

**Rules of  
Department of Social Services  
Division 40—Division of Family Services  
Chapter 81—Vendor Payment for  
Medical Care Services**

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- 13 CSR 40-81.060 Obtaining Information From Providers of Medical Services**  
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- 13 CSR 40-81.070 Length of Time for Submitting Claims**  
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- 13 CSR 40-81.071 Timely Filing and Processing of Claims, Medicaid Program**  
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- 13 CSR 40-81.080 Reasonable Cost-Related Reimbursement Plan for Long-Term Care**  
(Moved to 13 CSR 70-10.005)
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(Rescinded August 11, 1984)
- 13 CSR 40-81.086 Preadmission Screening**  
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- 13 CSR 40-81.092 Required Reporting of Injuries Received by Title XIX Recipients**  
(Moved to 13 CSR 70-4.060)
- 13 CSR 40-81.100 Abortions**  
*Emergency rule filed July 7, 1977, effective July 17, 1977, expired Oct. 15, 1977.*
- 13 CSR 40-81.101 Abortions**  
(Moved to 13 CSR 70-25.100)



**13 CSR 40-81.110 Quality Standards for Approving Manufacturers for the Medicaid Drug Program**  
(Rescinded January 12, 1980)

**13 CSR 40-81.120 Hearing Aid Program**  
(Moved to 13 CSR 70-45.010)

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(Moved to 13 CSR 70-92.010)

**13 CSR 40-81.130 Podiatric Services Program**  
(Moved to 13 CSR 70-30.010)

**13 CSR 40-81.140 Procedures for Medical Services Provider Hearings**  
(Moved to 13 CSR 70-4.030)

**13 CSR 40-81.141 Eligibility Corrective Section Recipient Payments**  
(Moved to 13 CSR 70-4.040)

**13 CSR 40-81.150 Computer-Generated Drug Pricing Tape**  
(Moved to 13 CSR 70-20.070)

**13 CSR 40-81.160 Sanctions for False or Fraudulent Claims for Title XIX Services**  
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**13 CSR 40-81.161 Computation of Provider Overpayment by Statistical Sampling**  
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**13 CSR 40-81.162 Procedures for Evaluation of Appropriate Hospital Admissions and Continued Days of Stay**  
(Moved to 13 CSR 70-15.090)

**13 CSR 40-81.165 Title XIX Provider Enrollment**  
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**13 CSR 40-81.170 Optical Care Benefits and Limitations, Medicaid Program**  
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(Moved to 13 CSR 70-4.070)