CONSOLIDATED
BENEFITS RESOURCES, L.L.C.

Check Register

Oklahoma County

Method Desc	Check Date	Claim # / Claimant Name	Payee / Payment Type	Service From / Service To	Run ID	Amount	Check #
Check							
	05/06/2025	8050003306	Claimant Temporary Total Disability	05/08/2025 05/14/2025	149702	$606.95	805027522
	05/06/2025	Combined	MCBRIDE ORTHOPEDIC HOSPITAL, LLC Physician	04/11/2025 04/11/2025	149703	$1,190.86	805027523
	05/06/2025	8050003393	CentraLink LLC Medical	02/17/2025 02/17/2025	149703	$271.71	805027524
	05/06/2025	8050003441	Richard R Morgan Physician	03/31/2025 03/31/2025	149703	$83.81	805027525
	05/06/2025	Combined	Two Oaks Investments, LLC Fees including PI, IOS, background checks, EDI fees	05/06/2025 05/06/2025	149703	$6.00	805027526
	05/06/2025	Combined	RISING MEDICAL SOLUTIONS, LLC Bill Review Fees	04/11/2025 04/11/2025	149703	$167.74	805027527
		Total By - Method Desc: 6		**Total for Method Desc:**	**$2,327.07**	**$2,327.07**	
		Total Number of Checks: 6		**Total Amount:**	**$2,327.07**	**$2,327.07**	

Payment Summary Current

Processed Date 5/6/2025 To 5/6/2025

Insurer	Method	Processed	Payment Type	Claim #	Claimant	Amount	Check #	Payee
Oklahoma County								
	Check							
		5/6/2025	Temporary Total Disability	8050003306		606.95	805027522	Claimant
		5/6/2025	Bill Review Fees	8050003399		12.81	805027527	RISING MEDICAL SOLUTIONS, LLC
		5/6/2025	Bill Review Fees	8050003399		12.95	805027527	RISING MEDICAL SOLUTIONS, LLC
		5/6/2025	Bill Review Fees	8050003446		17.30	805027527	RISING MEDICAL SOLUTIONS, LLC
		5/6/2025	Bill Review Fees	8050003398		15.98	805027527	RISING MEDICAL SOLUTIONS, LLC
		5/6/2025	Bill Review Fees	8050003441		25.71	805027527	RISING MEDICAL SOLUTIONS, LLC
		5/6/2025	Bill Review Fees	8050003447		11.24	805027527	RISING MEDICAL SOLUTIONS, LLC
		5/6/2025	Bill Review Fees	8050003443		20.41	805027527	RISING MEDICAL SOLUTIONS, LLC
		5/6/2025	Bill Review Fees	8050003398		15.98	805027527	RISING MEDICAL SOLUTIONS, LLC
		5/6/2025	Bill Review Fees	8050003443		24.74	805027527	RISING MEDICAL SOLUTIONS, LLC
		5/6/2025	Bill Review Fees	8050003399		10.62	805027527	RISING MEDICAL SOLUTIONS, LLC
		5/6/2025	Fees including PI, IOS, background	8050003443		2.00	805027526	Two Oaks Investments, LLC
		5/6/2025	Fees including PI, IOS, background	8050003398		2.00	805027526	Two Oaks Investments, LLC
		5/6/2025	Fees including PI, IOS, background	8050003420		2.00	805027526	Two Oaks Investments, LLC

Payment Summary Current

Processed Date 5/6/2025 To 5/6/2025

Insurer	Method	Processed	Payment Type	Claim #	Claimant	Amount	Check #	Payee
Oklahoma County								
	Check							
		5/6/2025	Hospital - Outpatient	8050003443		428.17	805027523	MCBRIDE ORTHOPEDIC HOSPITAL, LLC
		5/6/2025	Medical	8050003393		271.71	805027524	CentraLink LLC
		5/6/2025	Physician	8050003399		121.41	805027523	MCBRIDE ORTHOPEDIC HOSPITAL, LLC
		5/6/2025	Physician	8050003443		187.77	805027523	MCBRIDE ORTHOPEDIC HOSPITAL, LLC
		5/6/2025	Physician	8050003446		129.11	805027523	MCBRIDE ORTHOPEDIC HOSPITAL, LLC
		5/6/2025	Physician	8050003399		74.26	805027523	MCBRIDE ORTHOPEDIC HOSPITAL, LLC
		5/6/2025	Physician	8050003399		70.14	805027523	MCBRIDE ORTHOPEDIC HOSPITAL, LLC
		5/6/2025	Physician	8050003441		83.81	805027525	Richard R Morgan
		5/6/2025	Physician	8050003398		165.41	805027523	MCBRIDE ORTHOPEDIC HOSPITAL, LLC
		5/6/2025	Physician	8050003447		14.59	805027523	MCBRIDE ORTHOPEDIC HOSPITAL, LLC
				Total Payment Method		**2,327.07**		
				Total Insurer		**2,327.07**		
				Grand Total		**2,327.07**		

APPROVED ON_____, 20____
BY THE BOARD OF COUNTY COMMISSIONERS

_____
DISTRICT 1

_____
DISTRICT 2

_____
DISTRICT 3

ATTEST:

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COUNTY CLERK

	Claim Number	Department	Amount
A	8050003306	Sheriff	$606.95
B	8050003399	Sheriff	$302.19
C	8050003446	Sheriff	$146.41
D	8050003398	Juvenile	$199.37
E	8050003441	Sheriff	$109.52
F	8050003447	Sheriff	$25.83
G	8050003443	Sheriff	$663.09
H	8050003420	Juvenile	$2.00
I	8050003393	Juvenile	$271.71
			$2,327.07