

## Notification of Medical Policy Revisions: June 2021

Medical Policy	Revision
Durable Medical Equipment	<ul style="list-style-type: none"><li>• Annual Review; NCD 280</li><li>• No CMS Updates. Minor Revisions Only.</li></ul>
Reconstructive Eyelid Surgery	<ul style="list-style-type: none"><li>• CMS Update; LCD L344111</li><li>• Addition of Indications for Coverage B. 1. i. “<b>or</b> a difference of at least 12 degrees between the resting field and the field performed with manual elevation of the eyelid margin.”</li></ul>
Transplant: Stem Cell	<ul style="list-style-type: none"><li>• Annual Review; NCD 110. 23</li><li>• No CMS Updates. Minor Revisions Only.</li></ul>