



DC Medicaid

Attention Providers:

To start receiving ERAs electronically for DC Medicaid Blue through DentalXChange you will need to follow the instructions below. DentalXChange will notify you once the enrollment process is complete.

Payer:	DC Medicaid
Payer ID:	77033
For Enrollment Questions:	Contact the DentalXChange Enrollment Department at (800) 576-6412 ext. 461 or Enrollment@dentalxchange.com
Enrollment Application:	Provider Conduent EDI Gateway Authorization Form for Billing Agents and Clearinghouses
Email or Fax Application to:	Enrollment@dentalxchange.com Fax (800) 866-0006
Approval Process and Timeframes:	Payer estimates 10 business days from the date of submission.

4/5/23

