

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

**Report Name:** Complaint Summary by Residence  
**Report Code:** MO-CSR  
**Submission Date:** September 8, 2021  
**Code Citation:** IC 12-15-30.5 (4)(a)(1)(D) iii

Experience Period >>3, 5/1/2021-5/31/2021

	Nursing Facility	Hospital	Community	Total
May 2021	16	4	86	106

**Note:** Data reflects the residence type for the complaints or concerns directed to FSSA and to Southeastrans