

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

**Report Name:** Complaint / Compliment Summary  
**Version:** 1.0  
**Report Code:** MO-CS  
**Submission Date:** 08/15/2020  
**Code Citation:** IC 12-15-30.5-4 (a)(1)(D) i-ii

**Experience Period >> 04/01/20 - 04/30/20**

Complaint Type	To Appointment	From Appointment	Grand Total
Accident	1	0	1
Driver Behavior	6	0	6
Driver Reckless	1	0	1
Incident - Stretcher	2	0	2
Incident - W/C	0	1	1
Incorrect Mobility	1	0	1
Member Issue	3	1	4
Member No-Show	2	0	2
Prov Late - A Leg	1	0	1
Prov Late Sendback	1	0	1
Prov No-Show A leg	2	0	2
Trip not assigned	2	0	2
	<b>22</b>	<b>2</b>	<b>24</b>

**Experience Period >> 04/01/20 - 04/30/20**

Compliment Type	To Appointment	From Appointment	Grand Total
Compliment	4	0	4

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