HOW TO PAY YOUR BENEFIT PREMIUMS IN SALUCRO

- Go to <u>www.acadian.com</u>
- Select Pay Your Bill

Contact Us Careers Intranet Members	hip Pay My Ambulance Bill				
	NY DIVISIONS CAREERS		PATIENT PORTAL	PAY YOUR BILL	JOIN OUR TEAM
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	Knowing	g Life Ma	tters Since 19	971	

• Select - Pay Bill Online - Employee Benefits

Note: Please disregard the (800) number listed above the Pay Bill Online link. (This is for individuals paying their Ambulance Bill only. Contact information for employees paying benefit premiums will be listed further along in the process.)



- Enter Either Your Phone Number or Your Email Address
- Click Pay Now



- Enter your Employee Number and Last Name
- Click Look Up Account

Acadi	lan mike
Bei	nefit Plan Lookup
Enter	the information below to locate your benefit plans for payment
All Fiel	ds Required
#	Employee Number 11111
8	Employee Last Name Mouse
	Look Up Account

- You will now see each of your benefit plans and the corresponding amount owed.
- The total amount owed will be displayed on the right side of the screen.
- Click Pay Now

Party and		
/elcome!		
ou have a current balance due of \$	65.51.	
our Benefit Plans		
Pay in Full 🐱		
EMPLOYEE NUMBER	EMPLOYEE LAST NAME Mouse	
BENEFIT PLAN Dental		
		Total: \$12.62
Pay in Full 🗸		
EMPLOYEE NUMBER	EMPLOYEE LAST NAME	
11111	Mouse	
Vision		
		Total: \$2.89
Pay in Full 🐱		
EMPLOYEE NUMBER	EMPLOYEE LAST NAME MOUSE	
BENEFIT PLAN Base Health Plan		
		Total: \$50.00

• Select Payment Method - Credit Card, Debit Card or ACH Payment (Make a payment with your bank account information)

cattan		C Live Chat
Select Payment Method	Method Payment Summary	
Credit or Debit Cards Credit or debit card.	> Subtotal Due Today	\$65.51 \$65.51
ACH Payment Make a payment with your bank account.	> # 11111 Mouse O Dental Total: \$12.62	Edit
	# 11111 Mouse Vision Total: \$2.89	Edit
	# 11111 Mouse Ø Base Health Plan 3 Total: \$50.00	Edit

• Enter payment details and click submit.

Acadian			D Live Cha
All Fields Required unless specified	as Optional	Due Today	
VISA Credit or Debit Card Number XXXXX XXXXX XXXXX 0002			
Exp. Dute 12/22	⊕ 012	# 1111 Mouse Dental	
Billing Information		③ Total: \$12.62	
First Name John		# 11111	
 Last Name Smith 		 Mouse Vision Total: \$2.89 	
Address 1 2916 N. University Ave. Buil	ding G	# 11111	
Ø Address 2 (Optional)		 Mouse Base Health Plan Table 550 00 	
City Lafayette		· Total: 550.00	
⊗ Sute Louisiana			
Postal Code 70507			
Authorization			
You are maki	ng a payment today of \$65.51		
By clicking Submit, you agree to the	ve Terms of Service and Privacy Policy		

- Once your payment has been processed, you will receive a confirmation screen stating "Your payment was successful".
- You will have the option to email a copy of your receipt to yourself or to save a copy of your receipt in PDF format.

Your payment wa	as successful
Please review and save of	or print your receipt.
Email Receipt	PDF
Billing Details	
Card Holder Name	John Smith
Date	11/08/2021
Result	Success
Transaction ID	NTc3MTg3YzgxODc5
Payment Type	VISA Visa
Total	\$65.51

Thank you for completing your payment! If you have any additional questions or need any additional information, please contact Acadian Human Resources: Phone (337) 210- 1757 (Option 2) or Email <u>benefits@acadian.com</u>.