Network Notification – KY Provider Reminder

To: Kentucky Medicaid Dental Providers
From: DentaQuest
Subject: Reminder: Claim Submission Requirements
Date: August 1, 2025

DentaQuest would like to take this opportunity to remind you we require that all Medicaid providers and entities rendering services in the State of Kentucky are properly enrolled with the Kentucky Department for Medicaid Services (DMS).

All claims submitted require that all information related to billing, rendering, ordering, referring, prescribing, and attending providers be enrolled with Kentucky DMS.
Providers should submit claims in a manner that matches the data on the Kentucky DMS Master Provider List.

For additional information on how to enroll with Kentucky DMS, please visit the Kentucky Cabinet for Health and Family Services' New Enrollment, Revalidation or Maintenance page.

Thank you for choosing to participate in the Kentucky Medicaid Program. DentaQuest along with our health plans appreciate your interest and welcomes the opportunity to work with you to provide dental services to Kentucky Medicaid members.

Policies Reminder

Participating practice shall comply with all policies and procedures of DentaQuest and Plan including proper billing requirements and payment policies.

If you are presently submitting claims to DentaQuest through a clearinghouse or through a direct integration, please review your integration often to confirm compliance with Medicaid enrollment requirements.

Reporting accurate, timely and complete encounters begins with capturing the full set of required provider claims data to align with state's encounters requirements.

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Important Claim Information and Validation Process:

Claim rejection/denial will occur if the Rendering or Billing Provider cannot be uniquely identified by matching the NPI and taxonomy code in the claim transaction to a specific Medicaid Provider ID and provider type in the enrollment records.

All provider information included on claim submissions must match the provider information associated with your Kentucky Medicaid identification number.

Check to make your claim submissions match what the Kentucky Department for Medicaid Services (DMS) has on the Provider Master List for both the billing and rendering provider.

- Ensure Individual and/or Group National Provider Identifier (NPI) are active.
- Ensure Taxpayer Identification Number (TIN), Social Security Number (SSN), Employer Identification Number (EIN), or Individual Taxpayer Identification Number (ITIN) are listed.
- Ensure Rendering and Billing Taxonomy Codes are listed and accurate.
- Ensure that the 9-digit zip code on the claim matches the Provider Master List and USPS standardization.
- Make sure format and spelling of the service location on the claim form is an exact match to the PML.

If the provider information included on claims is not listed or does not match with the Kentucky Department for Medicaid Services, DentaQuest reserves the right to withhold or recover payments.

Validation

To validate and update your provider information with the Kentucky Department of Medicaid Services, please contact Provider Enrollment (DMS) at 877-838-5085.

All provider applications (new enrollment, revalidations, and maintenance items) are now completed using the KY Medicaid Partner Portal Application (ky.gov).

To validate your provider information with DentaQuest please contact us at 800-508-6787> or your local DentaQuest Provider Engagement Team at KentuckyProviders@DentaQuest.com

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