|  |  |  |  |
| --- | --- | --- | --- |
| **Contractor:** |  | **Reporting Quarter:** |  |
|  |  |  |  |

**INITIAL CREDENTIALING: *Include data for all health providers, including oral health providers, who have completed initial credentialing within the quarter.***

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Category** | **Number of new applications received** | **Number of providers credentialed within the reported quarter** | **Shortest time (calendar days)****for determination** | **Longest time (calendar days)****for determination** | **Average time (calendar days)****for determination** |
| **Temporary/Provisional Credentialing** |  |  |  |  |  |
| **Individual Provider Credentialing** |  |  |  |  |  |
| **Organizational Provider Credentialing** |  |  |  |  |  |

**Percent Completion: *Credentialing files processed during the quarter that meets the timeframes divided by the total number of files processed during the quarter.***

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Type of Credentialing** | **Minimum performance standard (MPS)** | **Total # Processed** | **14 Days** | **60 Days** | **3 Years** |
| **Temporary/Provisional Credentialing of Individual and Organizational Providers** | 100% within 14 days |  |  | N/A | N/A |
| **Initial Credentialing of Individual Providers** | 100% within 60 days |  | N/A |  | N/A |
| **Initial Credentialing of Organizational Providers** | 100% within 60 days |  | N/A |  | N/A |

 **CREDENTIALING LOAD TIMES: *Include data for all health providers, including oral health providers, who were approved through credentialing committee*  *and loaded into the claims system during the quarter.***

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Credentialing Load Times** | **MPS** | **Total # APPROVED through Committee** | **% loaded within 30 DAYS** | **Shortest time to load provider ID in****claims system** | **Longest time to load provider ID in****claims system** | **Average length of time to load provider ID into claims system** |
| **Temporary/Provisional** | 95% within 30 days from date of Credentialing Committee approval |  |  |  |  |  |
| **Individual Providers** |  |  |  |  |  |
| **Organizational Providers** |  |  |  |  |  |

**RECREDENTIALING: *Include data for all health providers, including oral health providers, who went through the recredentialing process within the quarter.***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Category** | **Total number of providers who went through recredentialing process**  | **number of providers who were denied or terminated for recredentialing** | **number of providers who were approved for recredentialing** | **\* percent of Providers recredentialed within three years**  |
| **Individual Provider recredentialing** |  |  |  |  |
| **Organizational Provider Recredentialing** |  |  |  |  |

**\*the Contractor shall divide the number of complete recredentialing applications approved and denied timely during the time period, per category, by the number of complete recredentialing applications that were received during the time period, per category**

**COMMENTS: *(INCLUDE DESCRIPTION FOR AREAS OF NON-COMPLIANCE AND CORRECTIVE ACTIONS TAKEN)***