

## **Medicaid of Texas**

## **Attention Providers:**

To start sending your Medicaid of Texas claims through DentalXChange you will need to follow the instructions below required by the payer.

Payer:	Medicaid of Texas
Payer ID:	CKTX1
For Enrollment Questions:	Contact the DentalXChange Enrollment Department at (800) 576-6412 ext. 461 or <a href="mailto:Enrollment@dentalxchange.com">Enrollment@dentalxchange.com</a> TX Medicaid Provider Enrollment (888) 834-7226
Online Registration:	If you are not registered with Medicaid of Texas, please go to: http://www.tmhp.com/Pages/ProviderEnrollment/PE_Home. aspx  On the left side of the page select Texas Medicaid Under "How do I enroll in Texas Medicaid?" select Click Here to Activate Your Account
Special Instructions:	To ensure that your claims are processed correctly, please ensure that the following provider/office information on the THMP site is <b>identical</b> to the information you are submitting on claims through DentalXChange.  • Provider's Name (spelling must be identical)  • Address Information (all street, avenue, circle, etc. must be spelled the same as in THMP and must have a 9 digit zip code)  • Taxonomy Code – look up at <a href="http://www.wpc-edi.com/taxonomy">http://www.wpc-edi.com/taxonomy</a> )

4/20/23