

# Provider Enrollment Request Cycle Time

*Benchmarks, Definition & Measurement Details*

**SAMPLE  
CONTENT & DATA**



# Provider Enrollment Request Cycle Time

Definition & Measurement Details



## What is Provider Enrollment Request Cycle Time?

The average number of days required for a health insurance company, or payer, to process a request from a healthcare provider for enrollment into their provider network, from the time the request is received by the payer until the provider has been credentialed and onboarded.

## Why should this KPI be measured?

Provider Enrollment Request Cycle Time, or turnaround time, measures the amount of time it takes for a health insurance company to enroll a new healthcare provider (e.g. dentist/physician/hospital/pharmacy, etc.)

## How is this KPI calculated?

Two numbers are used to calculate this KPI: (1) the sum of time required to complete all healthcare provider enrollments (measured from the time that the request is submitted by the provider)

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# Provider Enrollment Request Cycle Time

Benchmarks & Characteristics of High Performers



## Provider Enrollment Request Cycle Time

(Sum of Provider Enrollment Request Cycle Times) / Total Number of Provider Enrollments Completed



### Characteristics of High Performers

- KPIs are well-defined, tracked and tied to performance reviews
- Robust self-service options for customer

Sample Size: XX

KPI Type: XX

Unit: XX

Is High or Low Best?: XX

**How to read this chart:** This chart summarizes the performance gaps between high (Top 5%), mid (Median) and low (Bottom 5%) performers for this Key Performance Indicator (KPI). For example, the column labeled "Top 5%" represents a company that outperformed 95% of the peer group observed for this metric.



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