



Payment reconciliation in Provider Tools

When you enroll in electronic funds transfer (EFT), payments are deposited directly into your bank account with the provider claim statements (digital remittance advice) posted the same day to **My payments** in Provider Tools, making reconciliation seamless. In **My payments**, you can access and view payment information, review claim statements and open remittance advice. Documents are safely stored online and are easy to access and print at any time.

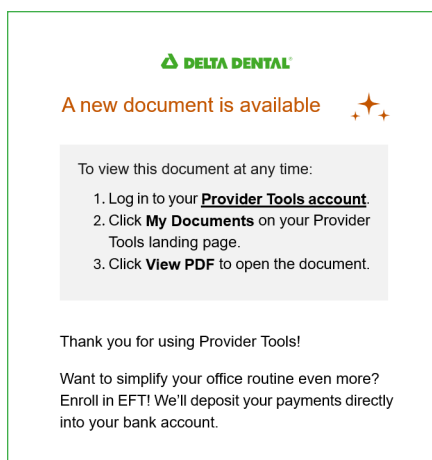
Payment reconciliation is streamlined with a clear, centralized view of payments and remittances, helping reduce administrative effort and save time.

Not enrolled in EFT? You can still view your claim statements in Provider Tools with **My payments** before enrolling.

Follow these steps to reconcile your payments in **My payments**.

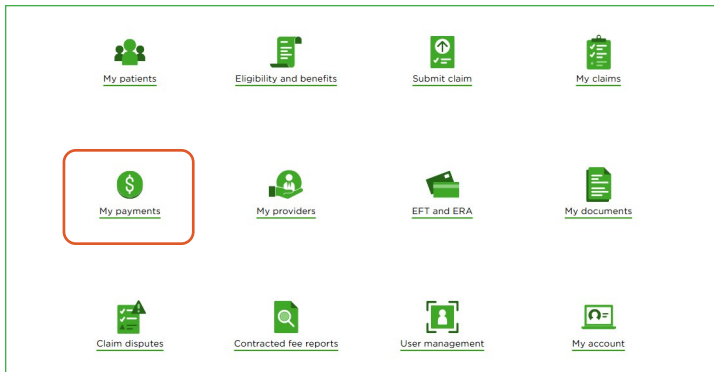
1

You'll receive an email notification at the practice location email on file when a new payment document is available.



2

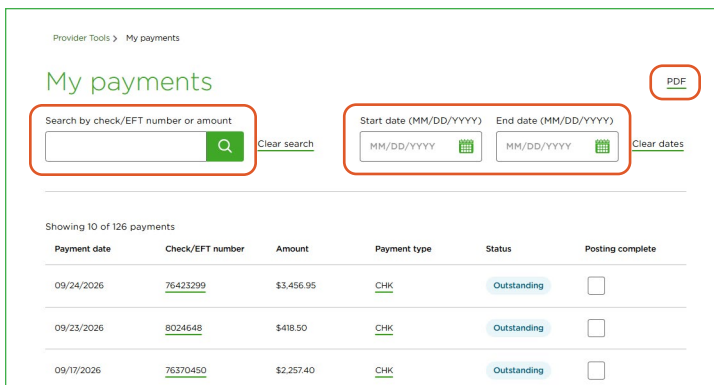
Log in to your **Provider Tools** account and select **My payments**.



3

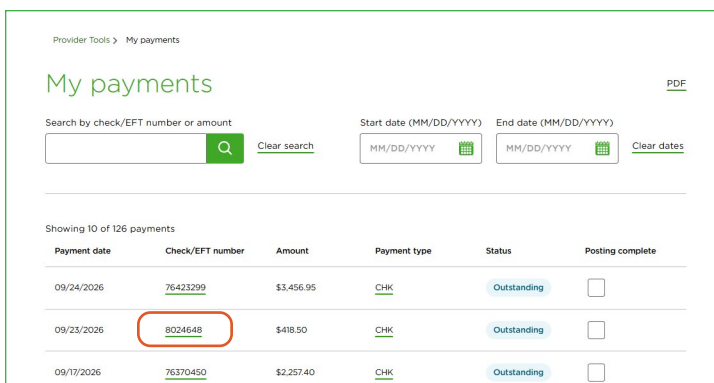
Search for the payment you would like to reconcile on the **My payments** page. You can search for a payment using the check/EFT number or payment amount, or filter by payment date.

To print or save the entire page, select **PDF**.



4

To view payment details for a specific payment, select the number in the **Check/EFT number** column to open the claim information summary.



To return to the previous page, select the **My payments** link.

Provider Tools > **My payments** > Claim information summary

Claim information summary
for Check Reference: 76370450 dated 09/17/2026 [PDF](#)

Showing 10 of 13 claims

Patient name	Enrollee ID number	Claim number	Date of service	Patient pays	Delta Dental pays
Michelle H	22191911999	20262535120596	09/10/2026	\$0.00	\$221.00
DEREK G	114311911999	20262535119930	09/10/2026	\$0.00	\$145.00
Avis R	113011911999	20262535119784	09/10/2026	\$0.00	\$221.00

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To view remittance advice for a specific payment, select link under the **Payment type** column.

Provider Tools > My payments

My payments [PDF](#)

Search by check/EFT number or amount [Clear search](#) [Q](#)

Start date (MM/DD/YYYY) [Clear dates](#) End date (MM/DD/YYYY) [Clear dates](#)

Showing 10 of 126 payments

Payment date	Check/EFT number	Amount	Payment type	Status	Posting complete
09/24/2026	76423299	\$3,456.95	CHK	Outstanding	☐
09/23/2026	8024648	\$418.50	CHK	Outstanding	☐
09/17/2026	76370450	\$2,257.40	CHK	Outstanding	☐

The remittance advice will open in a new window. You can save this file for your records.

 **DELTA DENTAL**

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40 S SEPULVEDA BLVD STE 2
LOS ANGELES CA 90045-3528

September 17, 2026

Plan administered by:
Delta Dental of California
P.O. Box 997330
Sacramento CA 95899-7330

CAN WE HELP?
Visit our website:
[deltadentalins.com](#)
Call Customer Service: 888-335-8227
TDD/TTY: 800-735-2922
Mon to Fri 8 a.m. to 8 p.m. Pacific Time

► Check Number: 0076370450
PORT DENTAL INC
Tax ID number: XXXXXX3966

Summary of your claim payment

Total amount processed in this statement	\$2,257.40
Interest paid	\$0.00
Less any adjustments	\$0.00
Amount paid by check attached	\$2,257.40