

<b>CMS Manual System</b>	<b>Department of Health &amp; Human Services (DHHS)</b>
<b>Pub 100-03 Medicare National Coverage Determinations</b>	<b>Centers for Medicare &amp; Medicaid Services (CMS)</b>
<b>Transmittal 205</b>	<b>Date: March 2, 2018</b>
	<b>Change Request 10295</b>

**Transmittal 205, dated March 2, 2018, is being rescinded and replaced by Transmittal 206, dated, April 3, 2018 to remove the April 2018 implementation date and to remove the Place of Service (POS) indicators 19 and 22 in Pub. 100-04 business requirements 10295.04.1.1 and 10295.04.1.1.1 and the appropriate language in the policy Pub. 100-3 and Pub. 100-04 manuals have been updated to reflect this change. Additionally, the claims processing manual has been updated to delete duplicate messaging and formatting revisions. All other information remains the same.**

**SUBJECT: Supervised Exercise Therapy (SET) for Symptomatic Peripheral Artery Disease (PAD)**