## CHAPTER 36: PORTABLE X-RAY

## **REVISION HISTORY LOG**

Revised/ Issued Date	Section	Section Title	Numbe r of Page (s)	Reason for Revision
04/27/22	36.0	Overview	1	Revisions made to incorporate alphanumeric formatting.
04/27/22	36.1	Covered Services	2	Revisions made to incorporate alphanumeric formatting.
04/27/22	36.3	Provider Requirements	2	Revisions made to incorporate alphanumeric formatting.
04/27/22	36.4	Reimbursement	1	Revisions made to incorporate alphanumeric formatting.
04/27/22	Appendix A	Fee Schedule	1	Revisions made to incorporate alphanumeric formatting.
04/27/22	Appendix B	Contact Information	1	Revisions made to incorporate alphanumeric formatting.