

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

**Report Name:** Complaint Summary by Residence  
**Version:** 1.0  
**Report Code:** MO-CSR  
**Submission Date:** 11/8/19  
**Code Citation:** IC 12-15-30.5-4 (a)(1)(D) iii

**Experience Period >> 5/1/2019-5/31/2019**

	Nursing Facility	Hospital	Community	Total
May 2019	13	6	41	60

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