

MEMORIAL MEDICAL CENTER

COMMISSIONERS COURT APPROVAL LIST FOR ---- May 23, 2018

by: CT

INDIGENT HEALTHCARE FUND:

INDIGENT EXPENSES

HEB Pharmacy (Medimpact) Pharmacy Reimbursement	294.62
MMCenter (In-patient \$0 / Out-patient \$5,394.18 / ER \$1,339.12)	6,733.30
Memorial Medical Clinic	911.62
Regional Employee Assistance	45.98
Singleton Associates, PA	136.60
Victoria Anesthesiology Assoc	192.26

SUBTOTAL	8,314.38
Memorial Medical Center (Indigent Healthcare Payroll and Expenses)	4,166.67
	Subtotal 12,481.05
Co-pays adjustments for April 2018	(170.00)
Reimbursement from Medicaid	0.00

TOTAL APPROVED INDIGENT HEALTHCARE FUND EXPENSES	12,311.05
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APPROVED

MAY 23 2018

**CALHOUN COUNTY
COMMISSIONERS COURT**

800 05232018 01 CALHOUN COUNTY, TEXAS

DATE: 5/23/2018

VENDOR # 852

CC Indigent Health Care

ACCOUNT NUMBER	DESCRIPTION OF GOODS OR SERVICES	QUANTITY	UNIT PRICE	TOTAL PRICE
1000-800-98722-999	Transfer to pay bills for Indigent Health Care			\$12,311.05
	approved by Commissioners Court on 05/23/2018			
1000-001-46010	April Interest (\$3.79)			(\$3.79)
				\$12,307.26

COUNTY AUDITOR APPROVAL ONLY

THE ITEMS OR SERVICES SHOWN ABOVE ARE NEEDED IN THE DISCHARGE OF MY OFFICIAL DUTIES AND I CERTIFY THAT FUNDS ARE AVAILABLE TO PAY THIS OBLIGATION.

I CERTIFY THAT THE ABOVE ITEMS OR SERVICES WERE RECEIVED BY ME IN GOOD CONDITION AND REQUEST THE COUNTY TREASURER TO PAY THE ABOVE OBLIGATION.

BY: *Mikel J. Pelf* 5/23/18

DEPARTMENT HEAD DATE

APPROVED ON MAY 11 2018 BY CALHOUN COUNTY AUDITOR

©IHS
Issued 05/10/18

Source Totals Report
Calhoun Indigent Health Care
Batch Dates 05/01/2018 through 05/01/2018
For Source Group Indigent Health Care
For Vendor: All Vendors

Source	Description	Amount Billed	Amount Paid
01	Physician Services	2,023.00	182.58 ✓
01-2	Physician Services- Anesthesia	780.00	192.26 ✓
02	Prescription Drugs	486.62	294.62 ✓
08	Rural Health Clinics	973.00	911.62 ✓
14	Mmc - Hospital Outpatient	16,420.58	5,394.18 ✓
15	Mmc - Er Bills	4,216.00	1,339.12 ✓
	Expenditures	24,986.90	8,402.08
	Reimb/Adjustments	-87.70	-87.70
	Grand Total	24,899.20	8,314.38

EXPENSES 4,166.67

12,481.05

APPROVED
ON

MAY 11 2018

BY
CALHOUN COUNTY AUDITOR

COPAYS <170.00>

12,311.05

MEDICAID REIMBURSEMENTS 0.00

TOTAL 12,311.05

MEMORIAL MEDICAL CENTER
CHECK REQUEST

COPY

P CALHOUN COUNTY INDIGENT ACCOUNT

Date Requested: 5/7/18

A

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POSTED

FOR ACCT. USE ONLY

- ☐ Imprest Cash
☐ A/P Check
☐ Mail Check to Vendor
☐ Return Check to Dept

AMOUNT \$170.00

G/L NUMBER: 50240000

EXPLANATION: TO TRANSFER INDIGENT CO-PAYS FROM OPERATING ACCOUNT TO THE INDIGENT

APPROVED

MAY 10 2018

REQUESTED BY: Sarah L. Henderson

AUTHORIZED BY:

COUNTY AUDITOR
CALHOUN COUNTY, TEXAS

RUN DATE: 05/07/18
TIME: 12:32

MEMORIAL MEDICAL CENTER
RECEIPTS FROM 04/01/18 TO 04/30/18

PAGE 99
RCMREP

G/L NUMBER	RECEIPT PAY DATE	NUMBER	TYPE	PAYER	CASH AMOUNT	RECEIPT AMOUNT	NUMBER	NAME	DISC DATE	COLL GL CASH INIT CODE ACCOUNT
50200.000	04/19/18	489512	IN	CIGNA HEALTHCARE	143.59-	143.59-			00/00/00	RLT 2
50200.000	04/23/18	489768	IN	CIGNA HEALTHCARE	63.77-	63.77-			00/00/00	RLT 2
50200.000	04/23/18	489775	IN	AETNA TRS CARE	21.00-	21.00-			00/00/00	RLT 2
50200.000	04/23/18	489781	IN	CIGNA HEALTHCARE	134.82-	134.82-			00/00/00	RLT 2
50200.000	04/24/18	489806	IN	CIGNA HEALTHCARE	71.48-	71.48-			00/00/00	RLT 2
50200.000	04/24/18	489849	IN	CIGNA HEALTHCARE	158.36-	158.36-			00/00/00	RLT 2
50200.000	04/26/18	490205	IN	HUMANA	308.00-	308.00-			00/00/00	RLT 2
50200.000	04/26/18	490216	IN	TRICARE	189.38-	189.38-			00/00/00	RLT 2
50200.000	04/26/18	490224	IN	TRICARE	15656.04-	15656.04-			00/00/00	RLT 2
50200.000	04/26/18	490243	IN	UNITED HEALTHCARE	75.09-	75.09-			00/00/00	RLT 2
50200.000	04/26/18	490268	IN	CORE SOURCE	114.07-	114.07-			00/00/00	RLT 2
50200.000	04/27/18	490311	IN	UNITED HEALTHCARE	59.07-	59.07-			00/00/00	RLT 2
50200.000	04/30/18	490513	IN	CIGNA HEALTHCARE	64.20-	64.20-			00/00/00	RLT 2
50200.000	04/30/18	490543	IN	HUMANA	270.48-	270.48-			00/00/00	RLT 2
TOTAL 50200.000 COMMERCIAL INS. -ADJ					-518903.80					
50240.000	04/13/18	489028	CA	██████████	10.00	10.00			00/00/00	CAS 2
50240.000	04/16/18	489058	CA	██████████	10.00	10.00			00/00/00	CAS 2
50240.000	04/03/18	487843	CA	██████████	10.00	10.00			00/00/00	PLB 2
50240.000	04/04/18	488112	CA	██████████	10.00	10.00			00/00/00	PLB 2
50240.000	04/09/18	488501	CA	██████████	10.00	10.00			00/00/00	PLB 2
50240.000	04/09/18	488542	CA	██████████	10.00	10.00			00/00/00	PLB 2
50240.000	04/10/18	488629	CA	██████████	10.00	10.00			00/00/00	PLB 2
50240.000	04/18/18	489331	CA	██████████	10.00	10.00			00/00/00	PLB 2
50240.000	04/23/18	489624	CA	██████████	10.00	10.00			00/00/00	PLB 2
50240.000	04/24/18	489694	CA	██████████	10.00	10.00			00/00/00	PLB 2
50240.000	04/27/18	490200	CA	██████████	10.00	10.00			00/00/00	PLB 2
50240.000	04/27/18	490201	CA	██████████	10.00	10.00			00/00/00	PLB 2
50240.000	04/30/18	490292	CA	██████████	10.00	10.00			00/00/00	PLB 2
50240.000	04/30/18	490337	CA	██████████	10.00	10.00			00/00/00	PLB 2
50240.000	04/30/18	490398	CA	██████████	10.00	10.00			00/00/00	PLB 2
50240.000	04/18/18	489294	CA	██████████	10.00	10.00			00/00/00	VTT 2
50240.000	04/18/18	489297	CA	██████████	10.00	10.00			00/00/00	VTT 2
TOTAL 50240.000 COUNTY INDIGENT COPAYS					170.00					
50510.000	04/13/18	489024	CA	CAFE	157.79	157.79			00/00/00	CAS 2
50510.000	04/13/18	489026	MC	CAFE	2.80	2.80			00/00/00	CAS 2
50510.000	04/13/18	489027	VI	CAFE	137.65	137.65			00/00/00	CAS 2
50510.000	04/16/18	489112	CA	CAFE	269.43	269.43			00/00/00	CAS 2
50510.000	04/16/18	489113	MC	CAFE	17.69	17.69			00/00/00	CAS 2
50510.000	04/16/18	489114	VI	CAFE	213.28	213.28			00/00/00	CAS 2
50510.000	04/19/18	489414	CA	CAFE	393.75	393.75			00/00/00	CAS 2
50510.000	04/19/18	489416	VI	CAFE	323.61	323.61			00/00/00	CAS 2
50510.000	04/19/18	489417	MC	CAFE	66.49	66.49			00/00/00	CAS 2
50510.000	04/19/18	489420	CK	PORT LAVACA ROTARY	90.00	90.00			00/00/00	CAS 2
50510.000	04/30/18	490429	CA	CAFE	93.14	93.14			00/00/00	CAS 2
50510.000	04/30/18	490430	MC	CAFE	12.73	12.73			00/00/00	CAS 2
50510.000	04/30/18	490431	VI	CAFE	71.74	71.74			00/00/00	CAS 2
50510.000	04/02/18	487780	VI	CAFE	154.69	154.69			00/00/00	PLB 2
50510.000	04/02/18	487781	MC	CAFE	17.17	17.17			00/00/00	PLB 2
50510.000	04/02/18	487782	DS	CAFE	6.77	6.77			00/00/00	PLB 2
50510.000	04/02/18	487783	CK	CAFE	33.09	33.09			00/00/00	PLB 2

Calhoun County Indigent Care Patient Caseload 2018

	Approved	Denied	Removed	Active	Pending
January	4	2	3	20	6
February	3	4	2	18	6
March	2	2	3	17	4
April	5	3	1	21	2
May					
June					
July					
August					
September					
October					
November					
December					
YTD					
Monthly Avg	4	3	2	19	5
December 2017 Active		18			

MEMORIAL MEDICAL CENTER

So Much... So Close!

815 N. Virginia St. Port Lavaca, Texas 77979 (361) 552-6713

Date: 5/7/2018

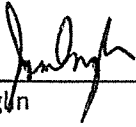
Invoice # 319

For: Apr-18

Bill To:
Calhoun County

DESCRIPTION	AMOUNT
Funds to cover Indigent program operating expenses.	\$ 4,166.67

Total \$ 4,166.67



Jason Anglin
CEO

APPROVED
ON

MAY - 7 2018

BY
CALHOUN COUNTY AUDITOR



PROSPERITY BANK®

Statement Date 4/30/2018

Account No

Page 1 of 4

THE COUNTY OF CALHOUN TEXAS
 CAL CO INDIGENT HEALTHCARE
 202 S ANN ST STE A
 PORT LAVACA TX 77979

13350

STATEMENT SUMMARY

Public Fund Contractual Ckg w Int Account No

04/01/2018	Beginning Balance			\$5,151.16
	4 Deposits/Other Credits	+		\$32,346.75
	16 Checks/Other Debits	-		\$13,102.89
04/30/2018	Ending Balance		30 Days in Statement Period	\$24,395.02
	Total Enclosures			18

DEPOSITS/OTHER CREDITS

Date	Description	Amount
04/12/2018	Deposit	\$12,037.07
04/19/2018	Deposit	\$200.00
04/27/2018	Deposit	\$20,105.89
04/30/2018	Accr Earning Pymt Added to Account	\$3.79

CHECKS

Check Number	Date	Amount	Check Number	Date	Amount	Check Number	Date	Amount
12077	04-09	\$140.19	12084	04-20	\$33.27	12090	04-18	\$204.20
12078	04-03	\$68.21	12085	04-20	\$4,166.67	12091	04-26	\$48.38
12081*	04-04	\$201.38	12086	04-23	\$46.73	12092	04-18	\$115.74
12082	04-04	\$415.93	12087	04-20	\$261.08	12093	04-17	\$143.00
12083	04-20	\$6,212.65	12089*	04-18	\$149.42	12094	04-26	\$80.23

OTHER DEBITS

Date	Description	Amount
04/18/2018	CM Wire Domestic 12088	\$815.81

DAILY ENDING BALANCE

Date	Balance	Date	Balance	Date	Balance
04-01	\$5,151.16	04-17	\$16,219.52	04-26	\$4,285.34
04-03	\$5,082.95	04-18	\$14,934.35	04-27	\$24,391.23
04-04	\$4,465.64	04-19	\$15,134.35	04-30	\$24,395.02
04-09	\$4,325.45	04-20	\$4,460.68		
04-12	\$16,362.52	04-23	\$4,413.95		

MEMBER FDIC



NYSE Symbol "PB"

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