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| **Survey: Medicaid.gov Feedback Survey** |  | |  | | |  |
| **IA#: 30724** |  | |  | | |  |
| **Date: 11/08/2021** | |  |  | | |  |
|  |  | | |  |  |
| **SURVEY TYPE:** | Feedback | | |  | |
|  |  | | |  |  |
| **Survey Q#** | **Type#** | | **Topic Type** | | |  |

1 Feedback Star rating

2 Feedback Role

3 Feedback Open-ended comment