



Check Register

Oklahoma County

Method Desc	Check Date	Claim # Claimant Name	Payee Payment Type	Service From Service To	Run ID	Amount	Check #
Paper Transaction		8050003444	MCBRIDE ORTHOPEDIC HOSPITAL, LLC Physician	03/24/2025 03/24/2025	150373	\$0.00	
		8050003393	Surgery Center of Oklahoma, LP Hospital - Outpatient	01/07/2025 01/07/2025	150373	\$0.00	
Total By - Method Desc: 2				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							
	06/10/2025	Combined	MCBRIDE ORTHOPEDIC HOSPITAL, LLC Physician	05/15/2025 05/15/2025	150373	\$351.40	805027556
	06/10/2025	8050003444	Oklahoma Emergency Services Physician	03/18/2025 03/18/2025	150373	\$174.49	805027557
	06/10/2025	8050003441	HEALTHSOUTH HOLDINGS INC Physician	05/09/2025 05/09/2025	150373	\$112.43	805027558
	06/10/2025	Combined	Two Oaks Investments, LLC Fees including PI, IOS, background checks, EDI fees	06/10/2025 06/10/2025	150373	\$45.14	805027559
	06/10/2025	Combined	RISING MEDICAL SOLUTIONS, LLC Bill Review Fees	05/15/2025 05/15/2025	150373	\$182.80	805027560
Total By - Method Desc: 5				Total for Method Desc:		\$866.26	\$866.26
Total Number of Checks: 7				Total Amount:		\$866.26	\$866.26

Payment Summary Current

Processed Date 6/10/2025 To 6/10/2025

Insurer	Method	Processed	Payment Type	Claim #	Claimant	Amount	Check #	Payee
Oklahoma County	Check	6/10/2025	Bill Review Fees	8050003444		21.62	805027560	RISING MEDICAL SOLUTIONS, LLC
		6/10/2025	Bill Review Fees	8050003440		13.34	805027560	RISING MEDICAL SOLUTIONS, LLC
		6/10/2025	Bill Review Fees	8050003431		88.79	805027560	RISING MEDICAL SOLUTIONS, LLC
		6/10/2025	Bill Review Fees	8050003441		24.45	805027560	RISING MEDICAL SOLUTIONS, LLC
		6/10/2025	Bill Review Fees	8050003435		17.30	805027560	RISING MEDICAL SOLUTIONS, LLC
		6/10/2025	Bill Review Fees	8050003435		17.30	805027560	RISING MEDICAL SOLUTIONS, LLC
		6/10/2025	Fees including PI, IOS, background	8050003426		2.00	805027559	Two Oaks Investments, LLC
		6/10/2025	Fees including PI, IOS, background	8050003439		35.14	805027559	Two Oaks Investments, LLC
		6/10/2025	Fees including PI, IOS, background	8050003426		2.00	805027559	Two Oaks Investments, LLC
		6/10/2025	Fees including PI, IOS, background	8050003449		2.00	805027559	Two Oaks Investments, LLC
		6/10/2025	Fees including PI, IOS, background	8050003450		2.00	805027559	Two Oaks Investments, LLC
		6/10/2025	Fees including PI, IOS, background	8050003451		2.00	805027559	Two Oaks Investments, LLC
		6/10/2025	Physician	8050003435		129.11	805027556	MCBRIDE ORTHOPEDIC HOSPITAL, LLC
		6/10/2025	Physician	8050003435		129.11	805027556	MCBRIDE ORTHOPEDIC HOSPITAL, LLC

Payment Summary Current

Processed Date 6/10/2025 To 6/10/2025

Insurer	Method	Processed	Payment Type	Claim #	Claimant	Amount	Check # Payee
Oklahoma County	Check	6/10/2025	Physician	8050003431		62.08	805027556 MCBRIDE ORTHOPEDIC HOSPITAL, LLC
		6/10/2025	Physician	8050003440		31.10	805027556 MCBRIDE ORTHOPEDIC HOSPITAL, LLC
		6/10/2025	Physician	8050003444		174.49	805027557 Oklahoma Emergency Services
		6/10/2025	Physician	8050003441		112.43	805027558 HEALTHSOUTH HOLDINGS INC
	Total Payment Method					866.26	
	Paper	6/10/2025	Hospital - Outpatient	8050003393		0.00	Surgery Center of Oklahoma, LP
		6/10/2025	Physician	8050003444		0.00	MCBRIDE ORTHOPEDIC HOSPITAL, LLC
		Total Payment Method					0.00
	Total Insurer					866.26	
	Grand Total					866.26	

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

DISTRICT 1

DISTRICT 2

DISTRICT 3

ATTEST:

COUNTY CLERK

	Claim Number	Department	Amount
A	8050003426	Juvenile	\$4.00
B	8050003431	Juvenile	\$150.87
C	8050003435	Juvenile	\$292.82
D	8050003439	Juvenile	\$35.14
E	8050003440	Sheriff	\$44.44
F	8050003441	Sheriff	\$136.88
G	8050003444	Sheriff	\$196.11
H	8050003449	Sheriff	\$2.00
I	8050003450	Juvenile	\$2.00
J	8050003451	District 3	\$2.00
			\$866.26