



# Check Register

## Oklahoma County

Method Desc	Check Date	Claim # Claimant Name	Payee Payment Type	Service From Service To	Run ID	Amount	Check #
Paper Transaction		8050003477	DIAGNOSTIC LABORATORY OF OKLAHOMA Medical	04/03/2026 04/03/2026	156228	\$0.00	
		8050003484	Claimant Salary Continuation-No reimbursement of Temporary Total Disability	03/14/2026 04/30/2026	156228	\$0.00	
		<b>Total By - Method Desc: 2</b>			<b>Total for Method Desc:</b>	<b>\$0.00</b>	<b>\$0.00</b>



# Check Register

## Oklahoma County

Method Desc	Check Date	Claim # Claimant Name	Payee Payment Type	Service From Service To	Run ID	Amount	Check #
Check	05/12/2026	Combined	MCBRIDE ORTHOPEDIC HOSPITAL, LLC Physician	04/22/2026 04/22/2026	156228	\$1,074.75	805027869
	05/12/2026	8050003477	CentraLink LLC Medical	05/01/2026 05/01/2026	156228	\$315.00	805027870
	05/12/2026	8050003477	HEALTHSYSTEMS Drug Coverage	04/08/2026 04/08/2026	156228	\$64.35	805027871
	05/12/2026	8050003484	OSSO-NORTH LOCATION Physician	04/07/2026 04/07/2026	156228	\$96.32	805027872
	05/12/2026	Combined	OCCUPATIONAL HEALTH CENTERS OF THE SOUTHWEST, PA Physician	04/28/2026 04/28/2026	156228	\$1,393.66	805027873
	05/12/2026	8050003498	Two Oaks Investments, LLC Fees including PI, IOS, background checks, EDI fees	05/06/2026 05/06/2026	156228	\$2.00	805027874
	05/12/2026	8050003484	Heflin Medical Management, LLC Medical	03/24/2026 03/24/2026	156228	\$1,360.50	805027875
	05/12/2026	Combined	RISING MEDICAL SOLUTIONS, LLC Bill Review Fees	04/28/2026 04/28/2026	156228	\$143.32	805027876
	05/12/2026	8050003477	Claimant Mileage	04/08/2026 04/21/2026	156228	\$708.47	805027877
	05/12/2026	8050003484	Claimant Temporary Total Disability	05/08/2026 05/14/2026	156228	\$952.08	805027878
<b>Total By - Method Desc: 10</b>					<b>Total for Method</b>		
<b>Total Number of Checks: 12</b>					<b>Desc:</b>	<b>\$6,110.45</b>	<b>\$6,110.45</b>
					<b>Total Amount:</b>	<b>\$6,110.45</b>	<b>\$6,110.45</b>

## Payment Summary Current

**Processed Date 5/12/2026 To 5/12/2026**

Insurer	Method	Processed	Payment Type	Claim #	Claimant	Amount	Check #	Payee
Oklahoma County	Check							
		5/12/2026	Bill Review Fees	8050003493		10.22	805027876	RISING MEDICAL SOLUTIONS, LLC
		5/12/2026	Bill Review Fees	8050003493		11.67	805027876	RISING MEDICAL SOLUTIONS, LLC
		5/12/2026	Bill Review Fees	8050003474		9.46	805027876	RISING MEDICAL SOLUTIONS, LLC
		5/12/2026	Bill Review Fees	8050003484		13.48	805027876	RISING MEDICAL SOLUTIONS, LLC
		5/12/2026	Bill Review Fees	8050003469		16.29	805027876	RISING MEDICAL SOLUTIONS, LLC
		5/12/2026	Bill Review Fees	8050003474		19.16	805027876	RISING MEDICAL SOLUTIONS, LLC
		5/12/2026	Bill Review Fees	8050003489		10.23	805027876	RISING MEDICAL SOLUTIONS, LLC
		5/12/2026	Bill Review Fees	8050003492		10.51	805027876	RISING MEDICAL SOLUTIONS, LLC
		5/12/2026	Bill Review Fees	8050003494		10.37	805027876	RISING MEDICAL SOLUTIONS, LLC
		5/12/2026	Bill Review Fees	8050003493		10.37	805027876	RISING MEDICAL SOLUTIONS, LLC
		5/12/2026	Bill Review Fees	8050003497		11.38	805027876	RISING MEDICAL SOLUTIONS, LLC
		5/12/2026	Bill Review Fees	8050003495		10.18	805027876	RISING MEDICAL SOLUTIONS, LLC
		5/12/2026	Drug Coverage	8050003477		64.35	805027871	HEALTHESYSTEMS
		5/12/2026	Fees including PI, IOS, background	8050003498		2.00	805027874	Two Oaks Investments, LLC

## Payment Summary Current

**Processed Date 5/12/2026 To 5/12/2026**

Insurer	Method	Processed	Payment Type	Claim #	Claimant	Amount	Check #	Payee
Oklahoma County	Check	5/12/2026	Medical	8050003477		315.00	805027870	CentraLink LLC
		5/12/2026	Medical	8050003484		1,360.50	805027875	Heflin Medical Management, LLC
		5/12/2026	Medical	8050003495		13.54	805027869	MCBRIDE ORTHOPEDIC HOSPITAL, LLC
		5/12/2026	Medical	8050003474		641.24	805027869	MCBRIDE ORTHOPEDIC HOSPITAL, LLC
		5/12/2026	Mileage	8050003477		598.27	805027877	Claimant
		5/12/2026	Mileage	8050003477		110.20	805027877	Claimant
		5/12/2026	Physician	8050003489		126.53	805027873	OCCUPATIONAL HEALTH CENTERS OF THE SOUTHWEST, PA
		5/12/2026	Physician	8050003469		129.11	805027869	MCBRIDE ORTHOPEDIC HOSPITAL, LLC
		5/12/2026	Physician	8050003484		96.32	805027872	OSSO-NORTH LOCATION
		5/12/2026	Physician	8050003493		360.47	805027873	OCCUPATIONAL HEALTH CENTERS OF THE SOUTHWEST, PA
		5/12/2026	Physician	8050003493		148.85	805027873	OCCUPATIONAL HEALTH CENTERS OF THE SOUTHWEST, PA
		5/12/2026	Physician	8050003497		313.63	805027873	OCCUPATIONAL HEALTH CENTERS OF THE SOUTHWEST, PA
		5/12/2026	Physician	8050003494		148.85	805027873	OCCUPATIONAL HEALTH CENTERS OF THE SOUTHWEST, PA
		5/12/2026	Physician	8050003492		171.06	805027873	OCCUPATIONAL HEALTH CENTERS OF THE SOUTHWEST, PA

## Payment Summary Current

**Processed Date 5/12/2026 To 5/12/2026**

Insurer	Method	Processed	Payment Type	Claim #	Claimant	Amount	Check #	Payee
Oklahoma County	Check	5/12/2026	Physician	8050003493		124.27	805027873	OCCUPATIONAL HEALTH CENTERS OF THE SOUTHWEST, PA
		5/12/2026	Physician	8050003474		290.86	805027869	MCBRIDE ORTHOPEDIC HOSPITAL, LLC
		5/12/2026	Temporary Total Disability	8050003484		476.04	805027878	Claimant
		5/12/2026	Temporary Total Disability	8050003484		476.04	805027878	Claimant
			<b>Total Payment Method</b>			<b>6,110.45</b>		
	Paper	5/12/2026	Medical	8050003477		0.00		DIAGNOSTIC LABORATORY OF OKLAHOMA
		5/12/2026	Salary Continuation- No reimbursement of	8050003484		0.00		Claimant
			<b>Total Payment Method</b>			<b>0.00</b>		
			<b>Total Insurer</b>			<b>6,110.45</b>		
			<b>Grand Total</b>			<b>6,110.45</b>		

APPROVED ON \_\_\_\_\_, 20 \_\_\_\_  
BY THE BOARD OF COUNTY COMMISSIONERS

\_\_\_\_\_  
DISTRICT 1

\_\_\_\_\_  
DISTRICT 2

\_\_\_\_\_  
DISTRICT 3

ATTEST:

\_\_\_\_\_  
COUNTY CLERK

	<b>Claim Number</b>	<b>Department</b>	<b>Amount</b>
A	8050003469	Sheriff	\$145.40
B	8050003474	Juvenile	\$960.72
C	8050003477	District 1	\$1,087.82
D	8050003484	Assessor	\$2,422.38
E	8050003489	Sheriff	\$136.76
F	8050003492	County Clerk	\$181.57
G	8050003493	Sheriff	\$665.85
H	8050003494	Court Clerk	\$159.22
I	8050003495	Juvenile	\$23.72
J	8050003497	Treasurer	\$325.01
K	8050003498	District 1	\$2.00
			<b>\$6,110.45</b>