



Tips for Enrolling in HUSKY/Medicaid

- You can enroll by going on line and downloading an application or you can call EDS directly and request an application. You may also choose to enroll on-line with an “Enrollment Wizard”. The website is www.ctdssmap.com.
- The application form itself is eight pages long. The contract you need to sign is 32 pages long including the pages with the instructions on how to fill out the forms. The documentation required to enroll is:
 - Completed and signed Enrollment/Re-enrollment Form, followed by pages 2-6;
 - Signed Provider Enrollment Agreement;
 - Completed W-9 Form;
 - Completed Determination of Separate Practice Location Form (if applicable);
 - Completed Electronic Funds Transfer (EFT) Form;
 - Complete Addendum to Provider Enrollment Agreement Concerning the Acceptable Use of Electronic Signatures;
 - Completed and signed Affidavit Re: Section 6032 of the Deficit Reduction Act (applicable if the practice income is 5 million dollars or greater from a Title XIX Program in the previous FEDERAL Fiscal Year).

To Enroll On-line:

- On the website, www.ctdssmap.com, go to the “**Provider**” box and scroll down to “**Enrollment**”, click on enrollment and an enrollment wizard will walk you through the information needed. Please note, you should review materials needed to enroll before beginning the process. *Once you begin the enrollment process, you cannot save the information and return to it at a later date.*
- For information describing the types of documentation that is needed to enroll as a provider choose “**Provider**” a drop down box will appear, click on **Provider Matrix** and scroll down and choose “**Enrollment Requirements for Dental Providers**”.

To Enroll Using a Hard Copy:

- On the website, www.ctdssmap.com, click on “**Information**” and a drop down box will give the option “**Publications**”. Choose this option, and then scroll down the page to the “**Forms**” section. Continue to scroll down the list to “**Other Forms**” and click on “**Enrollment Package for Dental Providers**” (or other dental classifications as the selection may apply to you).

To enroll as a provider in a Group Practice:

- For group practices, this means the Provider Enrollment Unit at EDS must also enter an enrollment/re-enrollment application not only for the group practice, but for each individual participating member of the group who wishes to deliver dental services.
- When individual providers are enrolled under a group practice, they are enrolled in a “group member only status” sometimes called a “performing provider” instead of an active status sometimes called “enrolled provider”.

To enroll as an individual in a Group Practice:

- A completed enrollment/re-enrollment packet with all supporting documentation for the group;
- A Master provider agreement for the entire group that is completed and signed by the group’s chief executive officer;

- If the provider is not currently enrolled in the Connecticut Medical Assistance Program, a fully complete enrollment packet must be completed for each new member of the group (with the exception of the EFT form);
- If the existing provider is already enrolled in the Connecticut Medical Assistance Program, a provider agreement must be signed by that provider and the enrollment form (page 1) needs to be completed.

The Deficit Reduction Act Form

The “Deficit Reduction Act” is federal legislation which went into effect January 1, 2007. The Act informs any “entity” (private, governmental, non – profit, business, provider etc) performing or supplying any service AND/OR goods under Title XIX totaling \$5.0 million in the most recent federal fiscal year (October 1 through September 30) must complete this form including an Affidavit where the entity attests that it has read and understands the Deficit Reduction Act. The Deficit Reduction Act requires an employer who meets the \$5.00 million threshold to establish written policies for all employees or any agent of the entity describing the False Claims Act detailing policies and procedures for detecting and preventing waste, fraud and abuse. This description is a synopsis, for more complete and additional information, please see Policy Bulletin 2007-4 available at www.ctdssmap.com.

Taxonomy Codes

Taxonomy refers to the national classification system for providers. The dental codes are:

General Practice Dentist	1223G001X	Oral & Maxillofacial Surgeon	1223S0112X
Hygienist	124Q0000X	Orthodontist	1223X0400X
Endodontist	1223E0200X	Pedodontist	1223P0221X
Oral & Maxillofacial Pathologist	1223P0106X	Public Health	1223D001X
Oral & Maxillofacial Radiologist	1223D008X	Prosthodontist	1223P0700X
		Periodontics	1223P0300X

Other Tips

- License information for Connecticut providers will be obtained on-line by EDS from the State.
- The packet refers to the ‘Provider Matrix’ which is just a list of all of the forms which is located elsewhere on the website.
- It should take 30 to 45 days for EDS to process the forms, once submitted, assuming a ‘clean’ application.
- The biggest reason for delay is submission of incomplete forms. Take your time and ask for help if you are not sure. Otherwise there will be significant delay when they return the forms for the needed information.
- On page 12 of the packet, which is the last page of the “Provider Enrollment Agreement”, leave the three spaces that refer to the dates of the agreement blank. EDS will fill them in when they sign it.
- Don’t forget to make a copy for your records.

To Get Help

Information is available on the website www.ctdssmap.com

Or call EDS Provider Relations:

1-800-842-8440 (toll free in-state) or 860-269-2028 (in the Farmington area)
Monday through Friday, 8:00 a.m. to 4:30 p.m.

Additional information is available on the Connecticut State Dental Association website: www.csda.com

If you have suggestions for additional ‘tips’ please forward them to martym@ctoralhealth.org.