

Notification of Medical Policy Revisions: May 2018

Medical Policy	Revision
Dermabrasion	<ul style="list-style-type: none">• Annual Review• No CMS Updates. Minor Revisions Only.
Vertebroplasty and Percutaneous Vertebral Augmentation	<ul style="list-style-type: none">• Annual Review• No CMS Updates. Minor Revisions Only.