Alabama Medicaid Dental Program

How Do I Become a Medicaid Provider?

- Contact Provider Enrollment at 1-888-223-3630 or visit the Provider Enrollment page of the Medicaid website, www.medicaid.alabama.gov, under the Providers tab for instructions and forms to enroll.
- Contact Provider Enrollment at the above numbers if you have questions regarding completion of the application.
- Once Provider Enrollment has received your complete application with all required documentation, a nine-digit provider number will be issued to you. Your provider number will be effective the first date of the month in which the completed enrollment application is received.

Questions Most Frequently Asked

1. **What amount will I be reimbursed for services rendered to Medicaid recipients?**
Answer: The Dental fee schedule for covered services is found on the fee schedule page of Medicaid's website, www.medicaid.alabama.gov under the Providers tab.

2. **How do I receive payment for services rendered to a Medicaid Patient?**
Answer: Charges for services rendered to a Medicaid recipient can be submitted to HPE through the Provider Web Portal, the Provider Electronic Solution software (PES) or an ADA approved dental claim form. The software is free to all providers.

3. **If I become a Medicaid Provider, do I have to take every Medicaid patient who calls for an appointment?**
Answer: No, you as a Medicaid provider can determine the number of new patients you will accept on a weekly or monthly basis.

4. **When can I charge a Medicaid patient?**
Answer: Medicaid patients can be charged for a non-covered procedure, and for any service rendered when the patient is not eligible for Medicaid dental services

5. **How do I determine if a person is eligible for Medicaid Dental Services?**
Answer: Eligibility information can be obtained by calling the Automatic Voice Response System (AVRS) at 1-800-727-7848 or by submitting an eligibility verification request though the Provider Electronic Solution software (PES) online from your personal computer. In general, children less than 21 years old who are eligible for regular Medicaid services are covered for dental services.