BENEFIT MANAGER TOOLKIT®

Client

A cutting-edge tool to simplify your life.

You can update your group's eligibility online, real time, using our Web-based tool called Benefit Manager Toolkit (BMT). You can enroll a new member, update existing members, or simply view eligibility. You can view your benefits, print dentist directories, and access flexible and convenient reports (if your group qualifies for reports).

In addition, you have control over your company's accounts. Select a Client Administrator within your company using the form below. This administrator will be able to set up and maintain your BMT accounts, enabling immediate access for your users.

Streamline your benefits management process using Benefit Manager Toolkit!

- Get **real-time** benefit and eligibility information, without a phone call
- Take control of your group's eligibility – enter, edit, and terminate member eligibility immediately…no wait time
- Download dentist directories in a printable format
- View your billing details
- Create BMT accounts for your company, maintain security levels for your users, and disable accounts when roles change or the person leaves your company

NOTE: The BMT Administrator must be an employee of the client/group

Please complete the following information to name your company's Benefit Manager Toolkit administrator:

NOTE: If your company already has a BMT admin set up, only use this form to replace that admin, otherwise please see your admin for access.

Client Information		
CHECK ☐ MICHIGAN ☐ OHIO ☐ INDIANA ☐ NORTH CAROLINA		
CLIENT NAME	CLIENT NUMBER	SUBCLIENT NUMBERS

Administrator Information	
NAME	TITLE
EMAIL	PHONE NUMBER

Delta Dental will send your administrator an email with registration information and further instructions.

Please forward your completed BMT form to your account manager, or to the appropriate mailbox below:

Michigan: OKSalesAdmin@deltadentalmi.com
Indiana: SmallMarket@deltadentalin.com
Ohio: SmallMarket@deltadentaloh.com
North Carolina: ClientServices@deltadentalnc.com

Internal

☐ **Authorized** _____