Office of Medicaid Policy and Planning Non-Emergency Medical Transportation Reports

Report Name: Complaint Summary

Version: 1.0
Report Code: MO-CS
Submission Date: 10/15/19

Code Citation: IC 12-15-30.5-4 (a)(1)(D) i-ii

Experience Period >> 06/01/19 - 06/30/19

	To	From	
Complaint Type	Appointment	Appointment	Grand Total
Accident	0	1	1
Call Center Issue	4	0	4
Dispatch Error	1	0	1
Driver Behavior	10	1	11
Driver Reckless	5	0	5
Gas Reimb Issue	0	1	1
Incident	3	1	4
Incident - W/C	0	1	1
Member Issue	9	1	10
Payment Issue	1	0	1
Prov Late	9	2	11
Prov Late Sendback	4	0	4
Prov No-Show	14	2	16
Provider Error	2	0	2
Rude Staff (non-CC)	1	0	1
Trip not assigned	8	0	8
Vehicle Condition	1	0	1
Website Complaint	5	0	5
	77	10	87

Experience Period >> 06/01/19 - 6/30/19

	То	From	
Compliment Type	Appointment	Appointment	Grand Total
Compliment	10	0	10

Note: Data includes complaints or concerns direct to FSSA and to Southeastrans. A contact may include 1 or more issues.