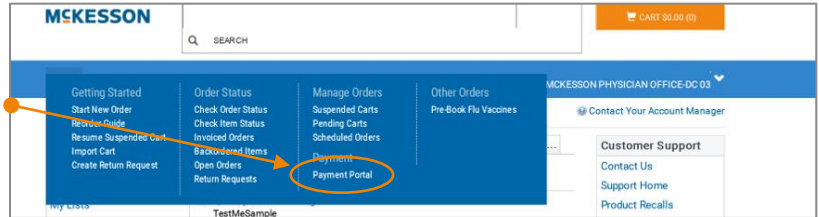




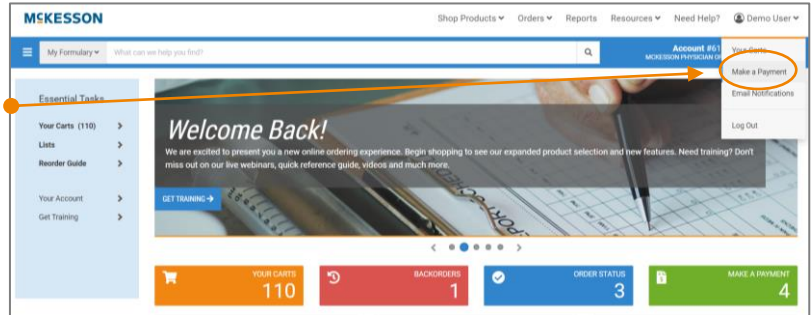
Payment Portal Access

1. Once you have **logged into McKesson SupplyManager**, you will see this screen or the screen below depending on your homepage. Click on **'Orders'** on the toolbar.
2. Click on **'Payment Portal'**

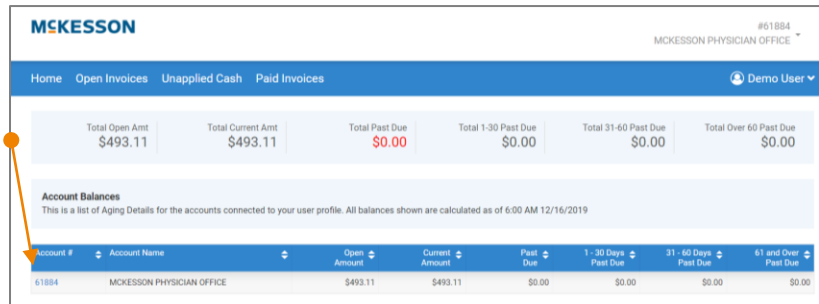


Or you may see the screen below based on your homepage

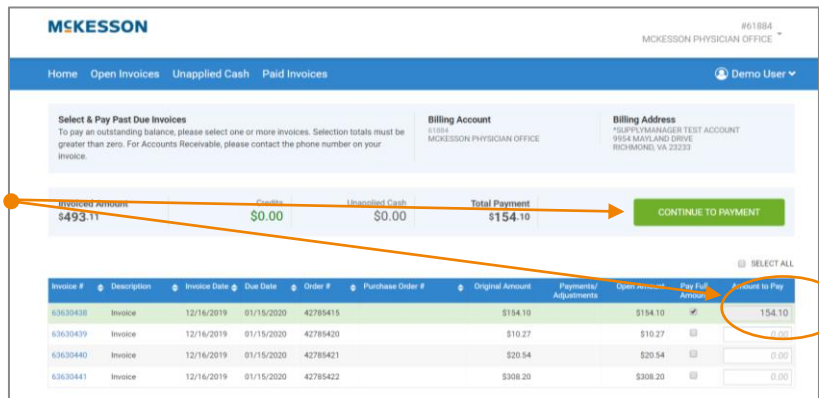
1. Once you have **logged into SupplyManager**, if this is the screen you see, click on **'Make a Payment'** on the toolbar.



3. Once in the **'Payment Portal'**, it brings you to the **'Aging Details'**
4. From here, you can click on **your account** to see your invoices (you can also click on the **'Open Invoices'** link on the toolbar to get to the same screen)



5. From here, you can pay an invoice in full by selecting the checkbox **'Pay Full Amount'** and it will enter the full amount in the **'Amount to Pay'** or hit **'Select All'** to pay all open invoices
6. You can also choose to **'Short Pay'** by entering the amount you want to pay in the **'Amount to Pay'** – will illustrate this on the next page
7. Click **'Continue to Payment'** to pay the invoice



You can click on any of the arrows in the blue headings to sort differently



- 8. To 'Short Pay' simply put in the amount you want to pay in the 'Amount to Pay' box
- 9. Click 'Continue to Payment'

MCKESSON #61884 MCKESSON PHYSICIAN OFFICE

Home Open Invoices Unapplied Cash Paid Invoices Demo User

Select & Pay Past Due Invoices
To pay an outstanding balance, please select one or more invoices. Selection totals must be greater than zero. For Accounts Receivable, please contact the phone number on your invoice.

Billing Account
#1984 MCKESSON PHYSICIAN OFFICE

Billing Address
*SUPPLYMANAGER TEST ACCOUNT
9954 MAYLAND DRIVE
RICHMOND, VA 23233

Invoiced Amount: \$493.11 Credits: \$0.00 Unapplied Cash: \$0.00 Total Payment: \$100.00 **CONTINUE TO PAYMENT**

Invoice #	Description	Invoice Date	Due Date	Order #	Purchase Order #	Original Amount	Payments/Adjustments	Open Amount	Pay Full Amount	Amount to Pay
63630438	Invoice	12/16/2019	01/15/2020	42785415		\$154.10		\$154.10	<input type="checkbox"/>	100.00
63630439	Invoice	12/16/2019	01/15/2020	42785420		\$10.27		\$10.27	<input type="checkbox"/>	0.00
63630440	Invoice	12/16/2019	01/15/2020	42785421		\$20.54		\$20.54	<input type="checkbox"/>	0.00
63630441	Invoice	12/16/2019	01/15/2020	42785422		\$308.20		\$308.20	<input type="checkbox"/>	0.00

- 10. Click on the drop-down box to select the reason you are choosing to Short Pay
- 11. Enter comments in the text box
- 12. Click on 'Continue to Payment'

MCKESSON #61884 MCKESSON PHYSICIAN OFFICE

Home Open Invoices Unapplied Cash Paid Invoices Demo User

Invoiced Amount: \$493.11 Credits: \$0.00 Unapplied Cash: \$0.00 Total Payment: \$100.00 **BACK** **CONTINUE TO PAYMENT**

Review **Short Pay** *Payment* *Complete*

Enter Short Pay Reason

Please provide a reason as to why you are choosing not to pay the full invoice amount.

Invoice #	Description	Open Amount	Amount to Pay	Difference	Reason	Comments
63630438	Invoice	\$154.10	\$100.00	\$54.10	Product Returned	Didn't need the product

Reason dropdown menu options:
 Select One
 Freight & Handling
 Product Damaged
 Product Returned
 Product Quantity Incorrect
 Incorrect Purchase Order
 Paid Previously
 Incorrect Price
 Tax Rate Incorrect
 Item is Non-taxable
 Other

- 13. Click on the 'Payment Method' drop down box to select choose your payment method

MCKESSON #61884 MCKESSON PHYSICIAN OFFICE

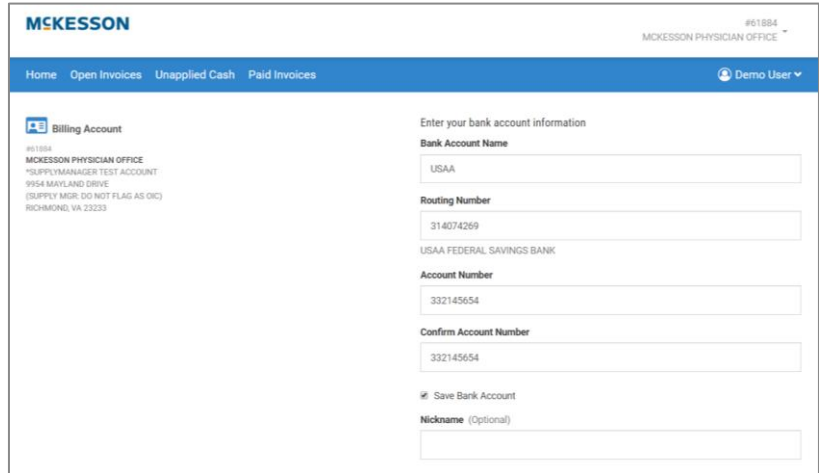
Home Open Invoices Unapplied Cash Paid Invoices Demo User

Invoiced Amount: \$38.04 Credits: \$0.00 Unapplied Cash: \$0.00 Total Payment: \$38.04 **BACK** **MAKE PAYMENT**

Review *Payment* **Complete**

Payment Methods:
 Add a payment method

Billing Account
 #61884
 MCKESSON PHYSICIAN OFFICE
 *SUPPLYMANAGER TEST ACCOUNT
 9954 MAYLAND DRIVE
 (SUPPLY MGR. DO NOT FLAG AS DIC)
 RICHMOND, VA 23233



MCKESSON #61884
MCKESSON PHYSICIAN OFFICE

Home Open Invoices Unapplied Cash Paid Invoices Demo User

Billing Account

#51184
MCKESSON PHYSICIAN OFFICE
*SUPPLY MANAGER TEST ACCOUNT
9954 MAYLAND DRIVE
(SUPPLY MGR; DO NOT FLAG AS OIC)
RICHMOND, VA 23233

Enter your bank account information

Bank Account Name
USAA

Routing Number
314074269
USAA FEDERAL SAVINGS BANK

Account Number
332145654

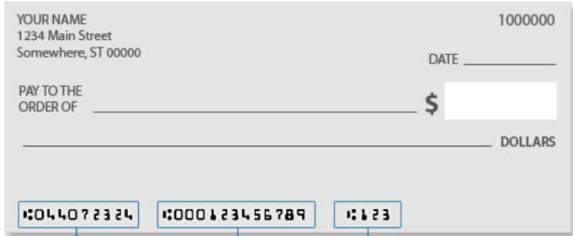
Confirm Account Number
332145654

Save Bank Account

Nickname (Optional)

- 14. Enter your **bank account** (or **credit card** if you selected to pay by credit card) information in the text fields
- 15. Scroll down to see the remainder of the page to **accept the payment conditions**

Bank Routing and Account Numbers are located across the bottom of each check.



YOUR NAME
1234 Main Street
Somewhere, ST 00000 1000000

DATE _____

PAY TO THE ORDER OF _____ \$ _____ DOLLARS

⑆044072324 ⑆000123456789 ⑆123

Routing Number Account Number Check Number

ACH Customers

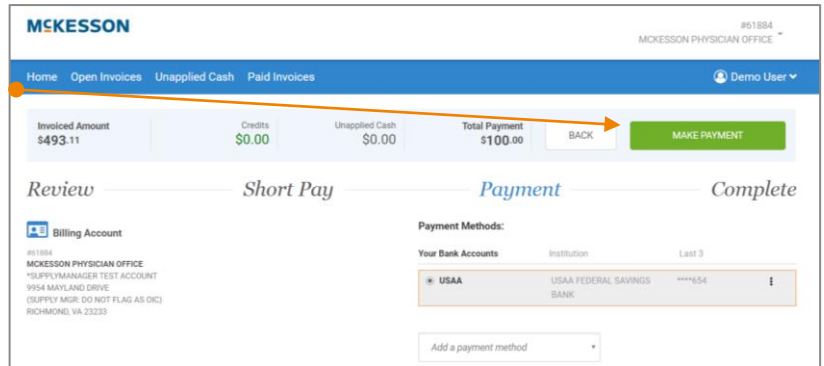
Customer authorizes McKesson Medical-Surgical, Inc. ("McKesson"), to initiate ACH credit and debit entries to/from Customer's business account indicated above for amounts owed on invoices or statements that are provided to Customer and Customer hereby authorized Customer's named financial institution(s) (the "Institution(s)"), to accept the ACH credit and debit entries. Authority to initiate ACH credit and debit entries shall remain in full force and effect until McKesson's Credit Department has received written notice from Customer 30 days in advance of its termination of such authorization. Customer understands that Customer has the legal right to stop payment of an ACH credit or debit entry by notification to Institution, provided, prior to such action, Customer shall give McKesson 30 days written notice to permit McKesson to take any necessary actions to avoid disruptions in payment from Customer. Customer agrees to follow NACHA rules applicable to ACH transactions.

I accept the ACH terms above.

CANCEL CONTINUE

- 16. Click on the 'I accept the ACH terms above' check box
 - 17. Click on the green 'Continue' button
- ACH stands for Automated Clearing House. This works as an electronic check and moves money from your bank account to pay for the invoice.*

18. Once you have entered, your **Payment Method**, click on the green **'Make Payment'** button.



MCKESSON #61884
MCKESSON PHYSICIAN OFFICE

Home Open Invoices Unapplied Cash Paid Invoices Demo User

Invoiced Amount \$493.11 Credits \$0.00 Unapplied Cash \$0.00 Total Payment \$100.00 BACK MAKE PAYMENT

Review Short Pay **Payment** Complete

Billing Account
#61884
MCKESSON PHYSICIAN OFFICE
*SUPPLYMANAGER TEST ACCOUNT
9954 MAYLAND DRIVE
(SUPPLY MGR. DO NOT FLAG AS OIC)
RICHMOND, VA 23223

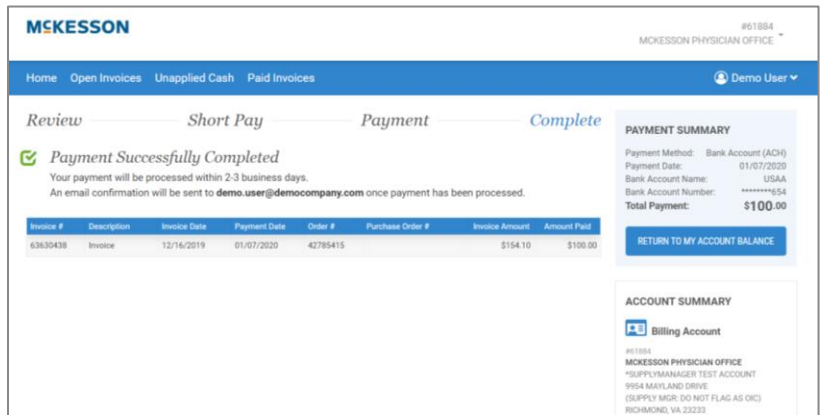
Payment Methods:

Your Bank Accounts Institution Last 3

* USAA USAA FEDERAL SAVINGS *****654 BANK

Add a payment method

This page confirms that you have successfully processed your payment.
Additional comments: You can click on the blue toolbar at any time to view Open Invoices, Unapplied Cash and Paid Invoices



MCKESSON #61884
MCKESSON PHYSICIAN OFFICE

Home Open Invoices Unapplied Cash Paid Invoices Demo User

Review Short Pay Payment **Complete**

Payment Successfully Completed
Your payment will be processed within 2-3 business days.
An email confirmation will be sent to demo.user@democompany.com once payment has been processed.

Invoice #	Description	Invoice Date	Payment Date	Order #	Purchase Order #	Invoice Amount	Amount Paid
63630438	Invoice	12/16/2019	01/07/2020	42785415		\$154.10	\$100.00

PAYMENT SUMMARY
Payment Method: Bank Account (ACH)
Payment Date: 01/07/2020
Bank Account Name: USAA
Bank Account Number: *****654
Total Payment: \$100.00

RETURN TO MY ACCOUNT BALANCE

ACCOUNT SUMMARY
Billing Account
#61884
MCKESSON PHYSICIAN OFFICE
*SUPPLYMANAGER TEST ACCOUNT
9954 MAYLAND DRIVE
(SUPPLY MGR. DO NOT FLAG AS OIC)
RICHMOND, VA 23223