

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

**Report Name:** Complaints and Appeals  
**Report Code:** MO-MCA1  
**Submission Date:** 7/30/19  
**Code Citation:** IC 12-15-30.5-4 (a)(3)(E)

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

### COMPLAINTS

Item No.	Description	Data Entry
1	Number of Complaints Received this Reporting Period	44
2	Number of Complaints Acknowledged Received within One (1) Business Day in this Reporting Period	44
3	Percent of Complaints Acknowledged within One (1) Business Day for this Reporting Period	100.00%
4	Number of Complaints Received in the Reporting Period that <b>Were</b> Investigated, Remediated, and Closed within 15 Business Days of Receipt	44
5	Number of Complaints Received in the Reporting Period that <b>Were Not</b> Investigated, Remediated, and Closed within 15 Business Days of Receipt	0
6	Percent of Complaints Received in the Reporting Period that Were Investigated, Remediated, and Closed within 15 Business Days of Receipt	100.00%

**Note:** Data includes the number of complaints received during the reporting month. One complaint may have one or more concerns.

### APPEALS

Item No.	Complaint Category	Data Entry
1	Number of Appeals Received this Reporting Period	0
2	Number of Appeals Acknowledged Received within One (1) Business Day in this Reporting Period	0
3	Percent of Appeals Acknowledged within One (1) Business Day for this Reporting Period	0.00%
4	Number of Appeals Received in the Reporting Period that <b>Were</b> Investigated, Remediated, and Closed within 15 Business Days of Receipt	0
5	Number of Appeals Received in the Reporting Period that <b>Were Not</b> Investigated, Remediated, and Closed within 15 Business Days of Receipt	0
6	Percent of Appeals Received in the Reporting Period that Were Investigated, Remediated, and Closed within 15 Business Days of Receipt	0.00%

**Note:** Data reflects the number of appeals directed to the FSSA Office of Hearings and Appeals for a state fair hearing.