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

Report Name: Complaint Summary

Version: 1.0
Report Code: MO-CS
Submission Date: 9/15/2020

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

Evnorionoo	Period >> $05/01/20$	05/31/20
Experience	1 CHOU // US/U1/4U	- 45/51/20

	То	From	
Complaint Type	Appointment	Appointment	Grand Total
Accident (veh. only)	1	0	1
Driver Behavior	7	2	9
Incident	1	2	3
Incident - W/C	3	0	3
Member Issue	2	1	3
Member No-Show	1	0	1
Prov Late - A Leg	3	0	3
Prov Late Sendback	1	0	1
Prov No-Show A leg	2	0	2
Provider Error	1	0	1
Vehicle Condition	1	0	1
	23	5	28

Compliment	Experience Period >> 05/01/20 - 05/31/20			
	То	From		
Compliment Type	Appointment	Appointment	Grand Total	
Compliment	2	0	2	

Note: Data includes complaints or concerns direct to FSSA and to Southeastrans.