

Dentist Connection

Connecting with Delta Dental of Illinois is easy!

If you currently do not have an account to access the Delta Dental Dentist Connection, you will need to register by following the steps below. Delta Dental recommends that each person in your office has their own username and password to access the secure site.

How to Register:

1) Go to deltadentalil.com, select "Dentist" in the "My Account Log In" box located on the right side of the homepage. On the next page click "Don't have an account? Create an account." Select "I am either a dentist or associated with a dentist" on the next screen.



- 2 To register, follow the prompts and enter the following information.
 - a. Business Tax ID Number (no dashes)
 - b. Business City
 - c. Business Zip
 - d. Dentist First Name. You must enter the name that Delta Dental has on file based on the information you provided (your state's Dental Board/Regulation Department). Please note there is a 10-character limit for first name. For example, if your first name is Christopher, you are limited to Christophe for first name.
 - e. Dentist Last Name. Note that there is a 15-character limit for last name.
 - f. License ID (No dashes, no "A" or "O" before number CORRECT entry would be: 19012345; INCORRECT entries would be 0190-12345 or A19012345.)
 - g. License State

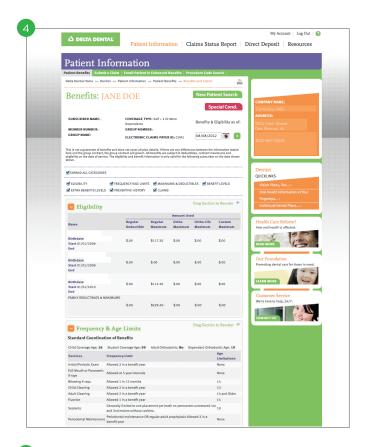
Please note: The information that you enter must match what Delta Dental has on file. The most common mismatched information is the dentist's license ID. Do not use the zero or A preceding the license number.

3 You will then be prompted to select your User ID and Password.

Find your Delta Dental		Sign in/Regist
Dentist registrati		
Please enter your information in the reg having difficulty registering.	gistration form below. Required fields are indicated with an	asterisk (*). Contact us if you are
Enter the name of the person completi	ing this registration form.	
Enter the name of the person completi	ing this registration form. Lost Name*	
First Name*		
First Name*	Last Name* his will be used to determine your office location for mailing purposes.	
First Name*	Last Name*	
First Name* Eater information about your office. The	Last Name* his will be used to determine your office location for mailing purposes.	

How to Register (cont.):

4 Access benefit and eligibility information for your Delta Dental patients. We no longer provide benefits and eligibility information via customer service since everything you need is in Dentist Connection.



5 Check the status of a claim or view all claims submitted within a specific date range.



6 Enroll in direct deposit and receive weekly deposits directly into your bank account.

