A DELTA DENTAL°

Access For Brokers

Broker Services Portal

Streamline your benefits management process using the Broker Services Portal (BSP)!

- Easily manage your client's eligibility view, enter, edit, and cancel member eligibility in realtime.
- Access your client's billing details and large client utilization reports.
- Assign Broker Services Portal users for your company, maintain security levels for your users, and disable accounts when roles change or a delegated user leaves your organization.

Select a Super User within your company using the form below. This Super User will be able to set up and maintain your BSP accounts, enabling immediate access for your users. (Each licensed agent may select an individual Super User or delegate one Super User for multiple agents)

New Broker Super User Access Request

Update to Existing Broker Super User Access

| Agency Information | | | | |
|--|----------------------------|--------------|--|------|
| AGENCY NAME | | AGENCY TIN | | |
| | | | | |
| Broker Super User Information | | | | |
| NAME | | TITLE | | |
| | | | | |
| EMAIL | | PHONE NUMBER | | |
| | | | | |
| Licensed Agent Authorization | | | | |
| Note: This form must be signed by the Licensed Agent(s) within your organization to delegate access to the clients accounts corresponding to the Licensed Agent(s) listed below. Signatures signify that you are authorized by our mutual clients to access and perform administrative services on their behalf. | | | | |
| LICENSED AGENT'S NAME | LICENSED AGENT'S SIGNATURE | NPN # | | DATE |
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Delta Dental of Minnesota will send your delegated Super User an email with further registration information and instructions. Please send completed form to:

Broker Super User @Delta Dental MN.org

If you have any questions, please contact the Portal Support Team at 1-866-398-9480.

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OBLIGATIONS: Agency Administrator acknowledges the confidential nature of billing, enrollment or subscriber information included in the Broker Services Portal (BSP) and that such information includes Protected Health Information (PHI) as that term is defined by the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Agency Administrator agrees to do the following:

- a) Use and disclose the information provided through the BSP, including PHI, in compliance with all applicable law and regulations including but not limited to HIPAA;
- **b)** Notify all employees who have access to billing or enrollment information of the necessity to maintain the confidentiality of such information and to comply with applicable confidentiality laws;
- **c)** Ensure that only those individuals who require access to BSP to administer the plan functions are delegated access;
- **d)** Utilize the BSP and any PHI in accordance with Agent's Business Associate Agreement with the Client and Delta Dental of Minnesota and/or DDMN ASO, LLC

TERMINATION: This agreement shall continue in effect until Agency Administrator ceases using the BSP or terminates his or her agent relationship with the client.