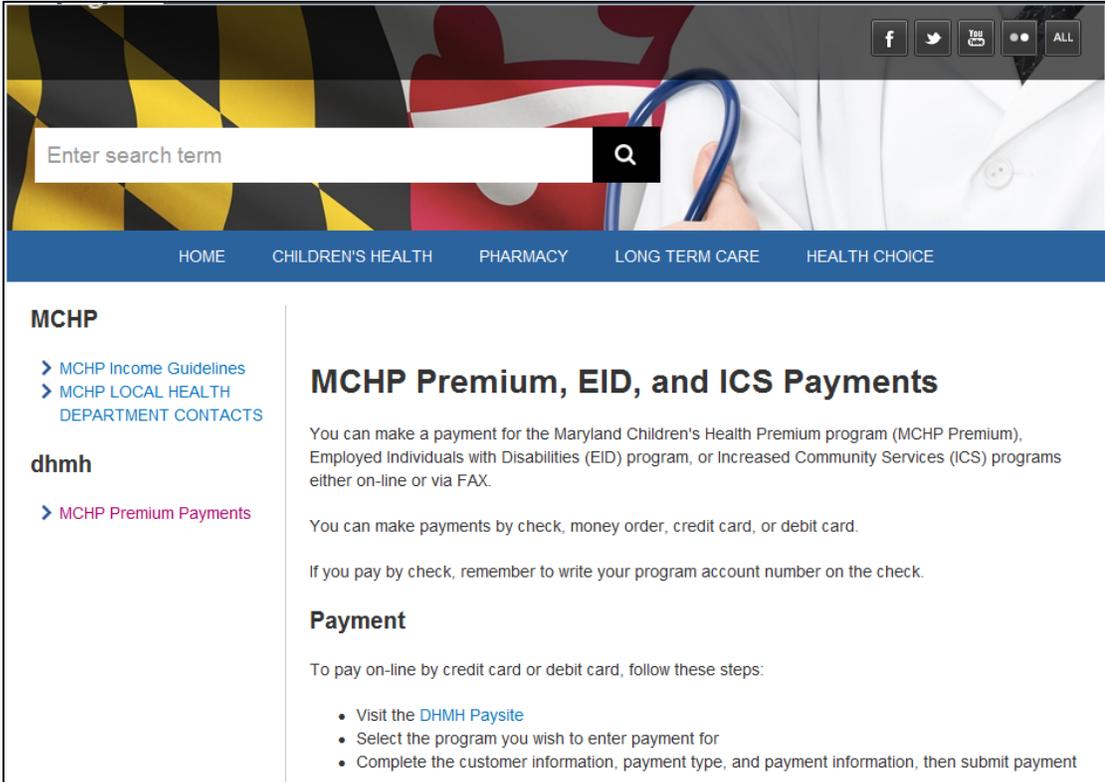
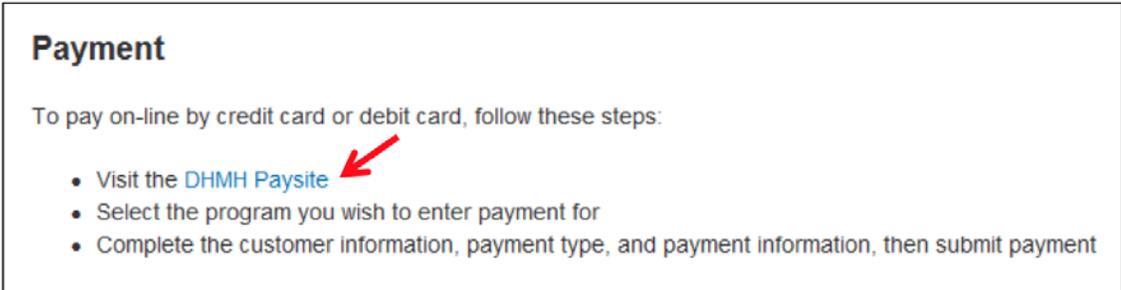




## MCHP Premium, EID Premium and ICS – Making an On-Line Credit/Debit Card Payment

To make an MCHP Premium, EID Premium or ICS monthly payment via computer, phone or tablet.

Step	
1	<p>Go to <a href="http://dhmh.maryland.gov/payments">http://dhmh.maryland.gov/payments</a>. You'll be taken to this website:</p>  <p><b>MCHP</b></p> <ul style="list-style-type: none"><li>&gt; <a href="#">MCHP Income Guidelines</a></li><li>&gt; <a href="#">MCHP LOCAL HEALTH DEPARTMENT CONTACTS</a></li></ul> <p><b>dhmh</b></p> <ul style="list-style-type: none"><li>&gt; <a href="#">MCHP Premium Payments</a></li></ul> <h3>MCHP Premium, EID, and ICS Payments</h3> <p>You can make a payment for the Maryland Children's Health Premium program (MCHP Premium), Employed Individuals with Disabilities (EID) program, or Increased Community Services (ICS) programs either on-line or via FAX.</p> <p>You can make payments by check, money order, credit card, or debit card.</p> <p>If you pay by check, remember to write your program account number on the check.</p> <h4>Payment</h4> <p>To pay on-line by credit card or debit card, follow these steps:</p> <ul style="list-style-type: none"><li>• Visit the <a href="#">DHMH Paysite</a></li><li>• Select the program you wish to enter payment for</li><li>• Complete the customer information, payment type, and payment information, then submit payment</li></ul>
2	<p>Click on the link to make a credit card payment:</p>  <h3>Payment</h3> <p>To pay on-line by credit card or debit card, follow these steps:</p> <ul style="list-style-type: none"><li>• Visit the <a href="#">DHMH Paysite</a></li><li>• Select the program you wish to enter payment for</li><li>• Complete the customer information, payment type, and payment information, then submit payment</li></ul>



### MCHP Premium, EID Premium and ICS – Making an On-Line Credit/Debit Card Payment

3 You'll be taken to this secure website

Transaction Item	Unit Price	Quantity	Amount
EID Payment	\$ 0	1	\$ 0.00
* Account Number			
* Name on account			
<a href="#">Add Another Item</a>		TOTAL ▶	\$ 0.00

[Next >](#)

[Submit Payment](#)

4 Select your Program (MCHP, EID, ICS) from the transaction item menu

Select Transaction Item(s)

Transaction Item

EID Payment

EID Payment

ICS Payment

MCHP Payment



### MCHP Premium, EID Premium and ICS – Making an On-Line Credit/Debit Card Payment

#### 5 VOCABULARY FOR THIS SITE:

**TRANSACTION ITEM = PROGRAM, UNIT PRICE = AMOUNT YOU OWE, QUANTITY = MONTHS**

Enter the amount of your payment (Unit Price), how many months you are paying (Quantity), the account number and the name on the Program account. The name on the account may not be the name of the person making the payment.

**IMPORTANT NOTE: Your account number is 9 digits. Make sure you copy it completely.**

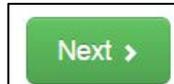
Click next to go to the Information screen



#### 6 Fill in all information for this screen: Name, Address, City, State, Zip code, Phone Number and Email Address. When you complete the transaction a copy of your receipt will automatically be sent to the email address.

**IMPORTANT NOTE: Any information item with a \* is a required field.**

Click Next to go to Payments





## MCHP Premium, EID Premium and ICS – Making an On-Line Credit/Debit Card Payment

7 This screen will confirm your information

The screenshot shows a payment confirmation interface with a progress bar at the top indicating five steps: 1. Select Item(s), 2. Information, 3. Pay Type, 4. Payment, and 5. Submit Payment. The current step is 'Payment'. The main content area is divided into three sections: 'Select Transaction Item(s)', 'Customer Information', and 'Payment Type'. The 'Select Transaction Item(s)' section contains a table with one item: 'MCHP Payment' with a price of \$53.00 and a quantity of 1. The 'Customer Information' section displays the user's address, phone number, country, and email address. The 'Payment Type' section has a dropdown menu set to 'Select Payment Type...'. A 'Next >' button is located at the bottom right of the form. A 'Transaction Summary' box in the top right corner shows 'MCHP Payment \$53.00' and 'Total \$53.00'. A 'Submit Payment' button is at the bottom center.

Transaction Item	Price	Quantity	Total
MCHP Payment	\$ 53.00	1	\$ 53.00

Customer Information

Address: Margaret Domaine, 1354 W. Anystreet, Apt. 4, Baltimore, MD 21200  
Phone Number: 410-123-4567  
Country: United States  
Email Address: mdomaine@gmail.com

Payment Type: Select Payment Type... [Next >]

Payment Information: [Submit Payment]

8 On that screen, click on the Select Payment Type menu and choose Credit Card. Use this option also if you are paying with a Debit Card.

This close-up screenshot shows the 'Payment Type' section. The dropdown menu is open, displaying three options: 'Select Payment Type...', 'Select Payment Type...', and 'Credit Card'. The 'Credit Card' option is highlighted in blue. A 'Next >' button is visible to the right of the dropdown.

Click the Next Button





## MCHP Premium, EID Premium and ICS – Making an On-Line Credit/Debit Card Payment

### 9 Enter your credit card information

**Payment Information**

Credit Card Type \*  
Select a Card

Name on Card \*  
[Text Field]

Credit Card Number \*  
[Text Field]

Security Code \*  
[Text Field]  
[What is this?](#)

Expiration Date  
01 - January [Green Checkmark] 2016 [Green Checkmark]

Payment Address is the same as Customer Address

[Next >](#)

[Submit Payment](#)

Select which card you are making the payment with:

**Payment Information**

Credit Card Type \*  
Select a Card  
Select a Card  
Visa  
Master Card  
Discover  
American Express

Enter your credit/debit card information

**Payment Type** [Edit](#)

**Credit Card**

**Payment Information**

Credit Card Type \*  
Master Card [Green Checkmark]

Name on Card \*  
Margaret Domaine [Green Checkmark]

Credit Card Number \*  
4111111111111111 [Green Checkmark]

Security Code \*  
999 [Green Checkmark]  
[What is this?](#)

Expiration Date  
03 - March [Green Checkmark] 2018 [Green Checkmark]

Payment Address is the same as Customer Address

[Next >](#)



## MCHP Premium, EID Premium and ICS – Making an On-Line Credit/Debit Card Payment

The Security Code is the 3-digit number on the back of the card:



Click the box if the person who is making the payment has the same address as the person on the Program account.

Payment Address is the same as Customer Address

Click next after all Credit/Debit Card information is filled in.

[Next >](#)

10 The next screen will confirm all the information: Transaction Summary (Program and Payment), Account Number and Name on Account, Customer Information and Credit Card information.

Transaction Item	Price	Quantity	Total
MCHP Payment	\$ 53.00	1	\$ 53.00

Account Number: 123456789  
Name on account: Janice Domaine

**Transaction Summary**

MCHP Payment	\$53.00
<b>Total</b>	<b>\$53.00</b>

**Customer Information** [Edit](#)

Address: Margaret Domaine, 1354 W. Anystreet, Apt. 4, Baltimore, MD 21200  
Phone Number: 410-123-4567

Country: United States  
Email Address: mdomaine@gmail.com

**Payment Type** [Edit](#)

Credit Card

**Payment Information** [Edit](#)

Credit Card: \*\*\*\*\*1111, Exp. 03/2018  
Name on Card: Margaret Domaine

[Submit Payment](#)

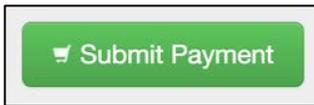


MCHP Premium, EID Premium and ICS – Making an On-Line Credit/Debit Card Payment

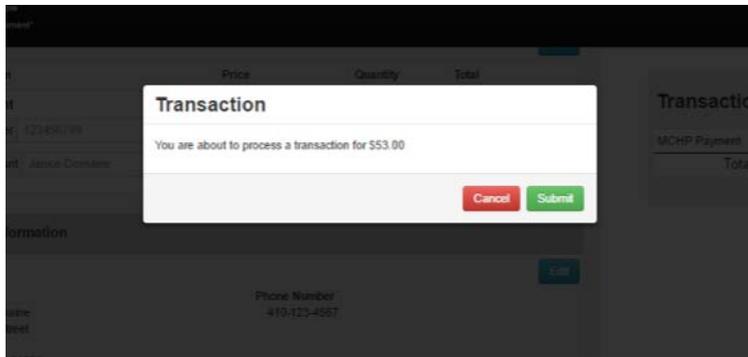
Click the Edit button if you need to change any information in any section.



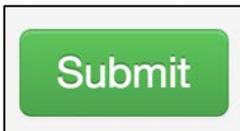
Click Submit Payment if all information is correct.



11 Before the payment is processed you have one more opportunity to start over.



If you are ready to make the payment, click Submit:





MCHP Premium, EID Premium and ICS – Making an On-Line Credit/Debit Card Payment

12 When the payment is accepted you will see this page.

[Go Back](#) [Print](#)



Maryland Department of Health and  
Mental Hygiene

Children's Health Program  
Payment Receipt



YOUR RECEIPT  
**DHMH Maryland Children's Health Program**  
 201 W. Preston Street  
 Baltimore MD 21201  
 (410)767-6500  
 Transaction Id: 368738

Status: **APPROVED**  
 Customer Name: Margaret Domaine  
 Type: Visa  
 Credit Card Number: \*\*\*\* \* 1111

**Maryland2 total amount charged** USD\$53.00

Items	Location	Quantity	Order ID	Total Amount
MCHP Payment		1	17226412	\$53.00

Account Number: **123456789**  
 Name on account: **Janice Domaine**

Total remitted to the DHMH Maryland Children's Health Program	\$53.00
---	---------

Your bank statement will reflect a charge from MARYLAND GOVPAY

You can print a copy for your records by clicking on the

[Print](#)

button in the upper right corner.

**IMPORTANT NOTE: If you entered an email address with the information this receipt was automatically sent to that address.**

By clicking

[Go Back](#)

You'll be taken to the front page again.

13 **PAYMENT IS MADE, ACCEPTED AND COMPLETE**