

<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 71</b>	<b>Date: JUNE 29, 2007</b>
	<b>Change Request 5660</b>

**SUBJECT: Percutaneous Transluminal Angioplasty (PTA)**

**TRANSMITTAL 71, CHANGE REQUEST 5660, DATED JUNE 29, 2007 IS RECINDED AND REPLACED WITH TRANSMITTAL 77.**