

REVISION HISTORY LOG

Revised/ Issued Date	Section	Section Title	Number of Page (s)	Reason for Revision
03/13/18	5.1	Covered Services – Exclusions and Limitations”	3	Revised to remove references to the office visit limit for outpatient services on page 3.
03/13/18	5.1	Covered Services – Preventive Medicine Evaluation and Management Services (Adult)”	1	Revised to remove references to the office visit limit for outpatient services.