

The Credentialing Audit Checklist

Seven things to confirm this week

Work down the list. Check the box if you can answer it today with confidence. If you cannot, that line is your starting point. Assign an owner and a target date so it does not stall.

WHAT TO CONFIRM	ASSIGN IT
☐ 1 Know exactly how many providers have an active credentialing lapse You cannot manage exposure you cannot see. This is the number most organizations cannot produce on demand.	OWNER TARGET DATE
☐ 2 Verify CAQH attestation dates for every provider on your roster A lapsed 120-day attestation quietly invalidates otherwise clean applications and triggers payer rejections.	OWNER TARGET DATE
☐ 3 Confirm NPI-to-group linkages with your top five payers A missing linkage produces an out-of-network denial that often masquerades as a prior-authorization problem.	OWNER TARGET DATE
☐ 4 Check taxonomy codes against each provider's current specialty A wrong code pays every claim at a lower rate, silently, and the payer will not call to tell you.	OWNER TARGET DATE
☐ 5 Build a recredentialing calendar with 90-day lead alerts Most payers recredential every two to three years. Managed in someone's head, it walks out when they leave.	OWNER TARGET DATE
☐ 6 Define your enrollment trigger point: day zero is the offer letter At a 90 to 120 day timeline, starting late is three to four months of uncompensated care per provider.	OWNER TARGET DATE
☐ 7 Calculate your dollars-on-hold, by payer Quantifying the revenue sitting in enrollment turns an invisible problem into a business case for fixing it.	OWNER TARGET DATE

PAIR IT WITH THE SCORECARD

This checklist tells you what to fix. The Rapid Credentialing Risk Scorecard, available through your host, tells you how exposed you are right now and which fixes come first. Run the scorecard, then work this list from your weakest dimension.

Exposure check: average daily revenue per provider × days to complete enrollment = the revenue at risk for every provider you onboard.