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

Report Name: Complaint Summary

Version: 1.0
Report Code: MO-CS
Submission Date: 3/13/2020

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

Evrm over on oo	Period >> 1	1/01/10	11/20/10
r.xnerience	Perioa // 1	1/111/19 -	11/30/19

	То	From	
Complaint Type	Appointment	Appointment	Grand Total
Accident	1	0	1
Call Center Issue	5	1	6
Dispatch Error	4	0	4
Driver Behavior	25	2	27
Driver Reckless	2	2	4
Hlthcare Prov. Issue	2	0	2
Incident	2	0	2
Member Issue	12	1	13
Member No-Show	4	2	6
Post Trip Survey	1	0	1
Prov Late - A Leg	16	0	16
Prov Late - B Leg	2	4	6
Prov Late Sendback	8	1	9
Prov No-Show A leg	21	0	21
Prov No-Show B leg	4	2	6
Provider Error	2	1	3
SETI Staff	3	0	3
Trip not assigned	6	0	6
Vehicle Issue	1	0	1
Website Complaint	2	0	2
	123	16	139

Compliment	Experience Period >> 11/01/19 - 11/30/19		
	То	From	
Compliment Type	Appointment	Appointment	Grand Total
Compliment	5	0	5

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