



Community Mental Health Services | Wayne Hall, 8th Floor
125 W. Rosedale Avenue | West Chester, PA 19383 | 610-436-2510 | cmhs@wcupa.edu

CMHS Payment Instructions

We accept cash, check or credit card payments.

Fees for service are due at the time service is rendered. We may delay scheduling your next appointment for unpaid balances.

Credit Card Payments are accepted through the CMHS Patient Portal.

Please save this link in your browser for easy access or use the QR Code:

<https://cmhs.wcupa.edu>



1. Clicking the link will take you to the Login Page. Choose "Client" or "Parent or Guardian"

← → ↻ cmhs.wcupa.edu/login_dualauthentication.aspx

OpenCommunicator

Specify whether you are a Student or a Non-Student.

Client

Parent or Guardian

2. Enter:

- a. 1. Username
- b. 2. Password (you will be asked to create a new password after your first login)
- c. 3. Proceed

Please enter your username and password.

Username:

Password:

Please login using your university-assigned username and password.

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3. The page below will open and you will select the “Account Summary” option:

OpenCommunicator

Home

Appointments

Handouts

Messages

Letters

Forms

Survey Forms

Account Summary **1**

Immunizations

Log Out

Home for Test Patient4

This appears to be your first time here.

Welcome to Community Mental Health Services OpenCommunicator

This site is designed to help clients interact more conveniently and efficiently with the Community links at the left you can:

- Update your profile information
- Schedule appointments online 24/7
- Receive test results and exchange secure messages with the health center staff
- Complete required university entrance forms
- Complete surveys
- Check your Student Health financial account summary

4. From the Account Summary page, you will click on the “Pay Balance” button:

OpenCommunicator

Home
Appointments
Handouts
Messages
Letters
Forms
Survey Forms
Account Summary

Account Summary for Test Patient4

Total Patient Balance: \$40.00 [Pay Balance](#)

To view or print a statement, click on View/Print for the desired statement.

Statements for the last 36 months:

Date of Service	Provider	Stmnt #	Charges	Insurance Balance	Patient Balance	
8/13/2020	POLE, MICHELE PHD	5124	\$40.00	\$0.00	\$40.00	View/Print

5. Select “Full Amount” for your payment and then select “Continue”

OpenCommunicator Test Patient4

Home
Appointments
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Account Summary
Immunizations

Pay Outstanding Balance
Payment Date: 8/13/2020

Select Payment Amount

Full Amount: \$40.00 Other Amount

Amount: \$

[Cancel](#) [Continue](#)

6. The next screen shows your balance. Select “Pay Now”

OpenCommunicator Test Patient4

Home
Appointments
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Forms

Pay Outstanding Balance
Payment Date: 8/13/2020

Your payment will be processed by Nelnet for the following amount:

\$40.00

Click the **Pay Now** button to proceed to Nelnet to finalize your payment.

[Cancel](#) [Pay Now](#)

7. The NelNet payment page will open. You will select "Continue"

Enter Payment Amount

Please enter in the amount you want to pay and click "Continue" button.

Required fields are marked with an *

Payment Amount

Account: WCU Community Health Service

Payment Amount*: 40.00

Total Amount:

Payment Method*:



Card transactions for West Chester University of Pennsylvania are processed by Nelnet Campus Commerce, USA.

8. Enter the information requested in 1 through 10:

Credit Card Information

 Cardholder's Name*:

 Card Type*:

 Credit Card Number*:

 Expiration Date*:

Billing Address Information

 Address 1*:

(optional) Address 2:

 City*:

For U.S. Address

7 State*:

Zip*:

Contact Information

8 Daytime Phone*:
e.g. (555) 555-1212x123 OR +31 42 123 4567

9 Email Address*:

10

9. Select "Continue" to finalize your payment.