

Individual Provider Enrollment Checklist – Dental Providers

Use this checklist to determine which items are needed for a clean application based on your specialty type. The shaded areas indicate what is required.

Checklist Items	Oral Surgery	Routine
Provider Enrollment Application		
Copy of SC Medical or Practice License		
Drug Enforcement Administration (DEA) Certification*		
Current Copy of Malpractice (Min. \$1M/\$3M)		
Authorization to Bill for Services		
Signed Contracts	Footnote 1	Footnote 2
Professional Training		
Hold Harmless**		
Appendix D**		
Medicaid ID Number***		

*Only if applicable.

¹Medical contract, dental contract, or both.

**Only if applying for BlueChoice® HealthPlan.

²Dental contract only.

***Only if applying for Healthy BlueSM.