

**MEMORIAL MEDICAL CENTER**

**COMMISSIONERS COURT APPROVAL LIST FOR ---July 27, 2022**

**TOTALS TO BE APPROVED - TRANSFERRED FROM ATTACHED PAGES**

TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS	\$ 414,654.06
TOTAL TRANSFERS BETWEEN FUNDS	\$ 197,037.48
TOTAL NURSING HOME UPL EXPENSES	\$ 701,934.69
TOTAL INTER-GOVERNMENT TRANSFERS	\$ 2,527.39
<b>GRAND TOTAL DISBURSEMENTS APPROVED July 27, 2022</b>	<b>\$ 1,316,153.62</b>

**APPROVED**

**JUL 27 2022**

**CAL. SAN COUNTY  
COMMISSIONERS COURT**

**MEMORIAL MEDICAL CENTER**  
**COMMISSIONERS COURT APPROVAL LIST FOR ---July 27, 2022**

**PAYABLES AND PAYROLL**

7/21/2022 Weekly Payables	396,156.86
7/25/2022 Aqua Beverage Company-water	101.92
7/25/2022 Driessen Water Inc.-water	514.00
7/21/2022 Patient Refunds	2,072.38
7/25/2022 Frontier-telephone	1,072.33
7/25/2022 Sparklight-cable	4,151.01
7/25/2022 McKesson-340B Prescription Expense	6,017.08
7/25/2022 Amerisource Bergen-340B Prescription Expense	1,877.67

**Prosperity Electronic Bank Payments**

7/18-7/22/22 Pay Plus-Patient Claims Processing Fee	400.80
7/22/2022 ExpertPay- child support	2,290.01

**TOTAL PAYABLES, PAYROLL AND ELECTRONIC BANK PAYMENTS** **\$ 414,654.06**

**TRANSFER BETWEEN FUNDS FROM MMC TO NURSING HOMES**

7/21/2022 MMC Operating to Ashford-correction of NH QIPP payment deposited into MMC Operating	3,438.65
7/21/2022 MMC Operating to Solera-correction of NH QIPP payment deposited into MMC Operating	1,611.78
7/21/2022 MMC Operating to Fort bend-correction of NH QIPP payment deposited into MMC Operating	1,635.10
7/21/2022 MMC Operating to Crescent-correction of NH QIPP payment deposited into MMC Operating in error	1,311.75
7/21/2022 MMC Operating to Golden Creek-correction of NH insurance and QIPP payment deposited into MMC Operating in error	72,926.94
7/21/2022 MMC Operating to Gulf Pointe Plaza -correction of NH insurance and QIPP payment deposited into MMC Operating	14,430.00
7/21/2022 MMC Operating to Tuscany Village-correction of NH insurance and QIPP payment deposited into MMC Operating	26,420.31
7/21/2022 MMC Operating to Bethany-correction of NH insurance payment deposited into MMC Operating in error	75,262.95

**TOTAL TRANSFERS BETWEEN FUNDS** **\$ 197,037.48**

**NURSING HOME UPL EXPENSES**

7/25/2022 Nursing Home UPL-Cantex Transfer	274,125.09
7/25/2022 Nursing Home UPL-Nexion Transfer	59,194.53
7/25/2022 Nursing Home UPL-HMG Transfer	78,364.40
7/25/2022 Nursing Home UPL-Tuscany Transfer	29,916.53
7/25/2022 Nursing Home UPL-HSL Transfer	260,334.14

**TOTAL NURSING HOME UPL EXPENSES** **\$ 701,934.69**

**INTER-GOVERNMENT TRANSFERS**

7/25/2022 IGT DSH 2022 to be paid August 05, 2022	2,527.39
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**TOTAL INTER-GOVERNMENT TRANSFERS** **\$ 2,527.39**

**GRAND TOTAL DISBURSEMENTS APPROVED July 27, 2022** **\$ 1,316,153.62**



RECEIVED BY THE  
COUNTY AUDITOR ON

JUL 21 2022

07/21/2022

11:49  
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

Due Dates Through: 08/11/2022

ap\_open\_invoice.template

Vendor#	Vendor Name	Class	Pay Code								
10995	ABILITY NETWORK (SHIFTHOUND) ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
22M0099368 ✓		07/20/20	07/07/20	08/06/20		647.28	0.00	0.00	647.28 ✓		
SCHEDULING SERVICES											
Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net			
	10995	ABILITY NETWORK (SHIFTHOUND)			647.28	0.00	0.00	647.28			

Vendor#	Vendor Name	Class	Pay Code								
A1680	AIRGAS USA, LLC - CENTRAL DIV ✓	M									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
9989671980 ✓		07/20/20	06/30/20	07/25/20		892.96	0.00	0.00	892.96 ✓		
OXYGEN											
9989671978 ✓		07/20/20	06/30/20	07/25/20		545.16	0.00	0.00	545.16 ✓		
RENTAL											
9989671981 ✓		07/20/20	06/30/20	07/25/20		290.41	0.00	0.00	290.41 ✓		
RENTAL											
Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net			
	A1680	AIRGAS USA, LLC - CENTRAL DIV			1,728.53	0.00	0.00	1,728.53			

Vendor#	Vendor Name	Class	Pay Code								
B1220	BECKMAN COULTER INC ✓	M									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
11003681 ✓		07/13/20	07/07/20	08/07/20		1,904.26	0.00	0.00	1,904.26 ✓		
SUPPLIES											
110003052 ✓		07/13/20	07/07/20	08/07/20		292.96	0.00	0.00	292.96 ✓		
CONTRACT LEASE											
5459965 ✓		07/20/20	07/05/20	07/30/20		6,249.42	0.00	0.00	6,249.42 ✓		
Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net			
	B1220	BECKMAN COULTER INC			8,446.64	0.00	0.00	8,446.64			

Vendor#	Vendor Name	Class	Pay Code								
11072	BIO-RAD LABORATORIES, INC ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
905657812 ✓		07/19/20	07/07/20	07/19/20		536.16	0.00	0.00	536.16 ✓		
SUPPLIES											
Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net			
	11072	BIO-RAD LABORATORIES, INC			536.16	0.00	0.00	536.16			

Vendor#	Vendor Name	Class	Pay Code								
14236	CARRIER CORPORATION ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
90206217 ✓		07/19/20	06/29/20	07/29/20		12,830.00	0.00	0.00	12,830.00 ✓		
CHILLER RENTAL JUNE 22 (5/23/22 - 6/14/22)											
90206216 ✓		07/19/20	06/29/20	07/29/20		12,830.00	0.00	0.00	12,830.00 ✓		
MAY 22 -CHILLER RENTAL (4/25-5/22/22)											
Vendor Totals	Number	Name			Gross	Discount	No-Pay	Net			
	14236	CARRIER CORPORATION			25,660.00	0.00	0.00	25,660.00			

Vendor#	Vendor Name	Class	Pay Code								
13264	CERVEY, LLC ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		

17059		07/21/20	07/12/20	08/01/20			1,699.00	0.00	0.00	1,699.00		
	LICENSE											
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
	13264	CERVEY, LLC						1,699.00	0.00	0.00	1,699.00	
Vendor#	Vendor Name						Class	Pay Code				
10723	CLIA LABORATORY PROGRAM											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
070522		07/20/20	07/05/20	08/05/20			180.00	0.00	0.00	180.00		
	FINAL CERTIFICATE FEE											
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
	10723	CLIA LABORATORY PROGRAM						180.00	0.00	0.00	180.00	
Vendor#	Vendor Name						Class	Pay Code				
14304	COFFEE BARREL, LLC											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
AUG22		07/19/20	07/22/20	08/01/20			56,875.00	0.00	0.00	56,875.00		
	INTERIM PRACTICE ADMIN 3F (811-1013122)											
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
	14304	COFFEE BARREL, LLC						56,875.00	0.00	0.00	56,875.00	
Vendor#	Vendor Name						Class	Pay Code				
14080	CORROHEALTH, INC.											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
756991		07/20/20	06/30/20	07/30/20			2,197.75	0.00	0.00	2,197.75		
	CODING SERVICES											
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
	14080	CORROHEALTH, INC.						2,197.75	0.00	0.00	2,197.75	
Vendor#	Vendor Name						Class	Pay Code				
11368	CYRACOM LLC											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
2022028535		07/13/20	07/11/20	08/10/20			647.95	0.00	0.00	647.95		
	INTERPRETATION SERV											
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
	11368	CYRACOM LLC						647.95	0.00	0.00	647.95	
Vendor#	Vendor Name						Class	Pay Code				
10368	DEWITT POTH & SON											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
6864620		07/13/20	07/05/20	08/05/20			718.53	0.00	0.00	718.53		
	SUPPLIES											
6864640		07/13/20	07/06/20	08/06/20			68.66	0.00	0.00	68.66		
	SUPPLIES											
6869800		07/13/20	07/08/20	08/08/20			222.00	0.00	0.00	222.00		
	SUPPLIES											
6864641		07/13/20	07/08/20	08/08/20			104.74	0.00	0.00	104.74		
	SUPPLIES											
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
	10368	DEWITT POTH & SON						1,113.93	0.00	0.00	1,113.93	
Vendor#	Vendor Name						Class	Pay Code				
10789	DISCOVERY MEDICAL NETWORK INC											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
MMC071522		07/21/20	07/20/20	07/21/20			109,167.23	0.00	0.00	109,167.23		
	PHYSICIAN SERVICES (711-715122)											
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net



	10789	DISCOVERY MEDICAL NETWORK INC					109,167.23	0.00	0.00	109,167.23
Vendor#	Vendor Name		Class	Pay Code						
11291	DOWELL PEST CONTROL ✓									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	10633 ✓		07/13/20	07/09/20	08/09/20		505.00	0.00	0.00	505.00 ✓
		PEST CONTROL								
	10634 ✓		07/13/20	07/09/20	08/09/20		260.00	0.00	0.00	260.00 ✓
		PEST CONTROL								
	Vendor Totals	Number Name					Gross	Discount	No-Pay	Net
		11291 DOWELL PEST CONTROL					765.00	0.00	0.00	765.00
Vendor#	Vendor Name		Class	Pay Code						
11284	EMERGENCY STAFFING SOLUTIONS ✓									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	41353		07/20/20	07/15/20	07/25/20		40,062.50	0.00	0.00	40,062.50
		ER PHYSICIAN STAFFING								
	Vendor Totals	Number Name					Gross	Discount	No-Pay	Net
		11284 EMERGENCY STAFFING SOLUTIONS					40,062.50	0.00	0.00	40,062.50
Vendor#	Vendor Name		Class	Pay Code						
C2510	EVIDENT ✓		M							
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	A2207061378 ✓		07/21/20	07/06/20	07/31/20		20,290.00	0.00	0.00	20,290.00 ✓
		HARDWARE/TECH SUPPORT								
	T2207121378 ✓		07/21/20	07/12/20	07/31/20		23,659.55	0.00	0.00	23,659.55 ✓
		CONSULTING SERVICES								
	Vendor Totals	Number Name					Gross	Discount	No-Pay	Net
		C2510 EVIDENT					43,949.55	0.00	0.00	43,949.55
Vendor#	Vendor Name		Class	Pay Code						
10689	FASTHEALTH CORPORATION ✓									
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	07A22MMCA ✓		07/21/20	07/01/20	07/16/20		495.00	0.00	0.00	495.00 ✓
		WEBSITE MONTHLY								
	Vendor Totals	Number Name					Gross	Discount	No-Pay	Net
		10689 FASTHEALTH CORPORATION					495.00	0.00	0.00	495.00
Vendor#	Vendor Name		Class	Pay Code						
F1400	FISHER HEALTHCARE ✓		M							
	Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
	4319791 ✓		07/19/20	07/05/20	07/30/20		262.03	0.00	0.00	262.03 ✓
		SUPPLIES								
	4359116 ✓		07/19/20	07/06/20	07/31/20		928.48	0.00	0.00	928.48 ✓
		SUPPLIES								
	4359117 ✓		07/19/20	07/06/20	07/31/20		297.72	0.00	0.00	297.72 ✓
		SUPPLIES								
	4359118 ✓		07/19/20	07/06/20	07/31/20		39.58	0.00	0.00	39.58 ✓
		SUPPLIES								
	4282692 ✓		07/20/20	07/01/20	07/26/20		131.02	0.00	0.00	131.02 ✓
		SUPPLIES								
	4282690 ✓		07/20/20	07/01/20	07/26/20		131.02	0.00	0.00	131.02 ✓
		SUPPLIES								
	4282691 ✓		07/20/20	07/01/20	07/26/20		240.42	0.00	0.00	240.42 ✓
		SUPPLIES								
	Vendor Totals	Number Name					Gross	Discount	No-Pay	Net

	F1400	FISHER HEALTHCARE					2,030.27	0.00	0.00	2,030.27
Vendor#	Vendor Name		Class	Pay Code						
11184	FLDR DESIGNS LLC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
15437 ✓		07/19/20	06/15/20	07/15/20		1,176.70	0.00	0.00	1,176.70 ✓	
	PATIENT IMAGING DISC									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	11184	FLDR DESIGNS LLC				1,176.70	0.00	0.00	1,176.70	
Vendor#	Vendor Name		Class	Pay Code						
12404	GE PRECISION HEALTHCARE, LLC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
6002164587 ✓		07/19/20	07/01/20	07/31/20		5,665.83	0.00	0.00	5,665.83 ✓	
	CONTRACT									
6002164508 ✓		07/19/20	07/01/20	07/31/20		680.00	0.00	0.00	680.00 ✓	
	CONTRACT									
6002164562 ✓		07/19/20	07/01/20	07/31/20		2,422.50	0.00	0.00	2,422.50 ✓	
	CONTRACT									
6002164742 ✓		07/19/20	07/01/20	07/31/20		868.16	0.00	0.00	868.16 ✓	
	CONTRACT									
6002164561 ✓		07/19/20	07/01/20	07/31/20		86.67	0.00	0.00	86.67 ✓	
	CONTRACT									
6002164563 ✓		07/19/20	07/01/20	07/31/20		61.67	0.00	0.00	61.67 ✓	
	CONTRACT									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	12404	GE PRECISION HEALTHCARE, LLC				9,784.83	0.00	0.00	9,784.83	
Vendor#	Vendor Name		Class	Pay Code						
10804	HEALTHCARE CODING & CONSULTING ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
12642 ✓		07/19/20	06/30/20	07/30/20		1,798.00	0.00	0.00	1,798.00 ✓	
	CODING									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	10804	HEALTHCARE CODING & CONSULTING				1,798.00	0.00	0.00	1,798.00	
Vendor#	Vendor Name		Class	Pay Code						
H0416	HOLOGIC INC ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
10193683 ✓		07/19/20	07/08/20	07/19/20		900.00	0.00	0.00	900.00 ✓	
	SUPPLIES									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	H0416	HOLOGIC INC				900.00	0.00	0.00	900.00	
Vendor#	Vendor Name		Class	Pay Code						
10922	HUNTER PHARMACY SERVICES ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
4982 ✓		07/21/20	06/30/20	07/20/20		14,813.10	0.00	0.00	14,813.10 ✓	
	PHARM SRVS- ADOLPH									
Vendor Totals	Number	Name				Gross	Discount	No-Pay	Net	
	10922	HUNTER PHARMACY SERVICES				14,813.10	0.00	0.00	14,813.10	
Vendor#	Vendor Name		Class	Pay Code						
11200	IRON MOUNTAIN ✓									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
GSGS478 ✓		07/20/20	06/30/20	07/30/20		694.99	0.00	0.00	694.99 ✓	
	SHREDDING									



Vendor Totals		Number	Name	Gross	Discount	No-Pay	Net		
		11200	IRON MOUNTAIN	694.99	0.00	0.00	694.99		
Vendor#	Vendor Name	Class		Pay Code					
14364	JACQUELINE HERRERA ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
072022		07/21/20	07/20/20	07/27/20		37.00	0.00	0.00	37.00 ✓
		TRAVEL REIM <i>7/15 - medication pick up</i>							
Vendor Totals		Number	Name	Gross	Discount	No-Pay	Net		
		14364	JACQUELINE HERRERA	37.00	0.00	0.00	37.00		
Vendor#	Vendor Name	Class		Pay Code					
L0700	LABCORP OF AMERICA HOLDINGS ✓	M							
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
73570133 ✓		07/20/20	07/02/20	07/27/20		15.00	0.00	0.00	15.00 ✓
		LAB SERVICES							
73458398 ✓		07/20/20	07/02/20	07/27/20		15.00	0.00	0.00	15.00 ✓
		LAB SERVICES							
73562618 ✓		07/20/20	07/02/20	07/27/20		79.25	0.00	0.00	79.25 ✓
		LAB SERVICES							
Vendor Totals		Number	Name	Gross	Discount	No-Pay	Net		
		L0700	LABCORP OF AMERICA HOLDINGS	109.25	0.00	0.00	109.25		
Vendor#	Vendor Name	Class		Pay Code					
12628	LEGATO ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
C2394 ✓		07/20/20	05/31/20	06/30/20		1,358.33	0.00	0.00	1,358.33 ✓
		BILLBOARD/FLYER							
Vendor Totals		Number	Name	Gross	Discount	No-Pay	Net		
		12628	LEGATO	1,358.33	0.00	0.00	1,358.33		
Vendor#	Vendor Name	Class		Pay Code					
10972	M G TRUST ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
071822		07/20/20	07/18/20	07/27/20		640.86	0.00	0.00	640.86 ✓
		PAYROLL DEDUCT							
Vendor Totals		Number	Name	Gross	Discount	No-Pay	Net		
		10972	M G TRUST	640.86	0.00	0.00	640.86		
Vendor#	Vendor Name	Class		Pay Code					
14512	✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
071422		07/20/20	07/14/20	07/27/20		50.00	0.00	0.00	50.00 ✓
		REFUND							
Vendor Totals		Number	Name	Gross	Discount	No-Pay	Net		
		14512		50.00	0.00	0.00	50.00		
Vendor#	Vendor Name	Class		Pay Code					
M2178	MCKESSON MEDICAL SURGICAL INC ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
19569041 ✓		07/13/20	07/08/20	08/05/20		115.12	0.00	0.00	115.12 ✓
		SUPPLIES							
Vendor Totals		Number	Name	Gross	Discount	No-Pay	Net		
		M2178	MCKESSON MEDICAL SURGICAL INC	115.12	0.00	0.00	115.12		
Vendor#	Vendor Name	Class		Pay Code					
11141	MEDICAL DATA SYSTEMS, INC. ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net

172622	✓		07/19/20	06/30/20	07/25/20		286.97	0.00	0.00	286.97	✓		
COLLECTION FEES													
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net	
							11141	MEDICAL DATA SYSTEMS, INC.	286.97	0.00	0.00	286.97	
Vendor#	Vendor Name						Class	Pay Code					
10613	MEDIMPACT HEALTHCARE SYS, INC.						✓	A/P					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net			
30485319	✓		07/20/20	07/08/20	07/28/20		35.51	0.00	0.00	35.51	✓		
INDIGENT													
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net	
							10613	MEDIMPACT HEALTHCARE SYS, INC.	35.51	0.00	0.00	35.51	
Vendor#	Vendor Name						Class	Pay Code					
M2470	MEDLINE INDUSTRIES INC						✓	M					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net			
2217836203	✓		07/19/20	07/02/20	07/27/20		65.98	0.00	0.00	65.98	✓		
SUPPLIES													
2218013656	✓		07/19/20	07/04/20	07/29/20		133.50	0.00	0.00	133.50	✓		
SUPPLIES													
2218110196	✓		07/19/20	07/04/20	07/29/20		167.66	0.00	0.00	167.66	✓		
SUPPLIES													
2218013658	✓		07/19/20	07/04/20	07/29/20		910.39	0.00	0.00	910.39	✓		
SUPPLIES													
2218013654	✓		07/19/20	07/04/20	07/29/20		331.64	0.00	0.00	331.64	✓		
SUPPLIES													
2218013652	✓		07/19/20	07/04/20	07/29/20		165.82	0.00	0.00	165.82	✓		
SUPPLIES													
2218013653	✓		07/19/20	07/04/20	07/29/20		165.82	0.00	0.00	165.82	✓		
SUPPLIES													
2218013657	✓		07/19/20	07/04/20	07/29/20		2,921.35	0.00	0.00	2,921.35	✓		
SUPPLIES													
2218133865	✓		07/19/20	07/05/20	07/30/20		57.00	0.00	0.00	57.00	✓		
SUPPLIES													
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net	
							M2470	MEDLINE INDUSTRIES INC	4,919.16	0.00	0.00	4,919.16	
Vendor#	Vendor Name						Class	Pay Code					
10963	MEMORIAL MEDICAL CLINIC						✓						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net			
070122			07/20/20	07/14/20	07/27/20		195.00	0.00	0.00	195.00	✓		
PAYROLL DEDUCT													
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net	
							10963	MEMORIAL MEDICAL CLINIC	195.00	0.00	0.00	195.00	
Vendor#	Vendor Name						Class	Pay Code					
10536	MORRIS & DICKSON CO, LLC						✓						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net			
8411501	✓		07/20/20	07/10/20	07/20/20		338.94	0.00	0.00	338.94	✓		
INVENTORY													
8411500	✓		07/20/20	07/10/20	07/20/20		47.75	0.00	0.00	47.75	✓		
INVENTORY													
CM50034	✓		07/20/20	06/30/20	07/10/20		-21.89	0.00	0.00	-21.89	✓		
CREDIT 7870508													
8389857	✓		07/20/20	07/04/20	07/14/20		228.33	0.00	0.00	228.33	✓		



8387171	✓	INVENTORY	07/20/20	07/04/20	07/14/20	3,384.46	0.00	0.00	3,384.46	✓
8389855	✓	INVENTORY	07/20/20	07/04/20	07/14/20	491.64	0.00	0.00	491.64	✓
8387173	✓	INVENTORY	07/20/20	07/04/20	07/14/20	64.36	0.00	0.00	64.36	✓
8391214	✓	INVENTORY	07/20/20	07/05/20	07/15/20	3,617.30	0.00	0.00	3,617.30	✓
8393895	✓	INVENTORY	07/20/20	07/05/20	07/15/20	336.67	0.00	0.00	336.67	✓
8393091	✓	INVENTORY	07/20/20	07/05/20	07/15/20	220.02	0.00	0.00	220.02	✓
8393893	✓	INVENTORY	07/20/20	07/05/20	07/15/20	15.04	0.00	0.00	15.04	✓
4726	✓	INVENTORY	07/20/20	07/06/20	07/16/20	-1.83	0.00	0.00	-1.83	✓
8396358	✓	CREDIT	07/20/20	07/06/20	07/16/20	74.69	0.00	0.00	74.69	✓
8397892	✓	INVENTORY	07/20/20	07/06/20	07/16/20	5,457.96	0.00	0.00	5,457.96	✓
8396360	✓	INVENTORY	07/20/20	07/06/20	07/16/20	207.54	0.00	0.00	207.54	✓
8398063	✓	INVENTORY	07/20/20	07/06/20	07/16/20	3,634.19	0.00	0.00	3,634.19	✓
8404642	✓	INVENTORY	07/20/20	07/07/20	07/17/20	32.52	0.00	0.00	32.52	✓
8404643	✓	INVENTORY	07/20/20	07/07/20	07/17/20	593.23	0.00	0.00	593.23	✓
8401516	✓	INVENTORY	07/20/20	07/07/20	07/17/20	81.75	0.00	0.00	81.75	✓
8412650	✓	INVENTORY	07/20/20	07/11/20	07/21/20	306.32	0.00	0.00	306.32	✓
8412649	✓	INVENTORY	07/20/20	07/11/20	07/21/20	3,705.87	0.00	0.00	3,705.87	✓
8415636	✓	INVENTORY	07/20/20	07/11/20	07/21/20	88.99	0.00	0.00	88.99	✓
8415635	✓	INVENTORY	07/20/20	07/11/20	07/21/20	393.75	0.00	0.00	393.75	✓
5923	✓	INVENTORY	07/20/20	07/11/20	07/21/20	-129.41	0.00	0.00	-129.41	✓
8414231	✓	CREDIT 3507004	07/20/20	07/11/20	07/21/20	129.01	0.00	0.00	129.01	✓
8417779	✓	INVENTORY	07/20/20	07/12/20	07/22/20	283.48	0.00	0.00	283.48	✓
8417780	✓	INVENTORY	07/20/20	07/12/20	07/22/20	198.46	0.00	0.00	198.46	✓
8417781	✓	INVENTORY	07/20/20	07/12/20	07/22/20	80.32	0.00	0.00	80.32	✓
8419669	✓	INVENTORY	07/20/20	07/12/20	07/22/20	814.54	0.00	0.00	814.54	✓
		INVENTORY								

8417777	✓		07/20/20	07/12/20	07/22/20		71.20	0.00	0.00	71.20	✓	
		INVENTORY										
8419668	✓		07/20/20	07/12/20	07/22/20		588.23	0.00	0.00	588.23	✓	
		INVENTORY										
8417776	✓		07/20/20	07/12/20	07/22/20		5.07	0.00	0.00	5.07	✓	
		INVENTORY										
8425444	✓		07/20/20	07/13/20	07/23/20		70.30	0.00	0.00	70.30	✓	
		INVENTORY										
CM52650	✓		07/20/20	07/13/20	07/23/20		-438.49	0.00	0.00	-438.49	✓	
		CREDIT INV8318828										
8425445	✓		07/20/20	07/13/20	07/23/20		25.09	0.00	0.00	25.09	✓	
		INVENTORY										
CM53086	✓		07/20/20	07/14/20	07/24/20		-55.97	0.00	0.00	-55.97	✓	
		CREDIT INV 8383082										
8427907	✓		07/20/20	07/14/20	07/24/20		1,663.31	0.00	0.00	1,663.31	✓	
		INVENTORY										
8427906	✓		07/20/20	07/14/20	07/24/20		221.90	0.00	0.00	221.90	✓	
		INVENTORY										
8430629	✓		07/20/20	07/14/20	07/24/20		1.81	0.00	0.00	1.81	✓	
		INVENTORY										
CM53087	✓		07/20/20	07/14/20	07/24/20		-1,927.27	0.00	0.00	-1,927.27	✓	
		CREDIT INV 8387171										
8387172A	✓		07/21/20	07/04/20	07/14/20		74.69	0.00	0.00	74.69	✓	
		INVENTORY										
8409166A	✓		07/21/20	07/10/20	07/20/20		74.69	0.00	0.00	74.69	✓	
		INVENTORY										
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							10536	MORRIS & DICKSON CO, LLC	25,048.56	0.00	0.00	25,048.56
Vendor#	Vendor Name		Class		Pay Code							
M2659	MXR IMAGING, INC ✓		M									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
8800921610	✓		07/19/20	07/08/20	08/07/20		241.14	0.00	0.00	241.14	✓	
	SUPPLIES											
8800922363	✓		07/19/20	07/12/20	08/11/20		202.37	0.00	0.00	202.37	✓	
	SUPPLIES											
8800922362	✓		07/19/20	07/12/20	08/11/20		-259.45	0.00	0.00	-259.45	✓	
	CREDIT 8800918143											
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							M2659	MXR IMAGING, INC	184.06	0.00	0.00	184.06
Vendor#	Vendor Name		Class		Pay Code							
11472	OCCUPRO LLC ✓											
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
26798	✓		07/20/20	07/07/20	08/06/20		502.11	0.00	0.00	502.11	✓	
	LICENSE											
Vendor Totals							Number	Name	Gross	Discount	No-Pay	Net
							11472	OCCUPRO LLC	502.11	0.00	0.00	502.11
Vendor#	Vendor Name		Class		Pay Code							
O1500	OLYMPUS AMERICA INC ✓		M									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net		
32913465	✓		07/19/20	07/07/20	08/01/20		1,125.00	0.00	0.00	1,125.00	✓	
	CONTRACT											



Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net	
		O1500	OLYMPUS AMERICA INC		1,125.00	0.00	0.00	1,125.00	
Vendor#	Vendor Name			Class	Pay Code				
P1470	PHILIP THOMAE PHOTOGRAPHER			W					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
10222		07/20/20	07/18/20	07/20/20		100.00	0.00	0.00	100.00
	PHOTO PRINTS								
Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net	
		P1470	PHILIP THOMAE PHOTOGRAPHER		100.00	0.00	0.00	100.00	
Vendor#	Vendor Name			Class	Pay Code				
P2100	PORT LAVACA WAVE			W					
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
063022		07/19/20	06/30/20	07/25/20		605.78	0.00	0.00	605.78
	VACCINE CONFIDENCE AD								
Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net	
		P2100	PORT LAVACA WAVE		605.78	0.00	0.00	605.78	
Vendor#	Vendor Name			Class	Pay Code				
11080	RADSOURCE								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
SC32690722		07/19/20	06/16/20	07/11/20		1,708.33	0.00	0.00	1,708.33
	LEASE 7/16 -8/15 '22								
Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net	
		11080	RADSOURCE		1,708.33	0.00	0.00	1,708.33	
Vendor#	Vendor Name			Class	Pay Code				
11764	ROBERT RODRIQUEZ								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
071522		07/20/20	07/15/20	07/27/20	28.81	26.68	0.00	0.00	26.68 28.81
	TRAVEL REIMB								
Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net	
		11764	ROBERT RODRIQUEZ		28.81 26.68	0.00	0.00	26.68 28.81	
Vendor#	Vendor Name			Class	Pay Code				
10936	SIEMENS FINANCIAL SERVICES								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
56382200045486		07/19/20	07/02/20	07/22/20		4,038.24	0.00	0.00	4,038.24
	JULY 22 LEASE								
Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net	
		10936	SIEMENS FINANCIAL SERVICES		4,038.24	0.00	0.00	4,038.24	
Vendor#	Vendor Name			Class	Pay Code				
10699	SIGN AD, LTD.								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
276283		07/20/20	07/01/20	07/11/20		400.00	0.00	0.00	400.00
	LEASE/ADVERTISING								
Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net	
		10699	SIGN AD, LTD.		400.00	0.00	0.00	400.00	
Vendor#	Vendor Name			Class	Pay Code				
12472	SOMETHING MORE MEDIA, INC.								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
1796		07/20/20	06/30/20	07/15/20		2,225.00	0.00	0.00	2,225.00
	ADVERTISING								
Vendor Totals		Number	Name		Gross	Discount	No-Pay	Net	
		12472	SOMETHING MORE MEDIA, INC.		2,225.00	0.00	0.00	2,225.00	

Vendor#	Vendor Name	Class	Pay Code								
12288	SPBS CLINICAL EQUIPMENT SRVC ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
INV011323 ✓		07/13/20	07/01/20	08/05/20		13,384.80	0.00	0.00	13,384.80 ✓		
BI BED SERV QTRLY JUNE 22											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						12288	SPBS CLINICAL EQUIPMENT SRVC	13,384.80	0.00	0.00	13,384.80
S3960	STERICYCLE, INC ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
4011030835 ✓		07/20/20	07/01/20	07/31/20		2,697.55	0.00	0.00	2,697.55 ✓		
DISPOSAL											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						S3960	STERICYCLE, INC	2,697.55	0.00	0.00	2,697.55
T2204	TEXAS MUTUAL INSURANCE CO ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
1003824162 ✓		07/20/20	07/07/20	07/27/20		177.00	0.00	0.00	177.00 ✓		
INSURANCE											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						T2204	TEXAS MUTUAL INSURANCE CO	177.00	0.00	0.00	177.00
11908	TMS SOUTH ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
INV52860 ✓		07/13/20	07/12/20	08/11/20		194.08	0.00	0.00	194.08 ✓		
SUPPLIES											
INV52859 ✓		07/13/20	07/12/20	08/11/20		160.90	0.00	0.00	160.90 ✓		
SUPPLIES											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						11908	TMS SOUTH	354.98	0.00	0.00	354.98
T3130	TRI-ANIM HEALTH SERVICES INC ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
65113765 ✓		07/19/20	07/08/20	08/02/20		47.75	0.00	0.00	47.75 ✓		
SUPPLIES											
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						T3130	TRI-ANIM HEALTH SERVICES INC	47.75	0.00	0.00	47.75
U1064	UNIFIRST HOLDINGS INC ✓										
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
8400398279 ✓		07/20/20	06/30/20	07/25/20		181.03	0.00	0.00	181.03 ✓		
LAUNDRY											
8400398494 ✓		07/20/20	07/04/20	07/29/20		59.82	0.00	0.00	59.82 ✓		
LAUNDRY											
8400398493 ✓		07/20/20	07/04/20	07/29/20		48.15	0.00	0.00	48.15 ✓		
LAUNDRY											
8400398516 ✓		07/20/20	07/04/20	07/29/20		2,106.88	0.00	0.00	2,106.88 ✓		
LAUNDRY											
8400398805 ✓		07/20/20	07/07/20	07/31/20		186.86	0.00	0.00	186.86 ✓		
LAUNDRY											
8400398820 ✓		07/20/20	07/07/20	07/31/20		86.58	0.00	0.00	86.58 ✓		



Vendor#	Vendor Name	Class	Pay Code						
	LAUNDRY								
8400398806	✓	07/20/20	07/07/20	07/31/20		225.23	0.00	0.00	225.23 ✓
	LAUNDRY								
8400398804	✓	07/20/20	07/07/20	07/31/20		191.69	0.00	0.00	191.69 ✓
	LAUNDRY								
8400398807	✓	07/20/20	07/07/20	07/31/20		211.12	0.00	0.00	211.12 ✓
	LAUNDRY								
8400398828	✓	07/20/20	07/07/20	07/31/20		1,318.79	0.00	0.00	1,318.79 ✓
	LAUNDRY								
8400398842	✓	07/20/20	07/07/20	07/31/20		104.76	0.00	0.00	104.76 ✓
	LAUNDRY								
8400398803	✓	07/20/20	07/07/20	07/31/20		30.71	0.00	0.00	30.71 ✓
	LAUNDRY								
Vendor Totals				Number	Name	Gross	Discount	No-Pay	Net
		U1064	UNIFIRST HOLDINGS INC			4,751.62	0.00	0.00	4,751.62
Vendor#	Vendor Name		Class	Pay Code					
V0554	VCS SECURITY SYSTEMS ✓		W						
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
246169		07/21/20	06/27/20	07/27/20		626.51	0.00	0.00	626.51 ✓
	CAMERA INSTALL IT								
Vendor Totals				Number	Name	Gross	Discount	No-Pay	Net
		V0554	VCS SECURITY SYSTEMS			626.51	0.00	0.00	626.51
Vendor#	Vendor Name		Class	Pay Code					
10793	WAGeworks, INC. ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
071822		07/20/20	07/14/20	07/27/20		3,264.15	0.00	0.00	3,264.15 ✓
	PAYROLL DEDUCT								
Vendor Totals				Number	Name	Gross	Discount	No-Pay	Net
		10793	WAGeworks, INC.			3,264.15	0.00	0.00	3,264.15
Vendor#	Vendor Name		Class	Pay Code					
I1110	WERFEN USA LLC ✓								
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D Pay	Gross	Discount	No-Pay	Net
9111184399	✓	07/13/20	07/11/20	08/11/20		1,770.00	0.00	0.00	1,770.00 ✓
	SUPPLIES								
Vendor Totals				Number	Name	Gross	Discount	No-Pay	Net
		I1110	WERFEN USA LLC			1,770.00	0.00	0.00	1,770.00

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	396,154.73	0.00	0.00	396,154.73

pg a correction  
 $\{ < 26.68 \}$   
 $\{ + 29.91 \}$   


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**\$396,154.84**

APPROVED ON

JUL 21 2022

BY COUNTY AUDITOR  
 CALHOUN COUNTY, TEXAS  
 CLK # 195748-195807

RECEIVED BY THE  
COUNTY AUDITOR ON

**JUL 25 2022**

07/25/2022

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

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AP Open Invoice List

ap\_open\_invoice.template

Due Dates Through: 08/11/2022

Vendor# Vendor Name

Class Pay Code

A2218 AQUA BEVERAGE COMPANY ✓

M

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
202679	✓ WATER	07/25/20	05/31/20	06/25/20		45.96	0.00	0.00	45.96 ✓
207719	✓ WATER	07/25/20	06/30/20	07/25/20		55.96	0.00	0.00	55.96

Vendor Total#	Number	Name	Gross	Discount	No-Pay	Net
A2218		AQUA BEVERAGE COMPANY	101.92	0.00	0.00	101.92

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	101.92	0.00	0.00	101.92

**APPROVED ON**

**JUL 25 2022**

BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

CK# 195750



JUL 25 2022

07/25/2022  
CALHOUN COUNTY, TEXAS  
13:31

MEMORIAL MEDICAL CENTER  
AP Open Invoice List  
Due Dates Through: 08/11/2022

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ap\_open\_invoice.template

Vendor#	Vendor Name	Class	Pay Code							
12044	DRIESSEN WATER INC. (CULLIGAN)									
Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net	
2701184	✓ WATER	07/25/20	05/09/20	06/22/20		407.50	0.00	0.00	407.50	✓
2726249	✓ WATER	07/25/20	05/26/20	06/22/20		31.50	0.00	0.00	31.50	✓
2794533	✓ WATER	07/25/20	06/26/20	07/22/20		31.50	0.00	0.00	31.50	✓
2848396	✓ WATER	07/25/20	07/13/20	08/11/20		43.50	0.00	0.00	43.50	✓
Vendor Totals		Number	Name			Gross	Discount	No-Pay	Net	
		12044	DRIESSEN WATER INC. (CULLIGAN)			514.00	0.00	0.00	514.00	

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	514.00	0.00	0.00	514.00

APPROVED ON

JUL 25 2022

BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

CK # 195762

RECEIVED BY THE  
COUNTY AUDITOR ON

RUN DATE: 07/21/22

JUL 21 2022

MEMORIAL MEDICAL CENTER  
EDIT LIST FOR PATIENT REFUNDS ARID=0001

PAGE 1  
APCDEDIT

PATIENT  
NUMBER  
CALHOUN COUNTY, TEXAS  
PAYEE NAME

PATIENT NUMBER	PAYEE NAME	DATE	AMOUNT	PAY CODE	PAT TYPE	DESCRIPTION	GL NUM
		072022	20.00		✓		
		072022	86.06		✓		
		072022	102.00		✓		
		072022	25.00		✓		
		072022	19.68		✓		
		072022	150.00		✓		
		072022	95.00		✓		
		072022	50.00		✓		
		072022	32.31		✓		
		072022	145.99		✓		
		072022	171.02		✓		
		072022	100.40		✓		
		072022	300.00		✓		
		072022	346.38		✓		
		072022	18.54		✓		
		072022	160.00		✓		
		072022	5.00		✓		
		072022	150.00		✓		
		072022	5.00		✓		
		072022	90.00		✓		

ARID=0001 TOTAL

2072.38 ✓

TOTAL

2072.38

APPROVED ON

JUL 21 2022

BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS  
CK#195815-195834



RECEIVED BY THE  
COUNTY AUDITOR ON

JUL 25 2022

07/25/2022  
CALHOUN COUNTY, TEXAS  
13:29

MEMORIAL MEDICAL CENTER

AP Open Invoice List

Due Dates Through: 08/11/2022

0  
ap\_open\_invoice.template

Vendor# Vendor Name

11183 FRONTIER ✓

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
070222A		07/25/20	07/02/20	07/26/20		1,072.33	0.00	0.00	1,072.33 ✓

TELEPHONE

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11183	FRONTIER	1,072.33	0.00	0.00	1,072.33

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	1,072.33	0.00	0.00	1,072.33

APPROVED ON

JUL 25 2022

BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

CK# 195768

RECEIVED BY THE COUNTY AUDITOR ON

07/25/2022  
13:31  
JUL 25 2022

MEMORIAL MEDICAL CENTER  
AP Open Invoice List  
Due Dates Through: 08/11/2022

0  
ap\_open\_invoice.template

CALHOUN COUNTY, TEXAS

Vendor	Vendor Name	Class	Pay Code	Tran Dt	Inv Dt	Due Dt	Check D	Pay	Gross	Discount	No-Pay	Net
C1010	SPARKLIGHT		W									
	Invoice#	Comment										
	071522			07/25/20	07/15/20	07/16/20			115.78	0.00	0.00	115.78 ✓
		CABLE										
	071522C			07/25/20	07/15/20	07/16/20			93.65	0.00	0.00	93.65 ✓
		CABLE										
	071522A			07/25/20	07/15/20	07/16/20			2,258.00	0.00	0.00	2,258.00 ✓
		CABLE										
	071522B			07/25/20	07/15/20	07/16/20			1,683.58	0.00	0.00	1,683.58 ✓
		CABLE										
Vendor Totals:		Number	Name					Gross	Discount	No-Pay	Net	
		C1010	SPARKLIGHT					4,151.01	0.00	0.00	4,151.01	

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	4,151.01	0.00	0.00	4,151.01

APPROVED ON

JUL 25 2022

BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

CK#195798



# MCKESSON

# STATEMENT

As of: 07/22/2022

Page: 002

To ensure proper credit to your account, detach and return this stub with your remittance

Company: 8000

DC: 8115

As of: 07/22/2022  
Mail to:

Page: 002  
Comp: 8000

MEMORIAL MEDICAL CENTER  
AP  
815 N VIRGINIA STREET  
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT  
Statement for information only

Territory:

Customer: 632536  
Date: 07/23/2022

AMT DUE REMITTED VIA ACH DEBIT  
Statement for information only

Cust: 632536  
Date: 07/23/2022

PLEASE CHECK ANY  
ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number
--------------	----------	-------------------	----------------------------------	-------------	---------------	----------------	-----	--------------	-----	-------------------

PF column legend: P = Past Due Item, F = Future Due Item, blank = Current Due Item

TOTAL: National Acct 632536 MEMORIAL MEDICAL CENTER

Subtotals: 6,139.87 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 08/07/2017 2,451.97

If Paid By 07/26/2022,  
Pay This Amount:

6,017.08 USD

If Paid After 07/26/2022,  
Pay this Amount:

6,139.87 USD

Due If Paid On Time:

USD

6,017.08

Disc lost if paid late:

122.79

Due If Paid Late:

USD

6,139.87

0 \* 78 +  
3 \* 146 \* 36 +  
86 \* 02 +  
2 \* 763 \* 66 +  
20 \* 26 +  
6 \* 017 \* 08

APPROVED ON

JUL 25 2022

BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

For AR Inquiries please <> contact 800-867-0333

# MCKESSON

# STATEMENT

As of: 07/22/2022

Page: 001

To ensure proper credit to your account, detach and return this stub with your remittance

Company: 8000

DC: 8115

As of: 07/22/2022  
Mail to:

Page: 001  
Comp: 8000

HEB PHCY 0434/MEM MED PHS  
MEMORIAL MEDICAL CENTER  
VICKY KALISEK  
815 N VIRGINIA ST  
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT  
Statement for information only

Territory: 7790

Customer: 190813  
Date: 07/23/2022

AMT DUE REMITTED VIA ACH DEBIT  
Statement for information only

Cust: 190813  
Date: 07/23/2022

PLEASE CHECK ANY  
ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
07/20/2022	07/26/2022	7354955056	2017056632	115Invoice	0.02	0.80		0.78 ✓		7354955056	

PF column legend: P = Past Due Item, F = Future Due Item, blank = Current Due Item

TOTAL: Customer Number 190813 HEB PHCY 0434/MEM MED PHS

Subtotals: 0.80 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 07/18/2022 3,841.41

If Paid By 07/26/2022,  
Pay This Amount: 0.78 USD

If Paid After 07/26/2022,  
Pay this Amount: 0.80 USD

Due If Paid On Time:  
USD 0.78 ✓

Disc lost if paid late: 0.02

Due If Paid Late:  
USD 0.80

APPROVED ON

JUL 25 2022

BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333



# MCKESSON

# STATEMENT

As of: 07/22/2022

Page: 001

To ensure proper credit to your account, detach and return this stub with your remittance

Company: 8000

DC: 8115

As of: 07/22/2022

Page: 001

WALMART 1098/MEM MED PHS  
MEMORIAL MEDICAL CENTER  
VICKY KALISEK  
815 N VIRGINIA ST  
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT  
Statement for information only

Territory: 400

Mail to:

Comp: 8000

Customer: 256342

Date: 07/23/2022

AMT DUE REMITTED VIA ACH DEBIT  
Statement for information only

Cust: 256342 PLEASE CHECK ANY  
Date: 07/23/2022 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
<b>Customer Number 256342 WALMART 1098/MEM MED PHS</b>											
07/16/2022	07/26/2022	7354403861	0715220913	115Invoice	21.06	1,053.15		1,032.09 ✓		7354403861	
07/18/2022	07/26/2022	7354412218	39943363	115Invoice	2.20	109.98		107.78 ✓		7354412218	
07/18/2022	07/26/2022	7354412219	40045940	115Invoice		0.16		0.16 ✓		7354412219	
07/19/2022	07/26/2022	7354871586	0718220901	115Invoice	7.64	381.98		374.34 ✓		7354871586	
07/20/2022	07/26/2022	7354983577	40300368	115Invoice		0.09		0.09 ✓		7354983577	
07/20/2022	07/26/2022	7354983578	40360458	115Invoice	0.07	3.38		3.31 ✓		7354983578	
07/20/2022	07/26/2022	7355121942	0719220741	195Invoice	5.91	295.42		289.51 ✓		7355121942	
07/20/2022	07/26/2022	7355121943	0719220736	115Invoice	0.67	33.36		32.69 ✓		7355121943	
07/21/2022	07/26/2022	7355237685	40421199	115Invoice		0.16		0.16 ✓		7355237685	
07/21/2022	07/26/2022	7355390480	0720220738	115Invoice	7.04	352.00		344.96 ✓		7355390480	
07/22/2022	07/26/2022	7355498925	40532311	115Invoice	3.67	183.45		179.78 ✓		7355498925	
07/22/2022	07/26/2022	7355498926	40532311	115Invoice	0.04	1.90		1.86 ✓		7355498926	
07/22/2022	07/26/2022	7355498927	40595640	115Invoice	15.89	794.59		778.70 ✓		7355498927	
07/22/2022	07/26/2022	7355642749	0721221108	115Invoice	0.02	0.95		0.93 ✓		7355642749	

PF column legend: P = Past Due Item, F = Future Due Item, blank = Current Due Item

**TOTAL: Customer Number 256342 WALMART 1098/MEM MED PHS**

Subtotals: 3,210.57 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 07/18/2022 3,841.41

If Paid By 07/26/2022,  
Pay This Amount:

3,146.36 USD

If Paid After 07/26/2022,  
Pay this Amount:

3,210.57 USD

Due If Paid On Time:

USD 3,146.36 ✓

Disc lost if paid late:

64.21

Due if Paid Late:

USD 3,210.57

APPROVED ON

JUL 25 2022

BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

For AR Inquiries please <> contact 800-867-0333

# MCKESSON

# STATEMENT

As of: 07/22/2022

Page: 001

To ensure proper credit to your account, detach and return this stub with your remittance

Company: 8000

DC: 8115

As of: 07/22/2022

Page: 001

HEB PHY FC 490/MEM MC PHS  
MEMORIAL MEDICAL CENTER  
VICKY KALISEK  
815 N VIRGINIA ST  
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT  
Statement for information only

Territory: 400

Mail to:

Comp: 8000

Customer: 464450

Date: 07/23/2022

AMT DUE REMITTED VIA ACH DEBIT  
Statement for information only

Cust: 464450 PLEASE CHECK ANY  
Date: 07/23/2022 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
Customer Number 464450 HEB PHY FC 490/MEM MC PHS											
07/21/2022	07/26/2022	7355215465	55x621113	115Invoice	1.10	55.23		54.13	✓	7355215465	
07/22/2022	07/26/2022	7355463191	55x623458	115Invoice	0.65	32.54		31.89	✓	7355463191	

PF column legend: P = Past Due Item, F = Future Due Item, blank = Current Due Item

TOTAL: Customer Number 464450 HEB PHY FC 490/MEM MC PHS

Subtotals: 87.77 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 3,841.41  
07/18/2022

If Paid By 07/26/2022,  
Pay This Amount:

86.02 USD

If Paid After 07/26/2022,  
Pay this Amount:

87.77 USD

Due If Paid On Time:

USD 86.02 ✓

Disc lost if paid late:

1.75

Due If Paid Late:

USD 87.77

APPROVED ON

JUL 25 2022

BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

For AR Inquiries please <> contact 800-867-0333



# MCKESSON

# STATEMENT

As of: 07/22/2022

Page: 001

To ensure proper credit to your account, detach and return this stub with your remittance

Company: 8000

DC: 8115

As of: 07/22/2022  
Mail to:

Page: 001  
Comp: 8000

CVS PHCY 8923/MEM MC PHS  
MEMORIAL MEDICAL CENTER  
VICKY KALISEK  
815 N VIRGINIA ST  
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT  
Statement for information only

Territory: 400

Customer: 835434  
Date: 07/23/2022

AMT DUE REMITTED VIA ACH DEBIT  
Statement for information only

Cust: 835434  
Date: 07/23/2022

PLEASE CHECK ANY  
ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
07/20/2022	07/26/2022	7354979664	632536 1788264	115Invoice	56.40	2,820.06		2,763.66	✓	7354979664	

PF column legend: P = Past Due Item, F = Future Due Item, blank = Current Due Item

**TOTAL:** Customer Number 835434 CVS PHCY 8923/MEM MC PHS  
Subtotals: 2,820.06 USD

Future Due: 0.00

Past Due: 0.00

Last Payment 9,255.14  
07/11/2022

If Paid By 07/26/2022,  
Pay This Amount: 2,763.66 USD

If Paid After 07/26/2022,  
Pay this Amount: 2,820.06 USD

Due If Paid On Time:  
USD 2,763.66 ✓  
Disc lost if paid late: 56.40  
Due If Paid Late:  
USD 2,820.06

APPROVED ON

JUL 25 2022

BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

For AR Inquiries please contact 800-867-0333

# MCKESSON

# STATEMENT

As of: 07/22/2022

Page: 001

To ensure proper credit to your account, detach and return this stub with your remittance

Company: 8000

DC: 8115

As of: 07/22/2022

Page: 001

CVS PHCY 7475/MEM MC PHS  
MEMORIAL MEDICAL CENTER  
VICKY KALISEK  
815 N VIRGINIA ST  
PORT LAVACA TX 77979

AMT DUE REMITTED VIA ACH DEBIT  
Statement for information only

Territory: 400

Mail to:

Comp: 8000

Customer: 835438

Date: 07/23/2022

AMT DUE REMITTED VIA ACH DEBIT  
Statement for information only

Cust: 835438 PLEASE CHECK ANY  
Date: 07/23/2022 ITEMS NOT PAID (✓)

Billing Date	Due Date	Receivable Number	National Account Order Reference	Description	Cash Discount	Amount (gross)	P F	Amount (net)	P F	Receivable Number	
Customer Number 835438 CVS PHCY 7475/MEM MC PHS											
07/20/2022	07/26/2022	7355145932	1788059	115Invoice	0.41	20.67		20.26	✓	7355145932	

PF column legend: P = Past Due Item, F = Future Due Item, blank = Current Due Item

TOTAL: Customer Number 835438 CVS PHCY 7475/MEM MC PHS  
Subtotals: 20.67 USD

Future Due: 0.00

If Paid By 07/26/2022,

Pay This Amount:

20.26 USD

Due If Paid On Time:

USD

20.26 ✓

Past Due: 0.00

If Paid After 07/26/2022,

Pay this Amount:

20.67 USD

Disc lost if paid late:

0.41

Last Payment 3,841.41  
07/18/2022

Due If Paid Late:

USD

20.67

APPROVED ON

JUL 25 2022

BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

For AR Inquiries please <> contact 800-867-0333





STATEMENT

Statement Number: 63412898  
Date: 07-22-2022

<b>Served By:</b>	AMERISOURCEBERGEN DRUG CORP 12727 W. AIRPORT BLVD. SUGAR LAND TX 77478-6101	<b>Customer:</b>	WALGREENS #12494 340B MEMORIAL MEDICAL CENTER 1302 N VIRGINIA ST PORT LAVACA TX 77979-2509	<b>Customer Number</b>
	DEA: RA0289276 866-451-9655			100135284 / 037028186
				<b>Terms</b>
				Sat - Fri Due in 7 days

<b>Remit To:</b>	AMERISOURCEBERGEN P.O. Box 905223 CHARLOTTE NC 28290-5223	<b>Summary</b>
		Not Yet Due: 0.00 Current: 1,877.67 Past Due: 0.00 Total Due: 1,877.67 Account Balance: 1,877.67

Account Activity

Document Date	Due Date	Reference Number	Purchase Order Number	Document Type	Original Amount	Last Receipt	Amount Received	Balance
07-18-2022	07-29-2022	3099662376	166734	Invoice	157.78		0.00	157.78 ✓
07-18-2022	07-29-2022	3099662377	166735	Invoice	0.29		0.00	0.29 ✓
07-18-2022	07-29-2022	3099662378	166736	Invoice	154.73		0.00	154.73 ✓
07-18-2022	07-29-2022	3099679293	166783	Invoice	200.88		0.00	200.88 ✓
07-19-2022	07-29-2022	3099815092	166794	Invoice	495.77		0.00	495.77 ✓
07-19-2022	07-29-2022	3099815093	166795	Invoice	0.09		0.00	0.09 ✓
07-20-2022	07-29-2022	3099967695	166804	Invoice	115.37		0.00	115.37 ✓
07-21-2022	07-29-2022	3100107107	166811	Invoice	327.91		0.00	327.91 ✓
07-22-2022	07-29-2022	3100274623	166822	Invoice	424.85		0.00	424.85 ✓

Current	1-15 Days	16-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days
1,877.67	0.00	0.00	0.00	0.00	0.00	0.00

Thank You for Your Payment	
Date	Amount
07-22-2022	(724.74)

Reminders	
Due Date	Amount
07-29-2022	1,877.67
Total Due: 1,877.67 ✓	

APPROVED ON

JUL 25 2022

BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

**MEMORIAL MEDICAL CENTER  
PROSPERITY BANK  
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT --- JULY 18, 2022 - JULY 24, 2022**

<u>Date</u>	<u>Bank Description</u>	<u>MMC Notes</u>
7/22/2022	PAY PLUS ACHTRANS 452579291 101000691339957	- 3rd Party Payor Fee
7/22/2022	EXPERTPAY EXPERTPAY 746003411 91000012413923	- Child Support Payment
7/22/2022	AMERISOURCE BERG PAYMENTS 0100007768 2100002	- 340B Drug Program Expense
7/22/2022	MEMORIAL MEDICAL PAYROLL 746003411 113122650	- Payroll
7/21/2022	PAY PLUS ACHTRANS 452579291 101000690519818	- 3rd Party Payor Fee
7/20/2022	WEBFILE TAX PYMT DD 902/06637580 21000026181	- Sales Tax
7/20/2022	PAY PLUS ACHTRANS 452579291 101000699678920	- 3rd Party Payor Fee
7/19/2022	PAY PLUS ACHTRANS 452579291 101000698810668	- 3rd Party Payor Fee
7/19/2022	MCKESSON DRUG AUTO ACH ACH05103616 910000134	- 340B Drug Program Expense
7/18/2022	PAY PLUS ACHTRANS 452579291 101000697902774	- 3rd Party Payor Fee

<u>Amount</u>	
1.91	1.91 +
2,290.01	5.82 +
724.74*	150.72 +
363,173.23*	18.45 +
5.82	223.90 +
1,392.70*!	400.80 *
150.72	2,290.01 +
18.45	2,290.01 *
3,841.41*	400.80 +
223.90	2,290.01 +
<b>371,822.89</b>	2,690.81 *

Pay Plus

\_\_\_\_\_  
 William Little, CFO  
 Memorial Medical Center

July 25, 2022

\* Approved 07-20-22 CC  
 \*\* Approved 07-13-22 CC

**PROSPERITY BANK  
ELECTRONIC TRANSFERS FOR OPERATING ACCOUNT -- ESTIMATED ACHS**

<u>Date</u>	<u>Description</u>	<u>MMC Notes</u>
8/5/2022	DSH IGT	-DSH IGT

<u>Amount</u>	
2,527.39	371,822.89 +
	724.74 -
	363,173.23 -
	1,392.70 -
	3,841.41 -
	2,690.81 *
<b>2,527.39</b>	2,690.81 +
	2,690.81 -
	0.00 *

\_\_\_\_\_  
 William Little, CFO  
 Memorial Medical Center

July 25, 2022





**Transaction Summary**

Transaction Complete  
Trace #:(

**Texas Health and Human Services Commission  
Memorial Medical Center Operating County**

Payment Total	\$2,527.39
Bank Routing and Account Number	
Settlement Date	8/5/2022
DSH Amount	\$2,527.39
Entered By	Marley Moehrig

**Marley ODonnell**

---

**From:** Texas Health and Human Services Commission <txhhs@public.govdelivery.com>  
**Sent:** Friday, July 15, 2022 2:33 PM  
**To:** Marley ODonnell  
**Subject:** DSH 2020 Redistribution Payment and IGT Call

**CAUTION:** This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.



**TEXAS**  
Health and Human Services

## **DSH 2020 Redistribution Payment and IGT Call**

The Texas Health and Human Services Commission (HHSC) has identified additional federal funds available for Disproportionate Share Hospitals (DSH) 2020, totaling approximately \$51 million dollars (approximately \$76 million dollars all funds). These additional funds are the result of the increase in Federal Medical Assistance Percentage (FMAP) due to COVID, as well as recoupments from overpaid providers that have now been collected.

To fund this payment, additional Intergovernmental Transfer (IGT) is required, which will be collected based on the enhanced FMAP of 67.08%. Additional payments and IGT are included in the "Final IGT and Payment Redist" tab of the DSH 2020 Redistribution file. The IGT file is available for review on the Provider Finance Department website here: [Disproportionate Share Hospitals | Provider Finance Department \(texas.gov\)](#)

As the 8-quarter rule is quickly approaching, HHSC will issue payments and the IGT call concurrently. Cash on hand will be used to support the payment until the IGT is received. If the payments are not fully funded, HHSC may be required to adjust payments proportionately.



To ensure that all government entities receive this notification, HHSC strongly encourages providers to send this information to any government entity who is IGT'ing on their behalf.

Below are the pertinent dates associated with the DSH Redistribution payment:

- August 4 Last date to schedule transfer in TexNet
- August 5 IGT Settlement Date
- August 5 State Owned Hospitals submit Journal Entry
- August 11 Latest DSH Payment Date

\*\*Late IGTs will not be accepted.

Please ensure you select the DSH bucket in TexNet when you enter your IGT. It is imperative that you send a screen shot/PDF copy of the confirmation/trace sheet from TexNet or an email with the confirmation number, settlement date and IGT amount if the TexNet is submitted over the phone, to [DSHPayments@hhsc.state.tx.us](mailto:DSHPayments@hhsc.state.tx.us). Additional information regarding the TexNet process can be found at this link. State owned hospitals must send a copy of their Journal Entry to [DSHPayments@hhsc.state.tx.us](mailto:DSHPayments@hhsc.state.tx.us). HHSC will not send confirmation emails confirming receipt of Trace Sheets.

Please include two contacts and their phone numbers and email addresses, should HHSC have any questions regarding the TexNet received.

If you have questions regarding the DSH payment process, please send an email to [DSHPayments@hhsc.state.tx.us](mailto:DSHPayments@hhsc.state.tx.us).



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State	16,187,288.50	5,328,855.37
Non-State	60,210,081.10	5,561,587.75
<b>Total</b>	<b>76,397,369.60</b>	<b>10,890,443.12</b>

2021 TPI	Hospital Name	County	Ownership Type	Redistributed Payment	IGT to Fund Redistributed Payment
137909111	Memorial Medical Center	Calhoun	Public	7,677.38	2,527.39

RECEIVED BY THE  
COUNTY AUDITOR ON  
**JUL 21 2022**  
07/21/2022  
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

ap\_open\_invoice.template

Dates Through:

Vendor# Vendor Name

Class Pay Code

11816 ASHFORD GARDENS

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
071422A		07/21/20	07/14/20	08/15/20		3,438.65	0.00	0.00	3,438.65

MAY UHC QIPP

Vendor Totals:	Number	Name	Gross	Discount	No-Pay	Net
	11816	ASHFORD GARDENS	3,438.65	0.00	0.00	3,438.65

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	3,438.65	0.00	0.00	3,438.65

APPROVED ON  
**JUL 21 2022**  
BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS  
CK# 195808



RECEIVED BY THE  
COUNTY AUDITOR ON

JUL 21 2022

07/21/2022

10:46

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

0

AP Open Invoice List

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Dates Through:

Class Pay Code

Vendor# Vendor Name

12792 BETHANY SENIOR LIVING

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
070522		07/20/20	07/05/20	08/15/20		30,786.09	0.00	0.00	30,786.09 ✓		
	TRANSFER	<i>NA insurance pymt deposited into mme operating</i>									
070622		07/20/20	07/06/20	08/15/20		3,705.84	0.00	0.00	3,705.84 ✓		
	TRANSFER	"									
070722		07/20/20	07/07/20	08/15/20		3,533.74	0.00	0.00	3,533.74 ✓		
	TRANSFER	"									
070822		07/20/20	07/08/20	08/15/20		1,092.17	0.00	0.00	1,092.17 ✓		
	TRANSFER	"									
071122		07/20/20	07/11/20	08/15/20		9,072.77	0.00	0.00	9,072.77 ✓		
	TRANSFER	"									
071222		07/20/20	07/12/20	08/15/20		27,072.34	0.00	0.00	27,072.34 ✓		
	TRANSFER	"									
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						12792	BETHANY SENIOR LIVING	75,262.95	0.00	0.00	75,262.95

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	75,262.95	0.00	0.00	75,262.95

APPROVED ON

JUL 21 2022

BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

CL#195809

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COUNTY AUDITOR ON

JUL 21 2022  
10:46

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

Dates Through:

ap\_open\_invoice.template

Vendor# Vendor Name

Class Pay Code

11820 FORTBEND HEALTHCARE CENTER

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
----------	---------	---------	--------	--------	---------	-----------	----------	--------	-----

071422A		07/21/20	07/14/20	08/15/20		1,635.10	0.00	0.00	1,635.10 ✓
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MAY UHC QIPP

Vendor Total#	Number	Name	Gross	Discount	No-Pay	Net
---------------	--------	------	-------	----------	--------	-----

11820		FORTBEND HEALTHCARE CENTER	1,635.10	0.00	0.00	1,635.10
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Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	1,635.10	0.00	0.00	1,635.10

APPROVED ON

JUL 21 2022

BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

CL#195810



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JUL 21 2022  
07/21/2022  
10:43  
CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

Dates Through:

ap\_open\_invoice.template

Vendor# Vendor Name

Class Pay Code

11836 GOLDENCREEK HEALTHCARE

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
070622		07/20/20	07/06/20	08/15/20		5,607.37	0.00	0.00	5,607.37 ✓
	TRANSFER	<i>NA insurance pymt deposited into mme operating</i>							
070722		07/20/20	07/07/20	08/15/20		885.20	0.00	0.00	885.20 ✓
	TRANSFER	"							
071122		07/20/20	07/11/20	08/15/20		17,127.36	0.00	0.00	17,127.36 ✓
	TRANSFER	"							
071222		07/20/20	07/12/20	08/15/20		46,165.10	0.00	0.00	46,165.10 ✓
	TRANSFER	"							
071222B		07/20/20	07/12/20	08/15/20		87.89	0.00	0.00	87.89 ✓
	TRANSFER	"							
071222A		07/20/20	07/12/20	08/15/20		611.50	0.00	0.00	611.50 ✓
	TRANSFER	"							
071422A		07/21/20	07/14/20	08/15/20		2,442.52	0.00	0.00	2,442.52 ✓
	MAY UHC QIPP								

Vendor Total#	Number	Name	Gross	Discount	No-Pay	Net
11836		GOLDENCREEK HEALTHCARE	72,926.94	0.00	0.00	72,926.94

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	72,926.94	0.00	0.00	72,926.94

APPROVED ON  
JUL 21 2022  
BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS  
Ck #195811

RECEIVED BY THE  
COUNTY AUDITOR ON

JUL 21 2022

07/21/2022

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

AP Open Invoice List

0

Dates Through:

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Vendor# Vendor Name

Class Pay Code

12696 GULF POINTE PLAZA

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net		
070522		07/20/20	07/05/20	08/15/20		1,294.06	0.00	0.00	1,294.06 ✓		
	TRANSFER	<i>NH insurance pymt deposited into mme operating</i>									
070622		07/20/20	07/06/20	08/15/20		45.87	0.00	0.00	45.87 ✓		
	TRANSFER	"									
070622A		07/20/20	07/06/20	08/15/20		376.13	0.00	0.00	376.13 ✓		
	TRANSFER	"									
071222		07/20/20	07/12/20	08/15/20		11,631.59	0.00	0.00	11,631.59 ✓		
	TRANSFER										
071422A		07/21/20	07/14/20	08/15/20		1,082.35	0.00	0.00	1,082.35 ✓		
	MAY UHC QIPP										
Vendor Totals						Number	Name	Gross	Discount	No-Pay	Net
						12696	GULF POINTE PLAZA	14,430.00	0.00	0.00	14,430.00

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	14,430.00	0.00	0.00	14,430.00

APPROVED ON

JUL 21 2022

BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS  
C.K.#195835



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JUL 21 2022

07/21/2022

CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

0

AP Open Invoice List

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Dates Through:

Class Pay Code

Vendor# Vendor Name

11828 SOLERA WEST HOUSTON

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
071422A		07/21/20	07/14/20	08/15/20		1,611.78	0.00	0.00	1,611.78

MAY UHC QIPP

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
	11828	SOLERA WEST HOUSTON	1,611.78	0.00	0.00	1,611.78

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	1,611.78	0.00	0.00	1,611.78

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CALHOUN COUNTY, TEXAS

CK# 195812

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07/21/2022

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CALHOUN COUNTY, TEXAS

MEMORIAL MEDICAL CENTER

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AP Open Invoice List

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Dates Through:

Class Pay Code

Vendor# Vendor Name

11824 THE CRESCENT

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
071422A		07/21/20	07/14/20	08/15/20		1,311.75	0.00	0.00	1,311.75 ✓

MAY UHC QIPP

Vendor Totals Number Name

11824 THE CRESCENT

Gross	Discount	No-Pay	Net
1,311.75	0.00	0.00	1,311.75

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	1,311.75	0.00	0.00	1,311.75

APPROVED ON

JUL 21 2022

BY COUNTY AUDITOR  
CALHOUN COUNTY, TEXAS

ck # 195813



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JUL 21 2022 10:48

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AP Open Invoice List

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Dates Through:

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CALHOUN COUNTY, TEXAS

Vendor# Vendor Name

Class Pay Code

13004 TUSCANY VILLAGE

Invoice#	Comment	Tran Dt	Inv Dt	Due Dt	Check D	Pay Gross	Discount	No-Pay	Net
070522		07/20/20	07/05/20	08/15/20		2,513.40	0.00	0.00	2,513.40 ✓
070622A	TRANSFER	07/20/20	07/06/20	08/15/20		1,750.50	0.00	0.00	1,750.50 ✓
	TRANSFER	"	"	"		"	"	"	"
070622		07/20/20	07/06/20	08/15/20		9,538.90	0.00	0.00	9,538.90 ✓
	TRANSFER	"	"	"		"	"	"	"
070722		07/20/20	07/07/20	08/15/20		4,133.81	0.00	0.00	4,133.81 ✓
	TRANSFER	"	"	"		"	"	"	"
070822		07/20/20	07/08/20	08/15/20		2,528.50	0.00	0.00	2,528.50 ✓
	TRANSFER	"	"	"		"	"	"	"
071122		07/20/20	07/11/20	08/15/20		1,081.90	0.00	0.00	1,081.90 ✓
	TRANSFER	"	"	"		"	"	"	"
071222		07/20/20	07/12/20	08/15/20		2,579.83	0.00	0.00	2,579.83 ✓
	TRANSFER	"	"	"		"	"	"	"
071422A		07/21/20	07/14/20	08/15/20		2,293.47	0.00	0.00	2,293.47 ✓
	MAY UHC QIPP								

Vendor Totals	Number	Name	Gross	Discount	No-Pay	Net
13004	TUSCANY VILLAGE		26,420.31	0.00	0.00	26,420.31

Report Summary

Grand Totals:	Gross	Discount	No-Pay	Net
	26,420.31	0.00	0.00	26,420.31

APPROVED ON

JUL 21 2022

BY COUNTY AUDITOR CALHOUN COUNTY, TEXAS

CK #195814

Facility ID	Facility Name	Total UHC Deposits	MMC PORTION				NH PORTION		
			QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4& Lapse			QIPP TI
4811	Ashford	55,953.57	49,076.28	6,877.29			52,514.93	3,438.65	55,953.57
105818	Broadmoor	20,312.22	20,312.22	-			20,312.22	-	20,312.22
105314	Crescent	18,946.62	16,323.12	2,623.50			17,634.87	1,311.75	18,946.62
4628	Fort Bend	23,121.68	19,851.48	3,270.20			21,486.58	1,635.10	23,121.68
105006	Solera	22,469.15	19,245.60	3,223.55			20,857.38	1,611.78	22,469.15
102540	Golden Creek	36,269.52	31,384.48	4,885.04			33,827.00	2,442.52	36,269.52
100806	Gulf Pointe	16,021.01	13,856.32	2,164.69			14,938.67	1,082.35	16,021.01
103462	Tuscany	33,384.06	28,797.12	4,586.94			31,090.59	2,293.47	33,384.06
	Bethany						-	-	
							-	-	
							-	-	
							-	-	
							-	-	
							-	-	
							-	-	
							-	-	
							-	-	
<b>Total UHC Desosit</b>		<b>226,477.83</b>	<b>198,846.62</b>	<b>27,631.21</b>	<b>-</b>	<b>-</b>	<b>212,662.23</b>	<b>13,815.61</b>	<b>226,477.83</b>

FUNDS DEPOSITED INTO MMC OPERATING. NEED TO ISSUE PAYMENTS TO NURSING HOME.  
MAKE CHECK REQUESTS FOR EACH NURSING HOME FOR HIGHLIGHTED YELLOW AMOUNTS



8

RUN DATE:07/25/22  
 TIME:15:03

MEMORIAL MEDICAL CENTER  
 CHECK REGISTER  
 07/27/22 THRU 07/27/22

PAGE 1  
 GLCKREG

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	195748	07/27/22	647.28	ABILITY NETWORK (SHIFTHOUD)
A/P	195749	07/27/22	1,728.53	AIRGAS USA, LLC - CENTRAL DIV
A/P	195750	07/27/22	101.92	AQUA BEVERAGE COMPANY
A/P	195751	07/27/22	8,446.64	BECKMAN COULTER INC
A/P	195752	07/27/22	536.16	BIO-RAD LABORATORIES, INC
A/P	195753	07/27/22	25,660.00	CARRIER CORPORATION
A/P	195754	07/27/22	1,699.00	CERVEY, LLC
A/P	195755	07/27/22	180.00	CLIA LABORATORY PROGRAM
A/P	195756	07/27/22	56,875.00	COFFEE BARREL, LLC
A/P	195757	07/27/22	2,197.75	CORROHEALTH, INC.
A/P	195758	07/27/22	647.95	CYRACOM LLC
A/P	195759	07/27/22	1,113.93	DEWITT POTH & SON
A/P	195760	07/27/22	109,167.23	DISCOVERY MEDICAL NETWORK INC
A/P	195761	07/27/22	765.00	DOWELL PEST CONTROL
A/P	195762	07/27/22	514.00	DRIESSEN WATER INC. (CULLIGAN)
A/P	195763	07/27/22	40,062.50	EMERGENCY STAFFING SOLUTIONS
A/P	195764	07/27/22	43,949.55	EVIDENT
A/P	195765	07/27/22	495.00	FASTHEALTH CORPORATION
A/P	195766	07/27/22	2,030.27	FISHER HEALTHCARE
A/P	195767	07/27/22	1,176.70	FLDR DESIGNS LLC
A/P	195768	07/27/22	1,072.33	FRONTIER
A/P	195769	07/27/22	9,784.83	GE PRECISION HEALTHCARE, LLC
A/P	195770	07/27/22	1,798.00	HEALTHCARE CODING & CONSULTING
A/P	195771	07/27/22	900.00	HOLOGIC INC
A/P	195772	07/27/22	14,813.10	HUNTER PHARMACY SERVICES
A/P	195773	07/27/22	694.99	IRON MOUNTAIN
A/P	195774	07/27/22	37.00	JACQUELINE HERRERA
A/P	195775	07/27/22	109.25	LABCORP OF AMERICA HOLDINGS
A/P	195776	07/27/22	1,358.33	LEGATO
A/P	195777	07/27/22	640.86	M G TRUST
A/P	195778	07/27/22	50.00	MARK LAMORIA
A/P	195779	07/27/22	115.12	MCKESSON MEDICAL SURGICAL INC
A/P	195780	07/27/22	286.97	MEDICAL DATA SYSTEMS, INC.
A/P	195781	07/27/22	35.51	MEDIMPACT HEALTHCARE SYS, INC.
A/P	195782	07/27/22	.00	VOIDED
A/P	195783	07/27/22	4,919.16	MEDLINE INDUSTRIES INC
A/P	195784	07/27/22	195.00	MEMORIAL MEDICAL CLINIC
A/P	195785	07/27/22	.00	VOIDED
A/P	195786	07/27/22	.00	VOIDED
A/P	195787	07/27/22	25,048.56	MORRIS & DICKSON CO, LLC
A/P	195788	07/27/22	184.06	MXR IMAGING, INC
A/P	195789	07/27/22	502.11	OCCUPRO LLC
A/P	195790	07/27/22	1,125.00	OLYMPUS AMERICA INC
A/P	195791	07/27/22	100.00	PHILIP THOMAE PHOTOGRAPHER
A/P	195792	07/27/22	605.78	PORT LAVACA WAVE
A/P	195793	07/27/22	1,708.33	RADSOURCE
A/P	195794	07/27/22	28.81	ROBERT RODRIQUEZ
A/P	195795	07/27/22	4,038.24	SIEMENS FINANCIAL SERVICES
A/P	195796	07/27/22	400.00	SIGN AD, LTD.
A/P	195797	07/27/22	2,225.00	SOMETHING MORE MEDIA, INC.

BANK--CHECK-----

CODE	NUMBER	DATE	AMOUNT	PAYEE
A/P	195798	07/27/22	4,151.01	SPARKLIGHT
A/P	195799	07/27/22	13,384.80	SPBS CLINICAL EQUIPMENT SRVC
A/P	195800	07/27/22	2,697.55	STERICYCLE, INC
A/P	195801	07/27/22	177.00	TEXAS MUTUAL INSURANCE CO
A/P	195802	07/27/22	354.98	TMS SOUTH
A/P	195803	07/27/22	47.75	TRI-ANIM HEALTH SERVICES INC
A/P	195804	07/27/22	4,751.62	UNIFIRST HOLDINGS INC
A/P	195805	07/27/22	626.51	VCS SECURITY SYSTEMS
A/P	195806	07/27/22	3,264.15	WAGWORKS, INC.
A/P	195807	07/27/22	1,770.00	WERFEN USA LLC
A/P	195808	07/27/22	3,438.65	ASHFORD GARDENS
A/P	195809	07/27/22	75,262.95	BETHANY SENIOR LIVING
A/P	195810	07/27/22	1,635.10	FORTBEND HEALTHCARE CENTER
A/P	195811	07/27/22	72,926.94	GOLDENCREEK HEALTHCARE
A/P	195812	07/27/22	1,611.78	SOLERA WEST HOUSTON
A/P	195813	07/27/22	1,311.75	THE CRESCENT
A/P	195814	07/27/22	26,420.31	TUSCANY VILLAGE
A/P	195815	07/27/22	171.02	
A/P	195816	07/27/22	150.00	
A/P	195817	07/27/22	32.31	
A/P	195818	07/27/22	19.68	
A/P	195819	07/27/22	95.00	
A/P	195820	07/27/22	5.00	
A/P	195821	07/27/22	5.00	
A/P	195822	07/27/22	102.00	
A/P	195823	07/27/22	50.00	
A/P	195824	07/27/22	90.00	
A/P	195825	07/27/22	86.06	
A/P	195826	07/27/22	160.00	
A/P	195827	07/27/22	100.40	
A/P	195828	07/27/22	346.38	
A/P	195829	07/27/22	18.54	
A/P	195830	07/27/22	145.99	
A/P	195831	07/27/22	150.00	
A/P	195832	07/27/22	20.00	
A/P	195833	07/27/22	300.00	
A/P	195834	07/27/22	25.00	
A/P	195835	07/27/22	14,430.00	GULF POINTE PLAZA
TOTALS:			601,105.98	

*Payables* 396,156.88 +  
*Outlets* { 101.92 +  
                   514.00 +  
                   2,072.38 +  
                   1,072.32 +  
                   4,151.01 +  
*NH* { 3,438.65 +  
           1,611.78 +  
           1,635.10 +  
           1,311.75 +  
*Transfers* { 72,926.94 +  
                   14,430.00 +  
                   26,420.31 +  
                   75,262.95 +  
                   601,105.98 \*

APPROVED ON

JUL 27 2022

BY COUNTY AUDITOR  
 CALHOUN COUNTY, TEXAS

Memorial Medical Center  
 Nursing Home UPL  
 Weekly Cantex Transfer  
 Prosperity Accounts  
 7/25/2022


Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	ACH Transfer-In	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
<b>Ashford Gardens</b>		190,633.83 ✓	190,474.28 ✓	60,583.87 ✓		60,743.42 ✓	60,643.42
						Bank Balance	60,743.42 ✓
						Variance	-
						Leave in Balance	100.00
						April Interest	
						May Interest	
						June Interest	
						Adjust Balance/Transfer Amt	60,643.42 ✓
<b>Broadmoor</b>		123,752.18 ✓	123,610.86 ✓	32,234.72 ✓		-	32,276.04
						Bank Balance	32,376.04 ✓
						Variance	-
						Leave in Balance	100.00
						April Interest	
						May Interest	
						June Interest	
						Adjust Balance/Transfer Amt	32,276.04 ✓
<b>Crescent</b>		121,265.53 ✓	121,118.83 ✓	74,500.32 ✓		74,647.02 ✓	74,547.02
						Bank Balance	74,647.02 ✓
						Variance	-
						Leave in Balance	100.00
						April Interest	
						May Interest	
						June Interest	
						Adjust Balance/Transfer Amt	74,547.02 ✓
<b>Fort Bend</b>		37,244.62 ✓	37,118.30 ✓	25,022.56 ✓		25,148.88 ✓	25,048.88
						Bank Balance	25,148.88 ✓
						Variance	-
						Leave in Balance	100.00
						April Interest	
						May Interest	
						June Interest	
						Adjust Balance/Transfer Amt	25,048.88 ✓
<b>Solera at W Houston</b>		100,882.23 ✓	100,604.09 ✓	81,431.59 ✓		81,709.73 ✓	81,609.73
						Bank Balance	81,709.73 ✓
						Variance	-
						Leave in Balance	100.00
						April Interest	
						May Interest	
						June Interest	
						Adjust Balance/Transfer Amt	81,609.73 ✓

60,643.42 +  
 32,276.04 +  
 74,547.02 +  
 25,048.88 +  
 81,609.73 +  
 274,125.09 \*  
 \* added to the nursing home.  
 \* at MMC deposited to open account.

**APPROVED ON**  
**JUL 25 2022**

**BY COUNTY AUDITOR**  
**CALHOUN COUNTY, TEXAS**

**TOTAL TRANSFERS** 274,125.09

Approved:   
**WILLIAM LITTLE, CFO** 7/25/2022



		MMC PORTION					NH PORTION
Transfer-Out	Transfer-In	QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	NH PORTION
<b>Ashford Gardens</b>							
7/18/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	2,543.48	-	-	-	-	2,543.48
7/18/2022 HUMANA CHA DISB HCCLAIMPMT 390862 4200001016	-	110.58	-	-	-	-	110.58
7/18/2022 HEALTH HUMAN SVC HCCLAIMPMT 17460034113005 2	-	6,202.92	-	-	-	-	6,202.92
7/20/2022 MANAGEANDNET1718 MNS PMNT 00000000000093 41	-	3,417.04	-	-	-	-	3,417.04
7/20/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	3,618.44	-	-	-	-	3,618.44
7/20/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	828.96	-	-	-	-	828.96
7/21/2022 WIRE OUT ASHFORD HEALTH CARE CENTER LTD	190,474.28	-	-	-	-	-	-
7/21/2022 MANAGEANDNET1718 MNS PMNT 00000000000093 41	-	1,417.50	-	-	-	-	1,417.50
7/21/2022 UnitedHealthcare HCCLAIMPMT 746003411 124384	-	8,128.00	-	-	-	-	8,128.00
7/21/2022 NOVITAS SOLUTION HCCLAIMPMT 675423 420000132	-	569.26	-	-	-	-	569.26
7/22/2022 HNB - ECHO HCCLAIMPMT 746003411 440000242212	-	291.47	-	-	-	-	291.47
7/22/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	605.28	-	-	-	-	605.28
7/22/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	0.16	-	-	-	-	0.16
7/22/2022 NOVITAS SOLUTION HCCLAIMPMT 675423 420000136	-	23,835.98	-	-	-	-	23,835.98
7/22/2022 HEALTH HUMAN SVC HCCLAIMPMT 17460034113005 2	-	9,014.80	-	-	-	-	9,014.80
	190,474.28	60,583.87	-	-	-	-	60,583.87

		MMC PORTION					NH PORTION
Transfer-Out	Transfer-In	QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	NH PORTION
<b>Broadmoor</b>							
7/18/2022 MANAGEANDNET1718 MNS PMNT 00000000004293 41	-	319.50	-	-	-	-	319.50
7/19/2022 HUMANA CHA DISB HCCLAIMPMT 390861 4200001294	-	594.03	-	-	-	-	594.03
7/20/2022 AARP Supplementa HCCLAIMPMT 746003411 124384	-	1,750.50	-	-	-	-	1,750.50
7/21/2022 WIRE OUT CANTEX HEALTH CARE CENTERS III	123,610.86	-	-	-	-	-	-
7/22/2022 MANAGEANDNET1718 MNS PMNT 00000000004293 41	-	6,390.00	-	-	-	-	6,390.00
7/22/2022 HNB - ECHO HCCLAIMPMT 746003411 440000242212	-	650.98	-	-	-	-	650.98
7/22/2022 UnitedHealthcare HCCLAIMPMT 746003411 124384	-	4,940.00	-	-	-	-	4,940.00
7/22/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	4,193.75	-	-	-	-	4,193.75
7/22/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	105.25	-	-	-	-	105.25
7/22/2022 HUMANA CHA DISB HCCLAIMPMT 390861 4200001338	-	368.30	-	-	-	-	368.30
7/22/2022 HEALTH HUMAN SVC HCCLAIMPMT 17460034113004 2	-	12,493.82	-	-	-	-	12,493.82
7/22/2022 AARP Supplementa HCCLAIMPMT 746003411 124384	-	328.59	-	-	-	-	328.59
	123,610.86	32,234.72	-	-	-	-	32,234.72

		MMC PORTION					NH PORTION
Transfer-Out	Transfer-In	QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	NH PORTION
<b>Crocodon</b>							
7/18/2022 NOVITAS SOLUTION HCCLAIMPMT 675323 420000104	-	2,774.00	-	-	-	-	2,774.00
7/18/2022 DEVOTED HEALTH P HCCLAIMPMT 121140395851402	-	9,600.00	-	-	-	-	9,600.00
7/18/2022 DEVOTED HEALTH P HCCLAIMPMT 121140395851400	-	7,673.43	-	-	-	-	7,673.43
7/18/2022 DEVOTED HEALTH P HCCLAIMPMT 121140395851398	-	5,600.00	-	-	-	-	5,600.00
7/19/2022 HNB - ECHO HCCLAIMPMT 746003411 440000241996	-	14,505.48	-	-	-	-	14,505.48
7/20/2022 MANAGEANDNET1718 MNS PMNT 000000000003268 41	-	2,214.14	-	-	-	-	2,214.14
7/20/2022 NOVITAS SOLUTION HCCLAIMPMT 675323 420000148	-	12,572.59	-	-	-	-	12,572.59
7/21/2022 WIRE OUT CANTEX HEALTH CARE CENTERS III	108,210.83	-	-	-	-	-	-
7/21/2022 MANAGEANDNET1718 MNS PMNT 000000000003268 41	-	1,000.00	-	-	-	-	1,000.00
7/22/2022 cx246	12,908.00	-	-	-	-	-	-
7/22/2022 Molina HC of TX HCCLAIMPMT PN1669860425 4200	-	8,222.32	-	-	-	-	8,222.32
7/22/2022 MANAGEANDNET1718 MNS PMNT 000000000003268 41	-	7,029.00	-	-	-	-	7,029.00
7/22/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	862.43	-	-	-	-	862.43
7/22/2022 KS PLAN ADMINIST HCCLAIMPMT 14995 1110000211	-	1,200.00	-	-	-	-	1,200.00
7/22/2022 HEALTH HUMAN SVC HCCLAIMPMT 17460034113008 2	-	90.93	-	-	-	-	90.93
7/22/2022 DEVOTED HEALTH P HCCLAIMPMT 121140392901117	-	1,156.00	-	-	-	-	1,156.00
	121,118.83	74,500.32	-	-	-	-	74,500.32

		MMC PORTION					NH PORTION
Transfer-Out	Transfer-In	QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	NH PORTION
<b>Fort Bend</b>							
7/20/2022 NOVITAS SOLUTION HCCLAIMPMT 675663 420000148	-	8,773.12	-	-	-	-	8,773.12
7/20/2022 AARP Supplementa HCCLAIMPMT 746003411 124384	-	10,114.00	-	-	-	-	10,114.00
7/21/2022 WIRE OUT CANTEX HEALTH CARE CENTERS III	37,118.30	-	-	-	-	-	-
7/22/2022 HEALTH HUMAN SVC HCCLAIMPMT 17460034113006 2	-	6,135.44	-	-	-	-	6,135.44
	37,118.30	25,022.56	-	-	-	-	25,022.56

		MMC PORTION					NH PORTION
Transfer-Out	Transfer-In	QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	NH PORTION
<b>Solars at West Houston</b>							
7/18/2022 HNB - ECHO HCCLAIMPMT 746003411 440000289856	-	5,569.52	-	-	-	-	5,569.52
7/18/2022 UNITEDHEALTHCARE HCCLAIMPMT 746003411 124384	-	11,890.00	-	-	-	-	11,890.00
7/18/2022 NOVITAS SOLUTION HCCLAIMPMT 675310 420000104	-	2,670.00	-	-	-	-	2,670.00
7/18/2022 HUMANA CHA DISB HCCLAIMPMT 390862 4200001016	-	5,580.00	-	-	-	-	5,580.00
7/18/2022 HEALTH HUMAN SVC HCCLAIMPMT 17460034113007 2	-	1,313.61	-	-	-	-	1,313.61
7/19/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	348.04	-	-	-	-	348.04
7/19/2022 HUMANA INS CO HCCLAIMPMT 390862 830000500111	-	10,377.00	-	-	-	-	10,377.00
7/19/2022 HUMANA CHA DISB HCCLAIMPMT 390862 4200001295	-	3,950.00	-	-	-	-	3,950.00
7/19/2022 HUMANA CHA DISB HCCLAIMPMT 390862 4200001294	-	2,370.00	-	-	-	-	2,370.00
7/19/2022 HUMANA CHA DISB HCCLAIMPMT 390862 4200001294	-	9,345.00	-	-	-	-	9,345.00
7/19/2022 HMP HCCLAIMPMT 390862 42000012871871 DISDATA	-	3,295.00	-	-	-	-	3,295.00
7/19/2022 HEHP GA HCCLAIMPMT 390862 42000012968093 DIS	-	1,395.00	-	-	-	-	1,395.00
7/20/2022 Molina HC of TX HCCLAIMPMT PN1497143259 4200	-	2,350.59	-	-	-	-	2,350.59
7/20/2022 MANAGEANDNET1718 MNS PMNT 00000000002482 41	-	100.00	-	-	-	-	100.00
7/20/2022 HNB - ECHO HCCLAIMPMT 746003411 440000277265	-	216.60	-	-	-	-	216.60
7/20/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	675.17	-	-	-	-	675.17
7/21/2022 WIRE OUT CANTEX HEALTH CARE CENTERS III	100,604.09	-	-	-	-	-	-
7/21/2022 Molina HC of TX HCCLAIMPMT PN1497143259 4200	-	5,269.31	-	-	-	-	5,269.31
7/22/2022 MANAGEANDNET1718 MNS PMNT 00000000002482 41	-	6,229.00	-	-	-	-	6,229.00
7/22/2022 HNB - ECHO HCCLAIMPMT 746003411 440000242212	-	7,233.14	-	-	-	-	7,233.14
7/22/2022 UHC COMMUNITY PL HCCLAIMPMT 746003411 910000	-	1,254.61	-	-	-	-	1,254.61
	100,604.09	81,431.59	-	-	-	-	81,431.59

TOTALS

572,926.36	273,773.06	-	-	-	-	-	273,773.06
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## Quick View

Select Quick View Accounts  
Account Number / Name

Select Group  
Groups

Account Type




DDA

Data reported as of Jul 25, 2022

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
<b>Number of Accounts: 15</b>	<b>\$2,498,806.36</b>	<b>\$2,951,223.90</b>	<b>\$2,498,806.36</b>	<b>\$2,641,590.5</b>
<u>*4551</u> CAL CO INDIGENT HEALTHCARE	\$9,953.49	\$9,953.49	\$9,953.49	\$9,953.4
<u>*4454</u> MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$61,374.53	\$117,847.94	\$61,374.53	\$41,790.0
<u>*4365</u> MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$536.47	\$536.47	\$536.47	\$536.4
<u>*4357</u> MEMORIAL MEDICAL CENTER - OPERATING	\$1,777,438.21	\$1,801,229.06	\$1,777,438.21	\$2,055,843.7
<u>*4373</u> MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$431.87	\$431.87	\$431.87	\$431.8
<u>*4381</u> MEMORIAL MEDICAL CENTER / NH ASHFORD	\$60,743.42 ✓	\$146,623.29	\$60,743.42	\$26,995.7
<u>*4403</u> MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$32,376.04 ✓	\$164,161.05	\$32,376.04	\$2,905.3
<u>*4411</u> MEMORIAL MEDICAL CENTER / NH CRESCENT	\$74,647.02 ✓	\$97,728.78	\$74,647.02	\$68,994.3
<u>*4446</u> MEMORIAL MEDICAL CENTER / NH FORT BEND	\$25,148.88 ✓	\$34,179.66	\$25,148.88	\$19,013.4
<u>*4438</u> MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$81,709.73 ✓	\$114,690.66	\$81,709.73	\$66,992.5
<u>*2998</u> MMC -MONEY MARKET FUND	\$703.63	\$703.63	\$703.63	\$703.6
<u>*5506</u> MMC -NH BETHANY SENIOR LIVING	\$260,434.14	\$275,191.27	\$260,434.14	\$254,688.3
<u>*5441</u> MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$61,851.35	\$65,488.26	\$61,851.35	\$59,035.0
<u>*5433</u> MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$21,441.05	\$21,631.48	\$21,441.05	\$16,597.5
<u>*3407</u> MMC -NH TUSCANY VILLAGE	\$30,016.53	\$100,826.99	\$30,016.53	\$17,108.5



Memorial Medical Center  
 Nursing Home UPL  
 Weekly Nexion Transfer  
 Prosperity Accounts  
 7/25/2022

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Golden Creek		23,504.72 ✓	23,346.84 ✓	61,216.65 ✓		61,374.53 ✓	59,194.53
						Bank Balance	61,374.53 ✓
						Variance	-
						Leave in Balance	100.00
						WITHHOLD SUPERIOR QIPP	2,080.00 (hold)
						April Interest	
						May Interest	
						June Interest	
						Adjust Balance/Transfer Amt	59,194.53 ✓

Note: Only balances of over \$5,000 will be transferred to the nursing home.  
 Note 2: Each account has a base balance of \$100 that MMC deposited to open account.

Approved:   
 WILLIAM LITTLE, CFO 7/25/2022

**APPROVED ON**  
**JUL 25 2022**  
**BY COUNTY AUDITOR**  
**CALHOUN COUNTY, TEXAS**



**Golden Creek**

	Transfer-Out	Transfer-In	MMC PORTION					NH PORTION
			QJPP/Comp1	QJPP/Comp 2	QJPP/Comp3	QJPP/Comp4 &Lapse	QJPP T1	
7/18/2022 Deposit	-	1,375.97						1,375.97
7/18/2022 HEALTH HUMAN SVC HCCLAIMPMT 17460034113011 2	-	16,027.73						16,027.73
7/19/2022 HNB - ECHO HCCLAIMPMT 746003411 440000241918	-	4,964.26						4,964.26
7/19/2022 ACH SETTLEMENT SERVICE 4105523439 9601693257	-	4,960.00						4,960.00
7/20/2022 TSYS/TRANSFIRST BKCD STLMT 543684555876917 9	-	12,550.00						12,550.00
7/20/2022 TSYS/TRANSFIRST BKCD STLMT 543684555876917 9	-	1,495.00						1,495.00
7/21/2022 WIRE OUT NEXION HEALTH AT GOLDEN CREEK	23,346.84	-						-
7/21/2022 HEALTH HUMAN SVC HCCLAIMPMT 17460034113011 2	-	259.20						259.20
7/22/2022 HNB - ECHO HCCLAIMPMT 746003411 440000242213	-	11,223.24						11,223.24
7/22/2022 HEALTH HUMAN SVC HCCLAIMPMT 17460034113011 2	-	6,007.25						6,007.25
7/22/2022 Centene Manageme ACH 008765433514 1110000245	-	2,080.00						2,080.00
7/22/2022 AETNA AS01 HCCLAIMPMT 1588075964 51000016237	-	274.00						274.00
	23,346.84	61,216.65	-	-	-	-	-	61,216.65

# Quick View

Select Quick View Accounts  
Account Number / Name

Select Group  
Groups

Account Type




DDA

Data reported as of Jul 25, 2022

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
<b>Number of Accounts: 15</b>	<b>\$2,498,806.36</b>	<b>\$2,951,223.90</b>	<b>\$2,498,806.36</b>	<b>\$2,641,590.5</b>
<u>*4551</u> CAL CO INDIGENT HEALTHCARE	\$9,953.49	\$9,953.49	\$9,953.49	\$9,953.4
<u>*4454</u> MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$61,374.53 ✓	\$117,847.94	\$61,374.53	\$41,790.0
<u>*4365</u> MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$536.47	\$536.47	\$536.47	\$536.4
<u>*4357</u> MEMORIAL MEDICAL CENTER - OPERATING	\$1,777,438.21	\$1,801,229.06	\$1,777,438.21	\$2,055,843.7
<u>*4373</u> MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$431.87	\$431.87	\$431.87	\$431.8
<u>*4381</u> MEMORIAL MEDICAL CENTER / NH ASHFORD	\$60,743.42	\$146,623.29	\$60,743.42	\$26,995.7
<u>*4403</u> MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$32,376.04	\$164,161.05	\$32,376.04	\$2,905.3
<u>*4411</u> MEMORIAL MEDICAL CENTER / NH CRESCENT	\$74,647.02	\$97,728.78	\$74,647.02	\$68,994.3
<u>*4446</u> MEMORIAL MEDICAL CENTER / NH FORT BEND	\$25,148.88	\$34,179.66	\$25,148.88	\$19,013.4
<u>*4438</u> MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$81,709.73	\$114,690.66	\$81,709.73	\$66,992.9
<u>*2998</u> MMC -MONEY MARKET FUND	\$703.63	\$703.63	\$703.63	\$703.6
<u>*5506</u> MMC -NH BETHANY SENIOR LIVING	\$260,434.14	\$275,191.27	\$260,434.14	\$254,688.3
<u>*5441</u> MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$61,851.35	\$65,488.26	\$61,851.35	\$59,035.0
<u>*5433</u> MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$21,441.05	\$21,631.48	\$21,441.05	\$16,597.5
<u>*3407</u> MMC -NH TUSCANY VILLAGE	\$30,016.53	\$100,826.99	\$30,016.53	\$17,108.5

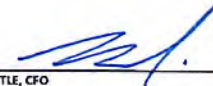
Memorial Medical Center  
 Nursing Home UPL  
 Weekly HMG Transfer  
 Prosperity Accounts  
 7/25/2022

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Cks Cleared	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Gulf Pointe Plaza-Private Pay		18,246.24	18,137.53	21,332.34			21,441.05	16,613.05
						Bank Balance	21,441.05	
						Variance		
						Leave in Balance	100.00	
						WITHHOLD SUPERIOR QPPP (hold)	4,728.00	
						April Interest		
						May Interest		
						June Interest		
						Adjust Balance/Transfer Amt	16,613.05	

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Cks Cleared	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Gulf Pointe Plaza-Medicare/Medicaid	1	4,688.09		57,163.26			61,851.35	61,751.35
						Bank Balance	61,851.35	
						Variance		
						Leave in Balance	100.00	
						April Interest		
						May Interest		
						June Interest		
						Adjust Balance/Transfer Amt	61,751.35	
<b>TOTAL TRANSFERS</b>							<b>78,364.40</b>	

*Routine Information for Gulf Pointe Plaza:*

Note: Only balances of over \$5,000 will be transferred to the nursing home.  
 Note 2: Each account has a base balance of \$100 that MMC deposited to open account.

Approved:   
 WILLIAM LITTLE, CFO 7/25/2022

APPROVED ON

JUL 25 2022

BY COUNTY AUDITOR  
 CALHOUN COUNTY, TEXAS



**Gulf Pointe Plaza-Private Pay**

	Transfer-Out	Transfer-In	MMC PORTION				NH PORTION
			QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 & Lapse	
7/18/2022 HNB - ECHO HCCLAIMPMT 746003411 440000289856	-	39.20					39.20
7/18/2022 HNB - ECHO HCCLAIMPMT 746003411 440000289856	-	106.73					106.73
7/18/2022 HUMANA CHA DISB HCCLAIMPMT 624982 4200001016	-	12,580.00					12,580.00
7/19/2022 HUMANA INS CO HCCLAIMPMT 624982 830000599786	-	498.34					498.34
7/19/2022 HUMANA INS CO HCCLAIMPMT 624982 830000500200	-	823.18					823.18
7/19/2022 HUMANA CHA DISB HCCLAIMPMT 624982 4200001294	-	1,525.45					1,525.45
7/19/2022 HUMANA CHA DISB HCCLAIMPMT 624982 4200001294	-	915.90					915.90
7/21/2022 WIRE OUT HMG SERVICES, LLC	18,137.53	-					-
7/22/2022 HNB - ECHO HCCLAIMPMT 746003411 440000242213	-	115.54					115.54
7/22/2022 Centene Managem ACH 008765433514 1110000245	-	4,728.00					4,728.00
	18,137.53	21,332.34	-	-	-	-	21,332.34

**Gulf Pointe Plaza-Medicare/Medicaid**

	Transfer-Out	Transfer-In	MMC PORTION				NH PORTION
			QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4 & Lapse	
7/18/2022 Deposit	-	14,151.93					14,151.93
7/18/2022 MERCHANT BANKCD DEPOSIT 496478518889 9100001	-	1,264.00					1,264.00
7/18/2022 HNB - ECHO HCCLAIMPMT 746003411 440000289856	-	16,500.43					16,500.43
7/19/2022 HNB - ECHO HCCLAIMPMT 746003411 440000241918	-	10,109.54					10,109.54
7/20/2022 MERCHANT BANKCD DEPOSIT 496478518889 9100001	-	1,504.00					1,504.00
7/20/2022 HNB - ECHO HCCLAIMPMT 746003411 440000277265	-	10,817.08					10,817.08
7/22/2022 HEALTH HUMAN SVC HCCLAIMPMT 17460034113013 2	-	2,816.28					2,816.28
		57,163.26					57,163.26
	18,137.53	78,495.60	-	-	-	-	78,495.60

# Quick View

Select Quick View Accounts  
Account Number / Name

Select Group  
Groups

Account Type




DDA

Data reported as of Jul 25, 2022

Account Number	Current Balance	Available Balance	Collected Balance	Prior Day Balance
<b>Number of Accounts: 15</b>	<b>\$2,498,806.36</b>	<b>\$2,951,223.90</b>	<b>\$2,498,806.36</b>	<b>\$2,641,590.5</b>
<u>*4551</u> CAL CO INDIGENT HEALTHCARE	\$9,953.49	\$9,953.49	\$9,953.49	\$9,953.4
<u>*4454</u> MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$61,374.53	\$117,847.94	\$61,374.53	\$41,790.0
<u>*4365</u> MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$536.47	\$536.47	\$536.47	\$536.4
<u>*4357</u> MEMORIAL MEDICAL CENTER - OPERATING	\$1,777,438.21	\$1,801,229.06	\$1,777,438.21	\$2,055,843.7
<u>*4373</u> MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$431.87	\$431.87	\$431.87	\$431.8
<u>*4381</u> MEMORIAL MEDICAL CENTER / NH ASHFORD	\$60,743.42	\$146,623.29	\$60,743.42	\$26,995.7
<u>*4403</u> MEMORIAL MEDICAL CENTER / NH BROADMOOR	\$32,376.04	\$164,161.05	\$32,376.04	\$2,905.3
<u>*4411</u> MEMORIAL MEDICAL CENTER / NH CRESCENT	\$74,647.02	\$97,728.78	\$74,647.02	\$68,994.3
<u>*4446</u> MEMORIAL MEDICAL CENTER / NH FORT BEND	\$25,148.88	\$34,179.66	\$25,148.88	\$19,013.4
<u>*4438</u> MEMORIAL MEDICAL CENTER / SOLERA AT WEST HOUSTON	\$81,709.73	\$114,690.66	\$81,709.73	\$66,992.9
<u>*2998</u> MMC -MONEY MARKET FUND	\$703.63	\$703.63	\$703.63	\$703.6
<u>*5506</u> MMC -NH BETHANY SENIOR LIVING	\$260,434.14	\$275,191.27	\$260,434.14	\$254,688.3
<u>*5441</u> MMC -NH GULF POINTE PLAZA - MEDICARE/MEDICAID	\$61,851.35 ✓	\$65,488.26	\$61,851.35	\$59,035.0
<u>*5433</u> MMC -NH GULF POINTE PLAZA - PRIVATE PAY	\$21,441.05 ✓	\$21,631.48	\$21,441.05	\$16,597.5
<u>*3407</u> MMC -NH TUSCANY VILLAGE	\$30,016.53	\$100,826.99	\$30,016.53	\$17,108.5

Memorial Medical Center  
 Nursing Home UPL  
 Weekly Tuscany Transfer  
 Prosperity Accounts  
 7/25/2022

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Cks Cleared	Pending Deposits	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Tuscany Village		69,529.83	69,429.83	29,916.53	-		30,016.53	29,916.53
						Bank Balance Variance	30,016.53	
						Leave in Balance	100.00	

Note: Only balances of over \$5,000 will be transferred to the nursing home.  
 Note 2: Each account has a base balance of \$100 that MMC deposited to open account.

Adjust Balance/Transfer Amt 29,916.53 ✓  
 Approved:  7/25/2022  
 WILLIAM LITTLE, CFO

**APPROVED ON**  
**JUL 25 2022**  
**BY COUNTY AUDITOR**  
**CALHOUN COUNTY, TEXAS**





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<u>*4551</u> CAL CO INDIGENT HEALTHCARE	\$9,953.49	\$9,953.49	\$9,953.49	\$9,953.4
<u>*4454</u> MEMORIAL MEDICAL / NH GOLDEN CREEK HEALTHCARE	\$61,374.53	\$117,847.94	\$61,374.53	\$41,790.0
<u>*4365</u> MEMORIAL MEDICAL CENTER - CLINIC SERIES 2014	\$536.47	\$536.47	\$536.47	\$536.4
<u>*4357</u> MEMORIAL MEDICAL CENTER - OPERATING	\$1,777,438.21	\$1,801,229.06	\$1,777,438.21	\$2,055,843.7
<u>*4373</u> MEMORIAL MEDICAL CENTER - PRIVATE WAIVER CLEARING	\$431.87	\$431.87	\$431.87	\$431.8
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Memorial Medical Center  
 Nursing Home UPL  
 Weekly HSLTransfer  
 Prosperity Accounts  
 7/25/2022

Nursing Home	Account Number	Previous Beginning Balance	Transfer-Out	Transfer-In	Cks Cleared	Pending Medicare Repayment	Today's Beginning Balance	Amount to Be Transferred to Nursing Home
Bethany Senior Living		55,237.91	55,050.94	260,247.17			260,434.14	260,334.14
						Bank Balance	260,434.14	
						Variance		
						Leave in Balance	100.00	

April Interest  
 May Interest  
 June Interest  
 Adjust Balance/Transfer Amt 260,334.14

Note: Only balances of over \$5,000 will be transferred to the nursing home.  
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Approved:   
 WILLIAM LITTLE, CFO 7/25/2022

**APPROVED ON**  
**JUL 25 2022**  
**BY COUNTY AUDITOR**  
**CALHOUN COUNTY, TEXAS**



**Bethany Senior Living**

**MMC PORTION**

	Transfer-Out	Transfer-In	QIPP/Comp1	QIPP/Comp 2	QIPP/Comp3	QIPP/Comp4&Lapse	QIPP TI	NH PORTION
7/18/2022 Deposit	-	3,695.50					-	3,695.50
7/18/2022 Deposit	-	2,653.56					-	2,653.56
7/18/2022 Deposit	-	58,438.29					-	58,438.29
7/19/2022 Deposit	-	1,558.00					-	1,558.00
7/19/2022 Deposit	-	9,725.00					-	9,725.00
7/20/2022 NOVITAS SOLUTION HCCLAIMPMT 676481 420000148	-	89,157.33					-	89,157.33
7/21/2022 WIRE OUT PORT LAVACA NH, LLC	55,050.94	-					-	-
7/21/2022 Deposit	-	8,537.38					-	8,537.38
7/21/2022 NOVITAS SOLUTION HCCLAIMPMT 676481 420000131	-	80,736.33					-	80,736.33
7/22/2022 NOVITAS SOLUTION HCCLAIMPMT 676481 420000136	-	5,745.78					-	5,745.78
	<b>55,050.94</b>	<b>260,247.17</b>	-	-	-	-	-	<b>260,247.17</b>

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