

**MEMORIAL MEDICAL CENTER**

**COMMISSIONERS COURT APPROVAL LIST FOR ---- September 22, 2021**

by:CT

**INDIGENT HEALTHCARE FUND:**

**INDIGENT EXPENSES**

Community Pathology Association	50.79
Detar Healthcare System	135.25
HEB Pharmacy (Medimpact) Pharmacy Reimbursement	48.57
MMCenter (In-patient \$25,653.50/ Out-patient \$4,635.54/ ER \$621.76)	30,910.80
Singleton Associates, PA	149.16
Victoria Anesthesiology Assoc	332.08

<b>SUBTOTAL</b>	<b>31,626.65</b>
Memorial Medical Center (Indigent Healthcare Payroll and Expenses)	<b>4,166.67</b>
	Subtotal 35,793.32
Co-pays adjustments for August 2021	(110.00)
Reimbursement from Medicaid	0.00

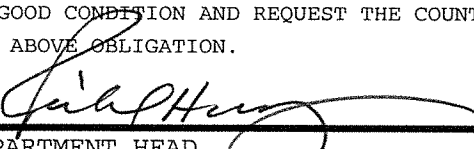
<b>TOTAL APPROVED INDIGENT HEALTHCARE FUND EXPENSES</b>	<b>35,683.32</b>
---	------------------

000009/22/2021	CALHOUN COUNTY, TEXAS
----------------	-----------------------

DATE: 9/22/2021	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			\$35,683.32
	approved by Commissioners Court on 09/22/2021			
1000-001-46010	August 31, 2021 Interest			(\$0.91)
				\$35,682.41

COUNTY AUDITOR APPROVAL ONLY APPROVED ON SEP 10 2021 BY CALHOUN COUNTY AUDITOR	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: 	9/22/2021
	DEPARTMENT HEAD	DATE

©IHS  
Issued 09/03/21

**Source Totals Report**  
Calhoun Indigent Health Care  
Batch Dates 08/31/2021 through 09/01/2021  
For Source Group Indigent Health Care  
For Vendor: All Vendors

Source	Description	Amount Billed	Amount Paid
01	Physician Services	3,799.00	199.95 ✓
01-2	Physician Services- Anesthesia	1,326.00	332.08 ✓
02	Prescription Drugs	48.57	48.57 ✓
05	Lab/X-Ray	11,719.15	135.25 ✓
13	Mmc - Inpatient Hospital	71,611.19	25,653.50 ✓
14	Mmc - Hospital Outpatient	14,377.02	4,635.54 ✓
15	Mmc - Er Bills	1,943.00	621.76 ✓
	<b>Expenditures</b>	<b>104,875.61</b>	<b>31,678.33</b>
	<b>Reimb/Adjustments</b>	<b>-51.68</b>	<b>-51.68</b>
	<b>Grand Total</b>	<b>104,823.93</b>	<b>31,626.65 ✓</b>
		EXPENSES	4,166.67
			35,793.32
		COPAYS	<110.00>
		TOTAL	35,683.32 ✓

APPROVED  
ON

SEP 10 2021

BY   
CALHOUN COUNTY AUDITOR

©IHS  
Issued 09/03/21

**Source Totals Report**  
Calhoun Indigent Health Care  
Batch Dates 02/01/2021 through 09/01/2021  
For Source Group Indigent Health Care  
For Vendor: All Vendors

Source	Description	Amount Billed	Amount Paid
01	Physician Services	19,960.00	1,906.81
01-2	Physician Services- Anesthesia	2,496.00	594.25
02	Prescription Drugs	800.26	800.26
05	Lab/X-Ray	11,719.15	135.25
08	Rural Health Clinics	4,282.00	4,082.13
13	Mmc - Inpatient Hospital	71,611.19	25,653.50
14	Mmc - Hospital Outpatient	93,023.09	29,927.14
15	Mmc - Er Bills	23,754.00	7,601.28
	<b>Expenditures</b>	227,919.10	70,974.03
	<b>Reimb/Adjustments</b>	-273.41	-273.41
	<b>Grand Total</b>	<b>227,645.69</b>	<b>70,700.62</b>
		EXPENSES	33,333.36
			104,033.98
		COPAYS	<620.00>
		TOTAL	103,413.98



Calhoun County Indigent Care Patient Caseload 2021

	Approved	Denied	Removed	Active	Pending
January	2	0	0	11	5
February	0	0	0	11	7
March	1	1	2	10	5
April	2	0	0	12	6
May	0	0	1	11	9
June	0	0	1	11	9
July	0	0	1	10	4
August	0	0	2	8	5
September					
October					
November					
December					

YTD

Monthly Avg	1	0	1	11	6
-------------	---	---	---	----	---

December 2020 Active	9
----------------------	---

Number of Charity patients	197
----------------------------	-----

Number of Charity patients below 100% FPL	71
---	----

Calhoun County Pharmacy Assistance Patient Caseload 2019

	Approved	Refills	Removed	Active	Value
January	7	0	0	7	\$8,589.00
February	4	0	0	11	\$10,869.00
March	2	6	1	12	\$14,515.00
April	2	2	0	14	\$14,719.00
May	1	3	0	15	\$14,765.00
June	3	5	0	18	\$22,563.00
July	2	4	0	17	\$22,897.00
August	1	2	0	18	\$22,546.00
September					
October					
November					
December					

YTD PATIENT SAVINGS	\$131,463.00
---------------------	--------------

Monthly Avg	3	3	0	14	\$16,432.88
-------------	---	---	---	----	-------------

0

December 2020 Active	87
----------------------	----

50240.000	08/04/21	595453		10.00	10.00
50240.000	08/06/21	595847		10.00	10.00
50240.000	08/19/21	597366		10.00	10.00
50240.000	08/20/21	597694		30.00	30.00
50240.000	08/25/21	597912		10.00	10.00
50240.000	08/26/21	598077		10.00	10.00
50240.000	08/30/21	598552		20.00	20.00
50240.000	08/31/21	598456		10.00	10.00

00/00/00	KAH	2
00/00/00	PLB	2
00/00/00	PLB	2
00/00/00	PLB	2
00/00/00	PLB	2
00/00/00	PLB	2
00/00/00	PLB	2
00/00/00	PLB	2

\*\*TOTAL\*\* 50240.000 COUNTY INDIGENT COPAYS 110.00





# PROSPERITY BANK®

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

Statement Date 8/31/2021  
 Account No \*\*\*\*4551  
 Page 1 of 2

13424

## STATEMENT SUMMARY

Public Fund Contractual Ckg w Int Account No \*\*\*\*4551

08/01/2021	Beginning Balance		\$5,434.83
	3 Deposits/Other Credits	+	\$10,749.15
	5 Checks/Other Debits	-	\$10,760.65
08/31/2021	Ending Balance	31 Days in Statement Period	\$5,423.33
	Total Enclosures		7

## DEPOSITS/OTHER CREDITS

Date	Description	Amount
08/05/2021	Deposit	\$10,698.24
08/27/2021	Deposit	\$50.00
08/31/2021	Accr Earning Pymt Added to Account	\$0.91

June P/b  
Copy - Ju

## CHECKS

Check Number	Date	Amount	Check Number	Date	Amount	Check Number	Date	Amount
12471	08-09	\$4,166.67	12473	08-09	\$6,252.97	12475	08-11	\$146.18
12472	08-09	\$168.37	12474	08-12	\$26.46			

## DAILY ENDING BALANCE

Date	Balance	Date	Balance	Date	Balance
08-01	\$5,434.83	08-11	\$5,398.88	08-31	\$5,423.33
08-05	\$16,133.07	08-12	\$5,372.42		
08-09	\$5,545.06	08-27	\$5,422.42		

## EARNINGS SUMMARY

\*\* Below is an itemization of the Earnings paid this period. \*\*

Interest Paid This Period	\$0.91	Annual Percentage Yield Earned	0.16 %
Interest Paid YTD	\$16.85	Days in Earnings Period	31
		Earnings Balance	\$6,789.00

MEMBER FDIC



NYSE Symbol "PB"

0000

101501 : 01342401