



Claims Enrollment Instructions

Medicaid of Texas

Attention Providers:

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

Payer:	Medicaid of Texas
Payer ID:	CKTX1
For Enrollment Questions:	Contact the EDS Enrollment Department at (800)482-3518 or Enrollment@edsedi.com
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
Approval Process and Timeframe:	Please contact DentalXChange at (800) 576-6412, ext. 461 once your registration has been approved.
Special Instructions:	To ensure that your claims are processed correctly, please ensure that the following provider/office information on the THMP site is identical to the information you are submitting on claims through EDS. <ul style="list-style-type: none">• 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 http://www.wpc-edi.com/taxonomy