



Check Register

Oklahoma County

Method Desc	Check Date	Claim # Claimant Name	Payee Payment Type	Service From Service To	Run ID	Amount	Check #
Paper Transaction		8050003306	DAVID H CHANSOLME, MD PC Physician	03/12/2024 03/12/2024	148077	\$0.00	
		8050003405	HPI PHYSICIANS LLC Physician	12/04/2024 12/04/2024	148077	\$0.00	
		8050003418	Integrus Ambulatory Care Corporation -Integrus Medical Group Physician	11/20/2024 11/20/2024	148077	\$0.00	
		Total By - Method Desc: 3			Total for Method Desc:	\$0.00	\$0.00



Check Register

Oklahoma County

Method Desc	Check Date	Claim # Claimant Name	Payee Payment Type	Service From Service To	Run ID	Amount	Check #
Check							
	02/11/2025	8050003306	Claimant Temporary Total Disability	02/13/2025 02/19/2025	148076	\$606.95	805027421
	02/11/2025	8050003393	Claimant Temporary Total Disability	02/07/2025 02/13/2025	148076	\$4,550.00	805027422
	02/11/2025	Combined	MCBRIDE ORTHOPEDIC HOSPITAL, LLC Physician	01/06/2025 01/06/2025	148077	\$548.41	805027423
	02/11/2025	Combined	CentraLink LLC Medical	09/15/2024 09/15/2024	148077	\$325.51	805027424
	02/11/2025	8050003420	HEALTHESYSTEMS Drug Coverage	01/06/2025 01/06/2025	148077	\$38.62	805027425
	02/11/2025	Combined	OSSO-NORTH LOCATION Physician	01/20/2025 01/20/2025	148077	\$618.15	805027426
	02/11/2025	8050003306	Neuroscience Specialists, PC Physician	01/15/2025 01/15/2025	148077	\$192.72	805027427
	02/11/2025	8050003393	METRO ANESTHESIA SERVICES, LLP Physician	01/07/2025 01/07/2025	148077	\$680.54	805027428
	02/11/2025	Combined	Two Oaks Investments, LLC Fees including PI, IOS, background checks, EDI fees	02/11/2025 02/11/2025	148077	\$43.14	805027429
	02/11/2025	8050003048	Stooper Group PC Medical	03/07/2024 03/07/2024	148077	\$750.00	805027430
	02/11/2025	Combined	RISING MEDICAL SOLUTIONS, LLC Bill Review Fees	01/20/2025 01/20/2025	148077	\$273.51	805027431
Total By - Method Desc: 11				Total for Method			
Total Number of Checks: 14				Desc:	\$8,627.55	\$8,627.55	
				Total Amount:	\$8,627.55	\$8,627.55	

Payment Summary Current

Processed Date 2/11/2025 To 2/11/2025

Insurer	Method	Processed	Payment Type	Claim #	Claimant	Amount	Check #	Payee
Oklahoma County	Check							
		2/11/2025	Temporary Total Disability	8050003393		910.00	805027422	Claimant
		2/11/2025	Temporary Total Disability	8050003393		910.00	805027422	Claimant
		2/11/2025	Temporary Total Disability	8050003393		910.00	805027422	Claimant
		2/11/2025	Temporary Total Disability	8050003393		910.00	805027422	Claimant
		2/11/2025	Temporary Total Disability	8050003393		910.00	805027422	Claimant
		2/11/2025	Temporary Total Disability	8050003306		606.95	805027421	Claimant
		2/11/2025	Bill Review Fees	8050003405		21.27	805027431	RISING MEDICAL SOLUTIONS, LLC
		2/11/2025	Bill Review Fees	8050003306		27.69	805027431	RISING MEDICAL SOLUTIONS, LLC
		2/11/2025	Bill Review Fees	8050003393		25.32	805027431	RISING MEDICAL SOLUTIONS, LLC
		2/11/2025	Bill Review Fees	8050003420		10.47	805027431	RISING MEDICAL SOLUTIONS, LLC
		2/11/2025	Bill Review Fees	8050003431		19.13	805027431	RISING MEDICAL SOLUTIONS, LLC
		2/11/2025	Bill Review Fees	8050003426		15.03	805027431	RISING MEDICAL SOLUTIONS, LLC
		2/11/2025	Bill Review Fees	8050003306		10.47	805027431	RISING MEDICAL SOLUTIONS, LLC
		2/11/2025	Bill Review Fees	8050003393		22.21	805027431	RISING MEDICAL SOLUTIONS, LLC

Payment Summary Current

Processed Date 2/11/2025 To 2/11/2025

Insurer	Method	Processed	Payment Type	Claim #	Claimant	Amount	Check #	Payee
Oklahoma County	Check							
		2/11/2025	Bill Review Fees	8050003393		95.98	805027431	RISING MEDICAL SOLUTIONS, LLC
		2/11/2025	Bill Review Fees	8050003393		25.94	805027431	RISING MEDICAL SOLUTIONS, LLC
		2/11/2025	Drug Coverage	8050003420		38.62	805027425	HEALTHESYSTEMS
		2/11/2025	Fees including PI, IOS, background	8050003412		2.00	805027429	Two Oaks Investments, LLC
		2/11/2025	Fees including PI, IOS, background	8050003393		2.00	805027429	Two Oaks Investments, LLC
		2/11/2025	Fees including PI, IOS, background	8050003434		2.00	805027429	Two Oaks Investments, LLC
		2/11/2025	Fees including PI, IOS, background	8050003393		35.14	805027429	Two Oaks Investments, LLC
		2/11/2025	Fees including PI, IOS, background	8050003393		2.00	805027429	Two Oaks Investments, LLC
		2/11/2025	Medical	8050003048		750.00	805027430	Stooper Group PC
		2/11/2025	Medical	8050003418		60.05	805027424	CentraLink LLC
		2/11/2025	Medical	8050003418		265.46	805027424	CentraLink LLC
		2/11/2025	Physician	8050003420		151.89	805027423	MCBRIDE ORTHOPEDIC HOSPITAL, LLC
		2/11/2025	Physician	8050003431		259.82	805027423	MCBRIDE ORTHOPEDIC HOSPITAL, LLC
		2/11/2025	Physician	8050003426		136.70	805027423	MCBRIDE ORTHOPEDIC HOSPITAL, LLC

Payment Summary Current

Processed Date 2/11/2025 To 2/11/2025

Insurer	Method	Processed	Payment Type	Claim #	Claimant	Amount	Check #	Payee		
Oklahoma County	Check	2/11/2025	Physician	8050003393		680.54	805027428	METRO ANESTHESIA SERVICES, LLP		
		2/11/2025	Physician	8050003393		175.00	805027426	OSSO-NORTH LOCATION		
		2/11/2025	Physician	8050003306		192.72	805027427	Neuroscience Specialists, PC		
		2/11/2025	Physician	8050003393		227.05	805027426	OSSO-NORTH LOCATION		
		2/11/2025	Physician	8050003393		216.10	805027426	OSSO-NORTH LOCATION		
			Total Payment Method				8,627.55			
	Paper	2/11/2025	Physician	8050003405		0.00		HPI PHYSICIANS LLC		
		2/11/2025	Physician	8050003306		0.00		DAVID H CHANSOLME, MD PC		
		2/11/2025	Physician	8050003418		0.00		Integris Ambulatory Care Corporation -Integris Medical Group		
				Total Payment Method				0.00		
				Total Insurer				8,627.55		
			Grand Total				8,627.55			

APPROVED ON _____, 20____
BY THE BOARD OF COUNTY COMMISSIONERS

DISTRICT 1

DISTRICT 2

DISTRICT 3

ATTEST:

COUNTY CLERK

	Claim Number	Department	Amount
A	8050003048	Sheriff	\$750.00
B	8050003306	Sheriff	\$837.83
C	8050003393	Juvenile	\$6,057.28
D	8050003405	County Clerk	\$21.27
E	8050003412	District 3	\$2.00
F	8050003418	Juvenile	\$325.51
G	8050003420	Juvenile	\$200.98
H	8050003426	Juvenile	\$151.73
I	8050003431	Juvenile	\$278.95
J	8050003434	Court Clerk	\$2.00
			\$8,627.55