 1961-1968)**:

Plaintiff urges the Court to examine whether the mismanagement of Medicaid waiver funds constitutes a pattern of racketeering activity under RICO. Specifically:

- **Engaging in fraudulent schemes** to embezzle funds allocated for the Michelle P. Waiver and other programs.
- **Operating enterprises** that systematically deprive eligible individuals of services through financial misconduct

Plaintiff requests a formal investigation into the allocation and utilization of federal Medicaid funds in Kentucky, focusing on:

- **Tracing the flow of money** from federal allocations to state disbursements and eventual use in waiver programs.
- **Identifying discrepancies** between allocated funds and services provided to eligible participants.
- **Ensuring transparency** in how funds are managed to prevent fraud and abuse.

10. **Supplementary Request for Compliance Oversight and Enforcement Mechanism**

Plaintiff respectfully requests the Court to establish a clear system to ensure compliance with all directives of this injunction, specifically addressing denials of necessary medical care, testing, and services, as follows:

- **Reporting Mechanism for Violations:**
 1. Create a formal reporting process through which Plaintiff can submit documented instances of non-compliance, denials, or delays by healthcare providers, government entities, or other parties bound by this injunction.

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

2. Reports should be reviewed by a designated independent compliance officer or Court-appointed special master.
- **Mandatory Compliance with Plaintiff’s Medical Decisions:**
 1. Direct all healthcare providers, institutions, and related entities to comply fully and promptly with Plaintiff’s requested medical requests, including but not limited to testing, treatment, medications, and follow-up care.
 2. Denials of such requests must be documented and justified in writing within 24 hours, with clear evidence that the request poses a serious and immediate risk to Plaintiff’s health.
 3. Require that a designated compliance officer or Court-appointed special master review any denials to ensure they are not arbitrary or obstructive.
 - **Oversight of Compliance:**
 1. Appoint a Court-designated compliance officer or special master to oversee the implementation of this injunction, with authority to investigate and resolve reported violations swiftly.
 2. Include periodic reporting to the Court on compliance status and corrective actions taken.
 - **Sanctions for Non-Compliance:**
 1. Impose penalties on any individual or entity found to be in willful violation of this injunction, including fines, suspension of privileges, or other Court-determined remedies.
 2. Require immediate corrective action for all documented violations.
 - **Plaintiff’s Right to Enforcement Assistance:**
 1. Grant Plaintiff the authority to request direct enforcement from the Court in cases of non-compliance or obstruction, ensuring timely resolution of disputes without additional burden on Plaintiff or Plaintiff’s Child.

11. Food Security and Nutritional Needs

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

- **Permanent Food Security:** Provide comprehensive food security for the Plaintiff and child, including:
 1. Coverage for gluten-free, organic, and non-GMO foods at 100%.
 2. Grocery and meal delivery services (e.g., Amazon Fresh, Walmart+, Whole Foods) to accommodate the Plaintiff's mobility challenges and dietary requirements.
- **Prepared Meal Exemption:** Permit the use of SNAP benefits for hot and prepared foods, addressing the Plaintiff's inability to prepare meals due to severe health constraints-and consider amending this rule for everyone on SNAP – it does not make sense.

12. Housing Relief Requested:

Plaintiff respectfully requests immediate and permanent housing relief to address ongoing harm and ensure long-term stability and safety for Plaintiff and Plaintiff's child. Specifically, Plaintiff seeks the following:

A. Grant for Safe and Permanent Housing:

- Plaintiff requests a grant sufficient to purchase a home outright, free of any repayment obligations, to provide stability and security for Plaintiff and Plaintiff's child.
- Plaintiff requests a grant sufficient to cover the full cost of purchasing a home to provide stability and security for Plaintiff and Plaintiff's child that:
 - Is owned outright by Plaintiff, with Plaintiff's name on the title, and only the plaintiff's name on the title.
 - Upon Plaintiff's passing, ownership of the home would transfer to Plaintiff's child. If the child is under the legal age at the time, a legally designated guardian or trust, selected by Plaintiff, will oversee the home until the child reaches legal age.
- The home must meet the following criteria:

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

- Be located within close proximity to Plaintiff's child's school in Lyndon, KY, or other areas depending on situational changes in the interim.
- Be free of mold and environmental toxins, with inspection by a Plaintiff-selected mold and mycotoxin environmental toxins specialist as well as traditional home inspection specialist covered at 100%.
- Be situated in a safe and secure area, ideally on the edge of city and country, away from high-crime neighborhoods and farm chemical drift.
- Adequately sized and equipped to accommodate Plaintiff's physical limitations, medical needs, and disability requirements, including but not limited to accessibility features such as grab bars, ramps, and other modifications as needed.
- Comparable in value to other homes in the region that meet these criteria, as determined by an independent appraisal or market analysis, ensuring the home is of appropriate quality and not undervalued.

B. Ongoing Housing Costs Covered:

- Plaintiff requests permanent coverage of all costs associated with the home to ensure stability and safety of Plaintiff and Plaintiff's child, including but not limited to:
 - Property taxes
 - Utilities (e.g., water, electricity, gas, internet, trash collection)
 - Homeowner's insurance
 - Maintenance and repairs
- These costs should be covered in perpetuity, ensuring Plaintiff and Plaintiff's child have a stable and secure living environment without undue financial strain.

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

- **Maintenance and Future Costs:** All maintenance, utilities, property taxes, and insurance shall be covered to ensure that the Plaintiff and child are not burdened with additional costs that exacerbate financial or health hardships.

C. Relocation Assistance:

Plaintiff seeks full coverage of all relocation expenses, including but not limited to:

- Moving services and associated fees covered at 100%.
- Travel expenses for Plaintiff and Plaintiff's family covered at 100%.
- Temporary lodging during the transition period, and meals to be covered at 100%, if necessary during moving / relocation.
- Transportation and relocation of personal belongings from:
 - Plaintiff's current apartment to the new home.
 - Plaintiff's current storage units to the new home.
 - Plaintiff's parents' home in Shepherdsville, KY, including but not limited to a piano, deep freezer, barnwood bed, and other personal items.
- Relocation must occur without delay, with Defendants ensuring immediate availability of suitable housing to address the current unsafe living environment.

D. Permanent Waiver of Housing Reviews:

- Plaintiff requests a permanent waiver from any ongoing government housing reviews or recertifications, as these processes impose undue administrative burdens and exacerbate Plaintiff's health conditions.
- Once housing is secured, Plaintiff requests protection from unnecessary scrutiny or re-evaluation of any kind that could jeopardize long-term stability, however, that would not be an action taken anyway due to house being titled and deeded only in name of Plaintiff.

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

E. Housing Choice and Independence:

- Plaintiff requests the ability to choose the home that best suits the needs of Plaintiff and Plaintiff's child, with input from medical and environmental specialists to ensure it meets all health and safety standards.
- The home should ideally be located on a property that offers a balance of proximity to healthcare and schools while providing a quieter environment on the edge of city and country living, offering peace of mind after years of instability, abuse, and systemic harm.
- **Ownership and Transfer:** The house shall be owned outright by the Plaintiff, with the Plaintiff's name on the title. Upon the Plaintiff's passing, ownership shall transfer directly to the Plaintiff's child. If the child is a minor at that time, ownership shall be managed through a trust with a trustee selected by the Plaintiff.
- **Relocation and Storage Needs:** Defendants shall cover all costs associated with relocating the Plaintiff and child, including:
 - Transporting belongings from the Plaintiff's current residence.
 - Moving items from the Plaintiff's storage units and parents' home (e.g., piano, barnwood bed, and deep freeze).
 - Ensuring that the housing is free of mold and environmental toxins, inspected by a specialist chosen by the Plaintiff.

F. HUD and LMHA Accountability:

- Defendants, including HUD and LMHA, must provide immediate responses to Plaintiff's communications regarding housing concerns and ensure full compliance with federal housing laws, including the Violence Against Women Act (VAWA) and ADA accessibility requirements.

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

- HUD and LMHA must address past failures, including lost applications and delayed processing, and take corrective action to prevent further harm to Plaintiff and Plaintiff's child.

G. Transportation Assistance:

- Plaintiff requests a reliable and safe vehicle, owned outright, funded through a grant sufficient to cover the full cost of the vehicle. The vehicle must:
 - Meet the Plaintiff's transportation needs, including adequate space for medical equipment, mobility aids, or other necessary items.
 - Be suitable for ensuring Plaintiff's independence and access to medical care, therapy, and community activities.
 - Provide safe and reliable transportation for Plaintiff's child and caregivers, as needed.
- Plaintiff currently owns a 2006 Honda CR-V with over 226,000 miles, which has required extensive and costly repairs over the past five years, including three air conditioning system replacements. The vehicle's age and condition make it unreliable and unsafe for the Plaintiff's critical transportation needs.
- Plaintiff relies heavily on a vehicle for frequent medical appointments, grocery shopping, and ensuring their child's needs are met, particularly in areas where public transportation is unavailable or impractical, and disabilities involved and rare conditions make public transportation not an option.
- All maintenance, insurance, and registration costs for the vehicle to be covered to ensure continued reliability and usage without financial strain on Plaintiff.
- In the event of the Plaintiff passing, the vehicle's title shall go into Plaintiff's child's name if 16 or older (able to drive), or if prior to then, the vehicle would go into a trust until child becomes 16.
- **Private Transportation for Child:** Provide safe, reliable private transportation for the Plaintiff's child to and from school. This is critical due to the child's PTSD, autism, and auditory processing disorder, which render traditional bus services unsuitable, and to be provided at 100% coverage meaning no fees associated with transportation to be assigned to Plaintiff or Plaintiff's child.

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

- Permanently grant access to medical transportation without renewal requirements, and without a 72 hour notice requirement.
- Cover private rideshare trips at 100%

13. Expanded Housing and Medical Provisions

- **Housing Request Integration:** The Plaintiff seeks not only a house but also a secure environment free of mold and environmental hazards, with maintenance, utilities, and property taxes covered. Relocation and moving assistance must also include the Plaintiff's belongings currently in storage and at the Plaintiff's parents' home.
- **Enhanced Medical Coverage:** The Plaintiff requests immediate access to higher-dose stimulant medications and experimental therapies without tracking or punitive measures. Treatments such as hyperbaric oxygen therapy, red light therapy, and PEMF should be accessible at 100% coverage, with flexibility for future medical advancements. Treatments that are experimental such as MDMA therapy, Psilocybin therapy, Ketamine Infusion therapy and other must also be made available to the Plaintiff at 100% coverage as well and also with the same flexibility. Stem cell therapy and gene therapy are also item that shall belong on this list. Access to this care or any other shall not constitute any wrongdoing or have any negative impact on the Plaintiff or Plaintiff's child nor cause any record of any kind to reflect any negative association with regard to the Plaintiff and the Plaintiff's child.

14. Protection for Plaintiff and Family:

- Issue an immediate permanent restraining order effective immediately against Defendants to prevent further retaliation, harassment, endangerment, or harm of any kind to Plaintiff, Plaintiff's child, ex-wife, and extended family.
- Prohibit federal and state agencies from penalizing providers for treating Plaintiff outside of restrictive standard protocols.
- Prohibit federal and state agencies from penalizing Plaintiff for asking to receive treatment for rare set of conditions that adds to quality of life or function.

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

- Prohibit Plaintiff's child from any negative action or consequence by state and federal agencies.

15. Legal Protections:

- Permanent protection from punitive actions by FDA, DEA, CMS, and all other agencies, ensuring no negative consequences for providers who treat Plaintiff's conditions. This must also be true at the state level for the entire country for Plaintiff and Plaintiff's Child.
- Protection against removal of SSA benefits and denial of medically necessary treatments permanently as patient is permanently disabled and is not expected to improve thus ensuring a greater degree of stability for Plaintiff and Plaintiff's Child.
- Ensure all remedies are legally binding and provided in writing to prevent future denials.
- Guarantee protection against loss of Social Security benefits and ensure food security for Plaintiff and Plaintiff's child.
- Cover meal preparation services, delivery fees, and grocery memberships (e.g., Amazon, Walmart+, etc.) at 100%.
- **Cleaning Services:** Cleaning services, including maid service, shall be made available immediately and covered at 100% for Plaintiff and Plaintiff's child for life. This coverage is to ensure a clean, safe, and healthy living environment, particularly given Plaintiff's health challenges and physical limitations and inability to get any kind of consistent attendant care that is noted as included for HCBS 1915(c) Waiver participants.

16. Immediate Reimbursement:

- Retroactively reimburse all medical expenses, travel, and related costs dating back to June 30, 2022, and adjust benefits for medical expense deductions per federal law with interest.

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

17. Administrative Assistance Fund:

- Plaintiff requests the establishment of a dedicated fund to hire personal assistants or support staff chosen by Plaintiff to assist with:
- Managing medical and administrative tasks related to health care, insurance, and legal matters.
- Organizing and maintaining extensive records and documentation.
- Coordinating care, appointments, and services for Plaintiff and Plaintiff's child
- **The fund is to be:**
 1. Fully funded and maintained for the Plaintiff's lifetime to ensure uninterrupted assistance.
 2. Accessible solely to the Plaintiff, allowing full discretion over the hiring and selection process to ensure trust and compatibility with the assistants.
 3. This fund will reduce government involvement in Plaintiff's day-to-day life, which has historically caused significant additional harm through negligence, obstruction, discrimination, lack of transparency with intent, malicious intent to harm, and willful neglect and endangerment, along with other systemic failures.
- Plaintiff seeks this as a critical component for maintaining independence, managing complex needs, and reducing the extreme burden of government overreach that has compounded Plaintiff's health and well-being challenges.

Lifetime Caregiver and Transportation Fund:

18. Plaintiff requests the establishment of a fund to:

- Hire caregivers or support staff of Plaintiff's choice without restrictive oversight or unnecessary qualifications imposed by Medicaid Waiver programs or other government entities.
- Cover private rideshare services and gratuities for medical appointments, personal errands, or emergencies to ensure Plaintiff and Plaintiff's child have reliable, accessible, and dignified transportation.

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

○ **The fund will:**

1. Be maintained for Plaintiff's lifetime and extend to Plaintiff's child for the duration of the child's life.
2. Be structured to allow Plaintiff to make hiring and payment decisions without reliance on failing or restrictive state or federal programs.

- This provision ensures Plaintiff and Plaintiff's child can access the support necessary to lead a dignified and independent life, free from the constraints and harm caused by systemic government failures.

19. Medical and Administrative Support

- **Lifetime Coverage for Medical Needs:** Guarantee lifetime coverage for all medical care, testing, supplements, and treatments at 100%, with no gatekeeping.
- Allow the Plaintiff to order necessary tests and treatments directly to prevent delays caused by systemic barriers.

20. Administrative Assistance Fund:

- Establish a fund allowing the Plaintiff to hire caregivers and administrative assistants of their choice without restrictions.
- This fund shall also cover private rideshare services and gratuities, ensuring independence and reducing reliance on state programs.

21. Additional Support:

- Assign a qualified case manager to assist Plaintiff, ensuring accountability and consistent oversight of Plaintiff's care and services.

22. Medical Record Transparency and Interoperability

- Plaintiff respectfully requests the Court to mandate immediate corrective actions by Epic Systems Corporation, MyChart, and all affiliated entities to resolve systemic issues preventing effective communication and access to comprehensive patient records. These actions shall include:

1. **Full Patient Access to Diagnoses and Imaging Results:**

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

Ensure patients can view all conditions, imaging, pathology, and diagnostic testing results in real-time across all institutions within the boundaries of HIPAA and other federal regulations.

2. Interoperability and Record Consistency:

Implement mechanisms for consistent sharing of patient records across all institutions using Epic and MyChart systems, ensuring accuracy and eliminating redundancies or conflicts in medical information, and ensure patient has visibility of all portions of his or her record including things such as specific diagnoses list as opposed to only symptoms list.

3. Court-Appointed Oversight:

Appoint an independent compliance officer to review Plaintiff's medical record and ensure it is accurate, consistent, and free of defamatory or inaccurate remarks across all institutions and systems, and that the accurate record once complete review has been conducted is made available to all patient's medical providers current, past, and present as well as those in the future.

4. Systemwide Reform Deadline:

Impose a strict timeline for Epic and MyChart to implement these changes. Should they fail, mandate development of alternative software or a federally monitored platform to ensure comprehensive and effective communication between patients and providers.

23. Accountability:

- Prosecute responsible individuals and agencies for criminal violations (**Color of Law offenses, willful endangerment, malicious intent to harm, FCRA, HIPAA**, and other crimes committed etc.) to the fullest extent of the law.

Maximum compensatory and punitive damages for ongoing harm, both immediate (pre-compensatory damages) and long-term, with amounts requested not to preclude further damages as the case progresses.

24. Federal Accountability and Oversight

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

Mandatory Federal Response Protocols:

Plaintiff requests that the Court mandate the FBI to establish clear, accessible procedures for whistleblower submissions, including acknowledgment and response timelines, along with other agencies that did not respond nor acknowledge in any way the submissions of the Plaintiff, the whistleblower.

Federal Oversight Investigation:

Petition the Court to initiate a formal review of why whistleblower letters regarding systemic violations were ignored by federal, state, and local law enforcement, including the FBI, and many other agencies, entities, and individuals. Plaintiff shall receive a copy of the report.

25. Advocacy and Broader Justice:

- Commitment to Systemic Change: The Plaintiff seeks not only relief for himself and his child but also systemic change to protect others suffering from chronic illnesses, post-viral syndromes, and systemic neglect. The Plaintiff's case is rooted in ensuring broader justice for the disabled community and advocating for better standards of care and accountability – especially those in rare or not well understood illness.

26. Open-Ended Relief:

- Evidence Submission Clarification:
Pending Evidence Submission: Due to the extensive nature of this case and the Plaintiff's cognitive and physical limitations, and emotional limits, evidence will be submitted in stages as it becomes organized and available.

The Plaintiff requests immediate protection while additional documentation is compiled, and acknowledgement of receipt of this document from the court please.

- Permit amendments to this motion to include additional violations, necessary remedies, or parties as evidence emerges.

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

27. Admissibility of Evidence:

- Kentucky is a one-party consent state, making recordings of phone calls and in-person interactions lawful and admissible in court.
- Evidence types admissible include, but are not limited to:
 1. Phone call recordings.
 2. Office visit recordings.
 3. Emails, including those with tracking and delivery confirmations.
 4. Successful fax transmission reports.
 5. PDFs and document attachments.
 6. Other digital communications and correspondence.
 7. Transcriptions of recordings and other documentation are also admissible under federal and state law.
 8. All other forms of documentary evidence, and others, as discovery progresses

Requests for Evidence Protections:

- Ensure that all submitted evidence, regardless of format, is protected and considered valid.
- Mandate that the defendants produce documentation proving authenticity if challenging evidence admissibility.

28. Retaliation Concerns and Expanded Legal Protections:

- Extend whistleblower protections to include safeguarding against retaliation or punitive actions related to evidence gathering and case filing.
- Ensure transparency and accountability for all entities involved, with mandated reporting of any retaliatory incidents.

General Adaptability:

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

- Given the memory issues and cognitive challenges Plaintiff is experiencing, along with advanced brain atrophy, this motion remains open to revisions and additions as needed, ensuring no procedural disadvantages or dismissals due to oversight or delayed inclusions.

29. Food and Housing Insecurity:

- Reiterate the immediate need for food and housing stability, adding urgency given recent reductions in SNAP benefits and the non-renewal of the lease.
- Highlight the harm caused by systemic failures in addressing these basic needs and request immediate corrective measures.

30. Request for Judicial Oversight:

- Request the Court to designate a special master or independent administrator to oversee compliance with Court orders, particularly concerning evidence submission and accommodation requests.

31. Refusal to Apply Medical Expense Deductions:

- The Defendants denied all medical expense deductions from SNAP calculations until a few months ago and have since arbitrarily capped these deductions, in violation of **7 CFR § 273.9(d)(3)**, which mandates that all verified medical expenses over \$35 be deducted for eligible individuals.

Recent caps include:

1. \$158.xx for prescriptions.
 2. \$22.13 for VSP (Vision Service Plan).
 3. A one-time transportation reimbursement of approximately \$30x.xx in July 2024.
- **Failure to Retroactively Correct Benefits:**

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

1. The Defendants have failed to adjust benefits retroactively to account for these unlawful caps and deductions, exacerbating Plaintiff's financial instability and food insecurity.
 - **Refusal to Follow Federal Law:**
 1. Despite being provided with clear legal documentation of federal Medicaid and SNAP regulations, the Defendants have repeatedly refused to comply, violating the **Supremacy Clause of the U.S. Constitution** and **7 CFR § 273.9(d)(3)**.
-

32. Additional Relief Requested:

Plaintiff respectfully requests that the Court:

- **Order Immediate Compliance with Federal SNAP Regulations:**
- Require the Defendants to fully account for and apply all medical expenses over \$35 in SNAP calculations, as mandated by **7 CFR § 273.9(d)(3)**, without arbitrary caps or exclusions.
- **Mandate Retroactive Adjustment of Benefits:**
 1. Direct the Defendants to recalculate and reimburse SNAP benefits retroactively to **June 30, 2022**, the documented date of disability onset, to correct for the unlawful denial of medical expense deductions with assistants of Plaintiff from above support request ensuring that all expenses are included that could possibly be included dating back to June 30, 2022.
- **Provide Emergency Food Support:**
 1. Order immediate emergency SNAP benefits to address the ongoing food insecurity caused by these systemic violations.
- **Enforce Oversight:**

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

1. Appoint an independent monitor to ensure the Defendants' compliance with federal law regarding SNAP and medical expense deductions along with following all other federal and state level laws with further criminal and civil violations to be added if the court's order is violated.

33. Request for Maximum Compensatory and Punitive Damages

o **To the Honorable Court:**

The Plaintiff, John R. Fouts, respectfully submits this detailed request for maximum compensatory and punitive damages, reflecting the profound and far-reaching harm inflicted upon the Plaintiff and Plaintiff's child due to the Defendants' willful, malicious, and egregiously negligent actions and inactions. These damages are sought as just relief for the irreparable harm already caused, as well as to deter such conduct in the future.

o **Compensatory Damages:**

The Plaintiff seeks compensatory damages to address the measurable and tangible harms endured, including but not limited to:

1. **Physical and Emotional Harm:**

1. Severe and permanent health deterioration due to delays, denials, and obstructions of critical medical care, testing, and treatments, including experimental therapies that could have significantly improved Plaintiff's quality of life.
2. Exacerbation of PTSD, severe anxiety, and depression caused by Defendants' harassment, systemic retaliation, and refusal to comply with federal mandates, resulting in long-term emotional and mental trauma.

2. **Financial Losses:**

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

3. Out-of-pocket medical expenses, including medications, therapies, travel, and testing, amounting to tens of thousands of dollars. These expenses were unjustly denied reimbursement despite clear federal law mandating coverage.
 4. Additional financial burdens imposed through systemic barriers, such as the refusal to approve medically necessary care, the capping of medical expense deductions, and the denial of services essential to daily living.
 5. Loss of income potential due to forced overburden and the Plaintiff's inability to pursue gainful employment while managing systemic harm and rare, debilitating medical conditions, and the healthcare needs of Plaintiff's special needs child
3. **Harm to Plaintiff's Child:**
6. Emotional and psychological harm caused to Plaintiff's child, including additional PTSD and trauma, due to systemic discrimination, retaliatory actions, and the unsafe and unstable living conditions created by Defendants.
 7. Negative impacts on the child's education and daily well-being caused by disruptions, lack of resources, and the failure to ensure adequate accommodations and security for the family.
4. **Loss of Time and Relationships:**
8. Invaluable time and opportunities to bond with and care for Plaintiff's child have been irretrievably lost due to the Defendants' imposition of relentless and unnecessary, unlawful, administrative burdens, forcing the Plaintiff into what can only be described as involuntary servitude.
 9. Permanent damage to the Plaintiff's reputation and relationships due to false narratives and systemic harassment.

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

5. **Financial Devastation and Bankruptcy:**

10. The Plaintiff was forced to file for bankruptcy in late 2022, which was finalized in the first half of 2023, as a direct result of the overwhelming financial burdens imposed by the Defendants' systemic violations, including the denial of mandated benefits, medical coverages, and critical support services. The Plaintiff's financial ruin is emblematic of the Defendants' failure to uphold their legal and ethical obligations, further exacerbating the Plaintiff's health and well-being, and many other parties and bad actors also contributed to similar behaviors.

11. This bankruptcy underscores the Defendants' significant role in creating a situation where the Plaintiff was left with no other recourse but to surrender assets and creditworthiness to survive.

34. Punitive Damages:

The Plaintiff further requests maximum punitive damages due to the Defendants' reckless disregard for human dignity and the fundamental rights of the Plaintiff and Plaintiff's child. The following actions justify punitive relief:

a. **Willful Endangerment and Malicious Intent:**

1. Defendants acted with clear knowledge of the harm their actions and inactions would cause, including denying life-saving medical care, essential services, and critical benefits while imposing excessive burdens on the Plaintiff.
2. Persistent refusal to correct known errors, including falsified CPS reports and medical records, with the intent to harm the Plaintiff's reputation and deny access to essential resources, repeatedly, despite the Plaintiff going far above and beyond legal requirements at the request of the Defendants', which still continues today.

b. **Obstruction and Harassment:**

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

3. Defendants knowingly created barriers to accessing mandated benefits, repeatedly denied lawful requests, and engaged in retaliatory practices aimed at silencing the Plaintiff's whistleblowing efforts.
4. Actions such as multiple unauthorized credit checks, failure to process legitimate requests for services, and refusal to investigate reported violations exemplify the Defendants' intentional disregard for federal law and human decency.

c. Systemic Discrimination and Color of Law Violations:

5. Discrimination based on the Plaintiff's disability status, rare medical conditions, and familial circumstances was compounded by the Defendants' violations of the ADA, Olmstead Act, and multiple constitutional amendments, including the 1st, 4th, 5th, 8th, 9th, 13th, and 14th.
6. Color of Law violations demonstrate a flagrant abuse of power by state and federal actors, inflicting immense harm under the guise of authority repeatedly.

d. Intentional Infliction of Emotional Distress:

7. The Defendants' actions have caused incalculable emotional pain, creating a hostile environment where the Plaintiff and child live in constant fear of further harm, retaliation, or neglect.
8. Failure to address urgent safety concerns, including unsafe housing and transportation issues, has further endangered the Plaintiff and child.

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

e. Magnitude of Damages Requested:

9. The Plaintiff requests:

- i. **Compensatory Damages:** To cover all measurable financial, physical, and emotional losses, estimated to range between **\$10 million to \$50 million or more** for the immediate and ongoing harm caused.
- ii. **Punitive Damages:** To deter future misconduct and hold Defendants accountable for their heinous and egregious actions, estimated to range between **\$100 million to \$500 million or more**, considering the systemic nature and broad scope of violations.

o **Compounding Hardships and Emotional Toll:**

In addition to the systemic violations and injustices outlined, the Plaintiff endured compounding personal and familial challenges that exacerbated the harm inflicted by the Defendants' actions:

1. **Homeschooling Due to Bullying:**

1. The Plaintiff was forced to remove his child from Bloom Elementary School on February 22, 2022, due to relentless bullying by students, teachers, and administrators.
2. Despite the Plaintiff's efforts, including escalating the issue to the superintendent's office and engaging in multiple meetings, the bullying continued, making the school environment unsafe.
3. The Plaintiff took on the responsibility of homeschooling his child to provide a safe and stable learning environment, further burdening his already overwhelming responsibilities.

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

2. Environmental Toxicity:

1. During the same period, the Plaintiff lived in a mold-infested and environmentally toxic apartment at 2321 Glenmary Avenue, Apt. 2, in Louisville, KY. Despite repeated efforts, the city, property management company, and property owner failed to address these serious issues, which contributed to the Plaintiff's deteriorating health and his child's health challenges.

3. Ex-Wife's Mental Health Challenges:

1. Compounding the stress, the Plaintiff's ex-wife was frequently hospitalized for mental health issues and often failed to adhere to agreed custody arrangements.
2. She regularly refused to pick up the Plaintiff's child during her assigned weeks or provide financial support for the child's care. The Plaintiff was left to shoulder the full responsibility for his child's medical care, education, and well-being, often at the expense of his own health and financial stability.

4. Long COVID Diagnosis in Plaintiff's Child:

1. The Plaintiff's child was diagnosed with Long COVID by Dr. Mahajan at Norton Children's Pediatrics in Louisville, KY. Managing this diagnosis required numerous medical appointments, treatments, and care coordination, all of which fell solely to the Plaintiff due to his ex-wife's neglect of her responsibilities.

2.

o **Medicare and Financial Planning Challenges:**

1. The Plaintiff, now on Medicare, as of 12/1/2024, due to disability, has been unable to adequately research and choose a suitable Medicare

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

plan or supplementary insurance due to the unrelenting demands of addressing these systemic failures and caring for his child.

2. Additionally, the Plaintiff urgently needs to establish trusts to protect his limited resources from Medicaid clawback policies but has been unable to secure legal assistance, due to the breadth and depth of his case.

- **Unaddressed Healthcare Needs:**

1. The Plaintiff's own critical healthcare needs remain neglected due to the constant administrative burden imposed by the Defendants' failures.
2. Essential tasks, such as updating medical expense spreadsheets and responding to government agencies, consume time and energy that should be devoted to healing and recovery, and time that should be spent with Plaintiff's child.

- **Profound Loss of Time with Child:**

1. The Plaintiff has been deprived of precious time with his child, a devastating consequence of the systemic failures and neglect outlined, this is time that cannot ever be recovered.
2. The Plaintiff's heart remains broken completely due to the time and opportunities lost, all while striving to provide the stability his child so desperately needs.

REQUEST FOR COMPENSATORY AND PUNITIVE DAMAGES

The Plaintiff respectfully requests that the Court consider these extraordinary hardships in determining maximum compensatory and punitive damages.

Emergency Preliminary Injunction, Permanent Restraining and Protective Orders, and Punitive and Compensatory Damages

The Plaintiff seeks accountability for the Defendants' actions, which have irreparably harmed the Plaintiff and his child, and asks the Court to ensure justice is served to prevent such injustices from continuing or affecting others.

Formal Communication Request:

Plaintiff formally requests that all communications regarding this case be conducted in written form via fax or email for speed, documentation, and to accommodate Plaintiff's PTSD and to allow sufficient time to fully understand and respond to the communication accurately.

SUPPLEMENTARY POINTS AND CLARIFICATIONS

Educational and Other Protections for Jackie

1. Name Recognition and Identification:

- **Mandatory Recognition:** Jackie A. Fouts or Jacquelyn A. Fouts (with two Qs), (middle name Alana) must be fully recognized in all records, systems, and interactions across all platforms, organizations, and agencies. This includes, but is not limited to:
 - Social Security Administration (SSA) cards.
 - Passports and any travel documents.
 - Driver's licenses (or state-issued identification cards).
 - School records and insurance forms.
- **Cost-Free Updates:** All associated costs for updates, reissuance, or changes to these documents are to be covered at 100% and implemented immediately, with enforced compliance across all entities.

2. Medical Records and Software Compliance:

Emergency Preliminary Injunction, Permanent Restraining and Protective Orders, and Punitive and Compensatory Damages

- **Primary Display Name:** Medical record systems, including Epic, MyChart, or similar platforms, must display “Jackie A. Fouts” or “Jacquelyn A. Fouts” as the primary name. The legal name (“Jack A. Fouts”) may appear solely for insurance processing or legal compliance where required but must be subordinate and clearly noted as such.
- **Pronoun Accuracy:** All communications, records, and interactions must adhere to the correct pronouns (“she/her”) to maintain dignity and prevent emotional distress.
- **System-wide Consistency:** This compliance must extend to every interface, communication, and document within medical and educational systems.

3. Legally Binding Compliance:

- **Enforcement:** This mandate is legally binding and requires 100% compliance from all relevant entities, agencies, and institutions. Non-compliance shall result in legally enforceable consequences.
- **Alias Authorization:** “Jackie A. Fouts” and “Jacquelyn A. Fouts” are authorized aliases for all official and non-official purposes, ensuring consistency and clarity across systems. Any misrepresentation or non-compliance must be corrected immediately and at no cost.

4. Educational Equity and Identity Protections:

- **Cost-Free Access:** Educational systems must immediately and without exception update all records to reflect Jackie’s correct name and gender identity at no cost. This applies to transcripts, diplomas, identification cards, and any other educational documentation.
- **Inclusive Systems:** Systems must be updated to reflect these changes seamlessly, ensuring Jackie’s identity is respected in all interactions.

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

5. Future-Proofing Protections:

- **Legally Mandated Continuity:** Ensure all changes and compliance measures remain legally binding for the duration of Jackie’s life. Any system upgrades, migrations, or policy changes must retain these updates without additional administrative hurdles or costs.
- **Transfer of Rights:** In the event of Jackie’s transition to adulthood, all protections and mandates shall remain in effect and automatically transfer to her.

Immediate and Comprehensive Access to Care

The Plaintiff and Plaintiff’s child shall have **immediate, uninterrupted, and comprehensive access to all physical, mental, spiritual, and other healthcare needs covered at 100% for life of Plaintiff and child without obstacles or hindrances obstructing access to care in any way.**

This includes, but is not limited to:

- All diagnostic, research, experimental, and clinical testing.
- All treatments, therapies, and modalities (e.g., gene editing, stem cell therapy, advanced sequencing, research items).
- All prescription medications and supplies, with an explicit right to:
 - Try different brands or formulations to determine optimal efficacy.
 - Receive **brand-name medications** unless otherwise chosen by the Plaintiff.
 - Source medications without penalties or delays if unavailable locally.

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

- All mental health services (e.g., CBT, DBT, ACT, art therapy, hypnosis).
- Immediate access to genetic testing and interpretation, including ordering additional tests at existing facilities that already hold DNA or other materials.
- **Costs shall be fully covered at 100% for life for both the Plaintiff and the Plaintiff's child.**

DIRECT ORDERING AUTHORITY

The Plaintiff and Plaintiff's child are granted **full authority to directly order testing, treatments, and services** from any provider, facility, lab, specialty lab, or institution, bypassing all regulatory or administrative gatekeeping without any negative consequence being attached to them in any way for life.

- **Testing Facilities:** Must comply fully and without exception.
- **Research Institutions and Labs:** Mandated to honor direct orders and provide immediate access to results.
- **Online Portals:** Immediate account creation and access must be granted for all testing results.
- Organizations must reply to communication about results posed by Plaintiff about Plaintiff and/or child for life.

BROAD DEFINITION OF TESTING

The term "tests" shall include, but not be limited to, in any way, **all methodologies** such as:

- Next-Generation Sequencing (NGS).

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

- Parasitology.

- Blood cultures, plasma, sputum, saliva, and any other cultures.

- Advanced genetic sequencing.

- Whole Genome Sequencing.

- Any other standard or in-depth techniques, including experimental or research-based methods offered in research, clinical, or academic settings.

All tests must be interpreted, with **second opinions** as requested expeditiously, and provided to the Plaintiff and Plaintiff's child directly also without gatekeeping, delay, or cost for life.

Recent ER Incidents at Norton Women and Children's Hospital on 2024-12-02

- Investigate why IV placement was used for simple blood draws and ensure this practice aligns with legal and ethical standards.

- Plaintiff nor child were informed of need for IV and were caught off guard.

- Toradol was administered without the knowledge of what was being administered per Plaintiff and Plaintiff child statement.

- Standard add-on tests requested by Plaintiff for child were denied stated as not available at the ER or the hospital including Iron Panel, Ferritin, Copper, Ceruloplasmin, and Vitamin D levels – all ordered by other Norton physician's and Plaintiff has not been able to get a local doctor to order for months – tests have not been completed recently. Plaintiff's child has been ill on and off since late August and missed many days of school.

Emergency Preliminary Injunction, Permanent Restraining and Protective Orders, and Punitive and Compensatory Damages

- Mandate **written and verbal consent for all procedures and medications administered** in ER settings, with oversight to ensure compliance and prevent recurrence.

Protection for Physicians and Providers

- At Plaintiff's request, physicians and healthcare providers must receive **legal protection** from FDA, DEA, or any other regulatory body regarding treatment decisions for the Plaintiff and Plaintiff's child.
- Shield all providers against:
 - Loss of licensure or certifications.
 - Retaliation or lawsuits related to off-label use, experimental treatments, or high-dose prescriptions.

Pharmacies Must Be Ordered to Comply To Allow Plaintiff and Child Access To Treatments and Medications For Life at No Cost and Must Be Able To Deliver Medications To Plaintiff and Child For Life Also at No Cost

Legal Teams

- Include **Constitutional rights violations (1st, 4th, 5th, 8th, 9th, 13th, 14th Amendments)** and **Supremacy Clause** in lead counsel requirements.
- Ensure attorneys are also adept and experienced in the following, but not limited to, the
 - **Olmstead Act violations**
 - **ADA violations**
 - **FCRA violations**

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

- **HIPAA violations**
- **Violence Against Women Act**
- **Right to Try**
- **Color of Law**
- **All Listed and Unlisted**
- **Whistleblower Protections**
- **Obstruction of Justice**
- **Conspiracy against Civil Rights to prevent Defendant from receiving benefits of federal rights, constitutes:**
 - **Cruel and u=Unusual Punishment**
 - **Violation of Due Process**
 - **Systemic malicious intent across multiple agencies, entities, individuals, and even legal counsel.**
- This led to further **involuntary servitude of Plaintiff** in terms of needing to do any administrative work that counsel should have done, thus causing Plaintiff and Plaintiff's Child even more **harm in damage to mental health, obscuring any hope the Plaintiff or Plaintiff's Child** may have had, causing **instability for Plaintiff and Plaintiff's Child** and **undue hardship and pain and suffering.**
- In addition to this, Lisa Hinkle refused to answer questions with regard to the scope of her representation to the Plaintiff, and many other questions remain without answers, contributing to the ongoing pattern of neglect and treatment of the Plaintiff and Plaintiff's Child as if their lives and physical and

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

emotional health have no merit or inherent value. This repeat pattern of malevolence must be stopped immediately, and retribution must be paid.

- Lisa Hinkle also refused to answer the question if she had any conflict of interest with the Commonwealth of Kentucky.
 - Plaintiff contacted every member of the Bar Counsel in an email to report Lisa Hinkle’s actions and inactions that led to harm.
 - Not one member of the Bar Counsel, nor Lisa Hinkle, has been in contact with the Plaintiff in any way.
 - It almost seems that they believe they are completely protected or shielded by an unseen force. This concerns the Plaintiff that big money or power is likely protecting these individuals, and the Plaintiff has no such shield. The Plaintiff is completely vulnerable.
 - Pairing this with the other items can lead the reasonable person to the general conclusion that the Plaintiff and Plaintiff’s Child are clearly not safe from harm, and need protection urgently.

Request for Relief: Addressing Systemic Failures in Administrative Functions

- **Mandatory Oversight and Training for Front Office Staff:**

Require front office staff at Norton Children’s Medical Group and similar institutions to receive training on resource accessibility and equitable treatment for patients and families in need.

- **Accountability for Denial of Resources:**

Establish policies requiring documentation and justification when patients are denied access to resources, ensuring transparency and accountability in such decisions, along with supervisor’s direct information that makes higher level decisions overseeing the office, and an executive level contact within

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

the organization to contact to ensure that everything goes as it is written in the policy manual for said situation with revisions noted.

- **Educational Mandate for Providers:**

Require healthcare providers at Norton, Baptist Health, and similar institutions to receive training on mold-related illnesses and emerging medical conditions to prevent harm caused by dismissive attitudes.

- **Establishment of a Review Board:**

Mandate the creation of an independent review board to assess patient cases where providers dismissed evidence-based concerns, ensuring accountability and corrective action. Doctors should be required to submit correctional actions of their own behaviors, write letters of apology to patients, amend medical records to reflect appropriately accurate situations that occurred, and what they would have done differently.

- **Educational Mandate for Providers:**

Require healthcare providers at Norton, Baptist Health, University of Louisville Hospital, University of Louisville Physicians Group, University of Kentucky and similar institutions and individual offices to receive training on mold-related illnesses and emerging medical conditions to prevent harm caused by dismissive attitudes. Long Covid is another perfect example and microclots and damages caused if left untreated. Must also be current on current literature and not refuse to read it or state that they are too busy. Complex cases deserve caring treatment providers not apathetic ones.

- **Software Development Must Be Made Available So Companies Like MyChart and Epic Do Not Have Monopolies On Software For Health Data Systems and Must Be Integrated To Reflect Accurate Records Across Systems Within 6 Months**

Emergency Preliminary Injunction, Permanent Restraining and Protective Orders, and Punitive and Compensatory Damages

End users such as stakeholders including patients, nurses, parents, physician assistants, data entry technicians, check in clerks, and others should have direct input into what is built into the software being developed.

Oversight and review must occur for all of the inconsistencies that are within and throughout MyChart Epic that need to be addressed immediately.

Whistleblower Protections

- Whistleblower protections must be **legally binding and in writing effective immediately, and must be provided comprehensively and completely.**
- Address potential **qui tam (whistleblower reward)** eligibility explicitly, as it may significantly affect compensatory damages, but is separate and not counted as part of punitive and compensatory damages of full case.

Educational And Other Protections for Jackie A. Fouts (Child of Plaintiff)

1. Recognition of Name and Identity:

- Jackie A. Fouts or Jacquelyn A. Fouts (full middle name Alana) must be recognized in all records, systems, and interactions. This includes cost-free updates and reissuance of identification documents such as:
 - Social Security Administration (SSA) cards
 - Passports
 - Driver's licenses (or state IDs)
 - School records
 - Insurance forms
 - Other unlisted may be added at a future date
- Updates must be implemented immediately, with 100% compliance legally mandated.

2. Medical Record Software Updates:

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

- Systems such as Epic and MyChart must display Jackie A. Fouts or Jacquelyn A. Fouts as the primary name.
- A secondary field may include "Jack A. Fouts" solely for insurance purposes, ensuring dignity and respect by eliminating misgendering or improper naming.
- Preferred pronouns must be included in all such systems to protect Jackie and others who are in this category.

3. Legally Binding Enforcement:

- Clear, enforceable language must ensure all systems, records, and communications adopt these aliases as authorized identifiers for Jackie without ambiguity.
- Any failure to comply shall be rectified immediately at no cost to Jackie or the Plaintiff.

4. Immediate Access to Services for Plaintiff's Child

Plaintiff respectfully requests the Court to mandate immediate access to the Michelle P. Waiver or equivalent services for Plaintiff's child, Jackie A. Fouts aka Jacquelyn and Jack A. Fouts. This includes expediting Jackie's enrollment into the waiver program immediately and providing comprehensive services for autism spectrum disorder (level 2) and related needs with Jackie as an active participant with access directly and immediately.

Given the current wait list in Kentucky, which spans 7 to 9 years, this request is critical to ensure Jackie receives necessary care and support during formative years, minimizing long-term harm and ensuring equitable treatment.

Parental Authority and Access to Medical Records

Plaintiff requests that the Court affirm Plaintiff's and Jackie's mother's authority to make medical decisions for Jackie until Jackie reaches the age of 18. This includes unrestricted access to Jackie's medical records and the ability to manage

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

care and advocate effectively for necessary services and access to all systems and test results among other things and is not limited to only those listed.

Comprehensive Care for Plaintiff and Plaintiff’s Child

1. Immediate and Inclusive Access to Testing:

- All standard and specialized tests, including but not limited to Next-Generation Sequencing (NGS), parasitology, advanced genetic sequencing, and other cutting-edge methodologies, must be immediately available.
- This includes both clinical and research-level testing, with results provided directly to the Plaintiff and/or child without delay or provider review barriers.

2. Testing Facilities and Research Institutions Compliance:

- All institutions must comply fully and without exception, providing necessary results, procedures, or services requested by the Plaintiff or child. This applies regardless of experimental or clinical designation and extends for life.

3. Prescriptions and Medications:

- Brand-name medications must be used unless otherwise determined by the Plaintiff.
- Multiple brands of the same medication must be allowed for trial to determine the most effective option for life of Plaintiff and child.
- Any unavailable medication may be sourced from alternative providers without penalty true for life of Plaintiff and child.
- All medications must be covered at 100%, effective immediately, and for life of Plaintiff and child.

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

- Also centralize and keep accurate and current results of all testing, xrays, imaging, medical records and more across all systems in one place for ease of patients (Plaintiff and Plaintiff's Child) and allow access to providers that Plaintiff and Plaintiff's Child can control access to.
- Also order cease and desist to Kentucky's many agencies and entities in violation of the Violence Against Women Act

4. Accountability for Law Enforcement Agencies

Investigation into Law Enforcement Failures:

Request that the Court mandate an independent investigation into why the Sheriff's Department and Police Department failed to respond to whistleblower allegations and what systemic changes are needed to prevent future inaction.

Enhanced Whistleblower Protections:

Require law enforcement agencies to implement clear protocols for handling whistleblower letters, including mandatory response timelines and documentation.

Respectfully, the Plaintiff would like to ask of the court as well please, to ask Law Enforcement to acknowledge previous receipt of the Whistleblower document sent and received as evidenced by the Delivery of Certificate documents in the Exhibits.

Legal and Procedural Safeguards

1. Prohibition of Retaliation:

- Federal, state, or any other entity is prohibited from retaliating against the Plaintiff or child in any form, including indirect or covert means.

2. Legally Binding Whistleblower Protections Immediately In Effect:

- Comprehensive whistleblower protections, including legally binding guarantees against retaliation, must be enforced immediately.

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

- Retaliation continues with the latest example being a notice I received from Station Jtown (A Vida-Management Property) stating my lease would not be renewed with no explanation given. Letter was stuck in my door jamb on 12/4/2024 along with a Grinch Who Stole Christmas Coat Drive notice.
- Oversight and real-time updates on all whistleblower cases must be provided to the Plaintiff.

3. Hold Harmless Clause for Providers:

- Providers, institutions, and individuals offering care must be protected from any negative legal, financial, or reputational consequences related to treatments, medications, or procedures for the Plaintiff and child.
- These protections must not infringe on the Plaintiff's or child's rights.

Oversight and Accountability

1. Independent Audits:

- A non-Kentucky-based independent third-party auditor must conduct random reviews of case handling by all implicated entities to ensure compliance and identify systemic failures.

2. Mandated Correction of False Narratives:

- False narratives in CPS, medical, and other records must be corrected due to identified misconduct and legal violations.
- Documentation of corrections and destruction of false records must be provided in legally binding evidentiary documentation.

Maximum and fullest extent of the law, both criminally and civilly, to ensure accountability for their actions. This measure is essential not only to deliver justice for the Plaintiff and his

**Emergency Preliminary Injunction,
Permanent Restraining and Protective Orders, and Punitive and
Compensatory Damages**

child but also to serve as a deterrent against future violations of federal law, constitutional protections, and civil rights. The Plaintiff also reiterates the request for maximum prosecution to the fullest extent of the law to ensure justice is served.

Reservation of Rights

The Plaintiff reserves the right to amend or supplement this filing to address additional claims, evidence, or responsible parties as new information becomes available, via discovery or other means, or circumstances evolve.

CONCLUSION

The Plaintiff seeks this relief not solely for personal redress but also to advocate for systemic accountability and to protect other vulnerable individuals who may face similar injustices. These damages are critical to restoring dignity, health, and stability to the Plaintiff's life and the life of Plaintiff's child, while ensuring that no other families endure the catastrophic harm caused by the Defendants' actions.

Respectfully submitted,

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