



Check Register

Oklahoma County

Method Desc	Check Date	Claim # Claimant Name	Payee Payment Type	Service From Service To	Run ID	Amount	Check #
Paper Transaction		8050003412	MCBRIDE ORTHOPEDIC HOSPITAL, LLC Physician	10/30/2024 10/30/2024	146548	\$0.00	
Total By - Method Desc: 1					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	11/26/2024	8050003306	Claimant Temporary Total Disability	11/28/2024 12/04/2024	146547	\$606.95	805027339
	11/26/2024	Combined	MCBRIDE ORTHOPEDIC HOSPITAL, LLC Physician	10/31/2024 10/31/2024	146548	\$1,970.27	805027340
	11/26/2024	Combined	Community Hospital LLC Hospital - Outpatient	10/21/2024 10/21/2024	146548	\$4,544.76	805027341
	11/26/2024	8050003423	Centralink LLC Medical	10/25/2024 10/25/2024	146548	\$235.17	805027342
	11/26/2024	Combined	Two Oaks Investments, LLC Fees including PI, IOS, background checks, EDI fees	11/21/2024 11/21/2024	146548	\$4.00	805027343
	11/26/2024	Combined	RISING MEDICAL SOLUTIONS, LLC Bill Review Fees	10/31/2024 10/31/2024	146548	\$440.02	805027344
Total By - Method Desc: 6					Total for Method		
Total Number of Checks: 7					Desc:	\$7,801.17	\$7,801.17
					Total Amount:	\$7,801.17	\$7,801.17

Payment Summary Current

Processed Date 11/26/2024 To 11/26/2024
4

Insurer	Method	Processed	Payment Type	Claim #	Claimant	Amount	Check #	Payee
Oklahoma County	Check	11/26/2024	Temporary Total Disability	8050003306		606.95	805027339	Claimant
		11/26/2024	Bill Review Fees	8050003399		13.88	805027344	RISING MEDICAL SOLUTIONS, LLC
		11/26/2024	Bill Review Fees	8050003306		15.03	805027344	RISING MEDICAL SOLUTIONS, LLC
		11/26/2024	Bill Review Fees	8050003412		24.37	805027344	RISING MEDICAL SOLUTIONS, LLC
		11/26/2024	Bill Review Fees	8050003421		15.03	805027344	RISING MEDICAL SOLUTIONS, LLC
		11/26/2024	Bill Review Fees	8050003421		42.07	805027344	RISING MEDICAL SOLUTIONS, LLC
		11/26/2024	Bill Review Fees	8050003418		18.65	805027344	RISING MEDICAL SOLUTIONS, LLC
		11/26/2024	Bill Review Fees	8050003421		24.74	805027344	RISING MEDICAL SOLUTIONS, LLC
		11/26/2024	Bill Review Fees	8050003405		130.77	805027344	RISING MEDICAL SOLUTIONS, LLC
		11/26/2024	Bill Review Fees	8050003393		24.71	805027344	RISING MEDICAL SOLUTIONS, LLC
		11/26/2024	Bill Review Fees	8050003405		130.77	805027344	RISING MEDICAL SOLUTIONS, LLC
		11/26/2024	Fees including PI, IOS, background	8050003425		2.00	805027343	Two Oaks Investments, LLC
		11/26/2024	Fees including PI, IOS, background	8050003426		2.00	805027343	Two Oaks Investments, LLC
		11/26/2024	Hospital - Outpatient	8050003405		2,272.38	805027341	Community Hospital LLC

Payment Summary Current

Processed Date 11/26/2024 To 11/26/2024
4

Insurer	Method	Processed	Payment Type	Claim #	Claimant	Amount	Check #	Payee
Oklahoma County	Check	11/26/2024	Hospital - Outpatient	8050003405		2,272.38	805027341	Community Hospital LLC
		11/26/2024	Hospital - Outpatient	8050003421		428.16	805027340	MCBRIDE ORTHOPEDIC HOSPITAL, LLC
		11/26/2024	Hospital - Outpatient	8050003418		245.44	805027340	MCBRIDE ORTHOPEDIC HOSPITAL, LLC
		11/26/2024	Medical		8050003423	235.17	805027342	CentraLink LLC
		11/26/2024	Medical		8050003393	427.28	805027340	MCBRIDE ORTHOPEDIC HOSPITAL, LLC
		11/26/2024	Physician		8050003421	342.83	805027340	MCBRIDE ORTHOPEDIC HOSPITAL, LLC
		11/26/2024	Physician		8050003421	136.70	805027340	MCBRIDE ORTHOPEDIC HOSPITAL, LLC
		11/26/2024	Physician		8050003399	102.40	805027340	MCBRIDE ORTHOPEDIC HOSPITAL, LLC
		11/26/2024	Physician		8050003412	150.76	805027340	MCBRIDE ORTHOPEDIC HOSPITAL, LLC
		11/26/2024	Physician		8050003306	136.70	805027340	MCBRIDE ORTHOPEDIC HOSPITAL, LLC
			Total Payment Method			7,801.17		
	Paper	11/26/2024	Physician	8050003412		0.00		MCBRIDE ORTHOPEDIC HOSPITAL, LLC
			Total Payment Method			0.00		
			Total Insurer			7,801.17		
			Grand Total			7,801.17		

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

DISTRICT 1

DISTRICT 2

DISTRICT 3

ATTEST:

COUNTY CLERK

	Claim Number	Department	Amount
A	8050003306	Sheriff	\$758.68
B	8050003393	Juvenile	\$451.99
C	8050003399	Sheriff	\$116.28
D	8050003405	County Clerk	\$4,806.30
E	8050003412	District 3	\$175.13
F	8050003418	Juvenile	\$264.09
G	8050003421	Juvenile	\$989.53
H	8050003423	Juvenile	\$235.17
I	8050003425	Juvenile	\$2.00
J	8050003426	Juvenile	\$2.00
			\$7,801.17