

**From:** [Gruttadauria, Sharon E.](#)  
**To:** [Thorpe, Lisa \(CMS/CM\)](#)  
**Cc:** [Schofield, Daniel \(RIS-KOP\)](#); [Terry Fortin](#)  
**Subject:** RE: NCPDP Definition of Valid Prescriber TG - OAP Taxonomy Recommendation  
**Date:** Thursday, June 23, 2016 9:46:13 PM  
**Attachments:** [image001.emz](#)  
[image003.emz](#)  
[oledata.mso](#)  
[image005.png](#)  
[image004.png](#)

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Hi Lisa

Thank you for the quick feedback on the Task Group OAP taxonomy recommendation.

The reason the Task group wanted to socialize this with CMS, is to ensure this recommendation aligned with CMS processes and to prevent retrospective audits due to conflicts in processes. For Example:

- PDE processing as it relates to the Type of Fill and Non-PECOS NPI Indicator.
  - For example the plan sponsor may determine the Type of Fill to be R and the Non-PECOS Indicator to be Y, due to the prescriber having at least 1 OAP taxonomy (regardless if it is the primary or non-primary taxonomy). (e.g. OAP). If CMS does not leverage the same recommendations, CMS may determine based on the alternate taxonomies in NPPES, that the provider is eligible to enroll and a provisional fill should have applied.
- PDE processing as it relates to the technical guidance, where there is a lack of reference to multiple taxonomies.
  - *However, because prescriptions written by all prescribers, except OAPs, are now subject to new Part D rules, sponsors must now be able to separately identify pharmacy claims involving prescriptions written by OAPs at point of sale (POS) from other claims in order to continue to properly adjudicate them. To date, CMS has identified pharmacists and naturopaths as two categories of providers that might meet the definition of "Other Authorized Prescribers."*

Thank you

Sharon

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**From:** Thorpe, Lisa (CMS/CM) [<mailto:Lisa.Thorpe@cms.hhs.gov>]  
**Sent:** Thursday, June 23, 2016 10:49 AM  
**To:** Gruttadauria, Sharon E.  
**Cc:** Schofield, Daniel (RIS-KOP); Terry Fortin  
**Subject:** RE: NCPDP Definition of Valid Prescriber TG - OAP Taxonomy Recommendation

Sharon – On the below, we have no further guidance on taxonomies of Other Authorized Prescribers (OAPs) than what was in the Prescriber Enrollment Technical Guidance issued in December 2015.

However, the Technical Guidance does not prevent the industry from developing recommendations to promote standardization of processes.

Also, as a reminder, we stated in the Prescriber Enrollment Technical Guidance:

CMS does not require Part D sponsors to validate a prescriber's prescriptive authority, with the exception of existing guidance that we expect Part D sponsors to confirm that a prescribed

controlled substance is consistent with the prescriber's DEA Schedule registration, when it is possible to map a prescriber NPI to an individual DEA number. While Part D sponsors may generally rely on pharmacies to dispense drugs only pursuant to valid prescriptions, Part D sponsors are still responsible if they submit prescription drug event records to CMS that are later determined not to be associated with valid prescriptions under applicable law, as they have always been.

Thus, any industry recommendations for consistency with respect to OAPS should be understood to not eliminate Part D sponsor responsibility with respect to valid prescriptions.--Lisa

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**From:** Thorpe, Lisa (CMS/CM)  
**Sent:** Monday, June 20, 2016 10:18 AM  
**To:** 'Gruttadauria, Sharon E.' <[Sharon.Gruttadauria@CVSHealth.com](mailto:Sharon.Gruttadauria@CVSHealth.com)>  
**Cc:** Schofield, Daniel (RIS-KOP) <[Daniel.Schofield@risk.lexisnexis.com](mailto:Daniel.Schofield@risk.lexisnexis.com)>; Terry Fortin <[tfortin@ncdpd.org](mailto:tfortin@ncdpd.org)>  
**Subject:** RE: NCPDP Definition of Valid Prescriber TG - OAP Taxonomy Recommendation

Sharon – I will review this. In the meantime, did you receive the HPMS email about the updated Medicare Individual Provider File that was sent by CMS last Wednesday?

Also, can you forward a new invitation for the Monday am task group meetings, please? It looks like it has expired for me.

Thank you.

--Lisa

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**From:** Gruttadauria, Sharon E. [<mailto:Sharon.Gruttadauria@CVSHealth.com>]  
**Sent:** Monday, June 20, 2016 10:01 AM  
**To:** Thorpe, Lisa (CMS/CM) <[Lisa.Thorpe@cms.hhs.gov](mailto:Lisa.Thorpe@cms.hhs.gov)>; Shapiro, Jennifer R. (CMS/CM) <[Jennifer.Shapiro@cms.hhs.gov](mailto:Jennifer.Shapiro@cms.hhs.gov)>; Banks, Alisha J. (CMS/CPI) <[Alisha.Banks@cms.hhs.gov](mailto:Alisha.Banks@cms.hhs.gov)>  
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**Subject:** NCPDP Definition of Valid Prescriber TG - OAP Taxonomy Recommendation

Good Morning Lisa, Jennifer and Alisha,

The NCPDP Definition of a Valid Prescriber Task Group wanted to share the below information with CMS, as this specific prescriber enrollment validation business case may also effect PDE claims processing. The task group reviewed the situation as presented by an industry stakeholder and formulated a recommendation to ensure standardization of processes. This recommendation facilitates alignment of OAP validation via NPPES taxonomy and eliminates conflict as to when a provisional fill would apply.

NPPES Prescriber Taxonomy Examples:

1 **Primary Taxonomy = 175F00000X (Naturopath)**

Secondary Taxonomy = 363LF0000X (Nurse Practitioner, Family Health)

2. Primary Taxonomy = 363LF0000X (Nurse Practitioner, Family Health)

**Secondary Taxonomy = 175F00000X (Naturopath)**

**NCPDP TASK GROUP RECOMMENDATION:**

CMS guidance states to use NPPES taxonomy to validate OAP status.

In the situation where a prescriber has multiple taxonomies, validation of OAP status should occur as follows:

1. Check enrollment first, if enrolled, follow enrollment process
2. If not enrolled, prioritize check for OAP taxonomy:
  - a. Primary or secondary designation is not relevant as long as there is an active taxonomy.
  - b. If at least one of the active taxonomy meets the definition of OAP, treat them as OAP.
  - c. Otherwise if none of them are OAP, then determine provisional fill eligibility.

If CMS has any concerns with this recommendation, the task group requests CMS share these concerns with the task group on the next scheduled call. The task group meets every Monday at 11am est. Dial in number is: 1-415-655-0060 Access Code: 919-238-282.

Thank you,

Sharon Gruttadauria, Task Group Leader

Dan Schofield, Task Group Leader

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