



March 21, 2022

The Honorable Glenn Youngkin
Governor of the Commonwealth of Virginia
P.O. Box 1475
Richmond, VA 23218

The Honorable Hyland F. Fowler Jr.
Virginia House of Delegates
Pocahontas Building
900 E. Main Street
Richmond, VA 23219
Sent via electronic mail

The Honorable Siobhan S. Dunnivant
Senate of Virginia
Pocahontas Building Room No: E613
P. O. Box 396
Richmond, VA 23218
Sent via electronic mail

Dear Governor Youngkin, Mr. Fowler and Dr. Dunnivant:

Re: Virginia HB 360 and SB 428 Health insurance; carrier contracts, carrier provision of certain prescription drug information

The National Council for Prescription Drug Programs (NCPDP) is a not-for-profit, American National Standards Institute (ANSI) Accredited Standards Developer (ASD) consisting of more than 1,700 members who represent drug manufacturers, chain and independent pharmacies, drug wholesalers, insurers, mail order prescription drug companies, pharmaceutical claims processors, pharmacy benefit managers, physician services organizations, prescription drug providers, software vendors, telecommunication vendors, service organizations, government agencies, professional societies and other parties interested in electronic standardization within the pharmacy services sector of the healthcare industry. NCPDP provides a forum wherein our diverse membership can develop solutions, including ANSI-accredited standards, and guidance for promoting information exchanges related to medications, supplies and services within the healthcare system.

For over 40 years, NCPDP has been committed to furthering the electronic exchange of information between healthcare stakeholders. The NCPDP Telecommunication Standard is the standard used for eligibility, claims processing, reporting and other functions in the pharmacy services industry as named in Health Insurance Portability and Accountability ACT (HIPAA). The NCPDP SCRIPT Standard, Telecommunication Standard and the Formulary and Benefit Standard are the standards in use in electronic prescribing as named in Medicare Modernization ACT (MMA).

The purpose of this correspondence is to explain the differences in our SCRIPT and Real-Time Prescription Benefit (RTPB) standards and to request a change to the NCPDP standard named in Virginia HB 360 and SB 428.

Virginia HB 360 and SB 428 mention the NCPDP SCRIPT standard in the following text:

“Beginning July 1, 2025, any carrier or its pharmacy benefits manager shall provide real-time cost information data to enrollees and contracted providers for a covered prescription drug, including any cost-sharing requirement or prior authorization requirements, and shall ensure that the data is accurate. Such

cost information data shall be available to the provider in a format that a provider can access and understand such as through the provider's e-prescribing system or electronic health record system for which the carrier or pharmacy benefits manager or its designated subcontractor has adopted that utilizes the National Council for Prescription Drug Programs SCRIPT standard from which the provider makes the request.”

The NCPDP SCRIPT Standard Version 2017071 enables workflow efficiencies and enhances prescription accuracy with transactions supporting new prescriptions, prescription changes, renewal requests, prescription fill status notification, prescription cancellation and pharmacy to pharmacy prescription transfer. While the SCRIPT standard provides an electronic means for determining whether prior authorization is required for a specific product and patient, it does not support the exchange of real-time cost information between a prescriber and a pharmacy benefits manager.

NCPDP developed the RTPB standard to enable the real-time exchange of patient-specific formulary and benefit information between providers/prescribers and pharmacy benefit managers/processors. Each RTPB transaction (request and response) is designed to provide information about any coverage restrictions, including prior authorization requirements, and the estimated patient financial responsibility amount of the submitted product. The transaction also supports communicating product coverage and cost information for up to five alternative pharmacies and up to ten alternative products. In addition, to the estimated financial responsibility, the estimated plan cost or estimated combined plan and patient savings may also be communicated when allowed by the plan.

In a letter dated August 20, 2021, NCPDP requested the Centers for Medicare & Medicaid Services (CMS) adopt, via an appropriate rulemaking process, the Real-Time Prescription Benefit Standard Version 12 to provide an industry-wide electronic standard for a real-time benefit tool. The adoption of the standard meets CMS’ requirements to advance price transparency and interoperability as required by Section 6062 of the SUPPORT for Patients and Communities Act. It also aligns with the Patients over Paperwork initiative.

NCPDP respectfully requests the RTPB standard be named instead of the SCRIPT standard prior to the issuance of a regulation or bulletin based on HB 360 and SB 428. NCPDP appreciates your time and attention to this letter.

For direct inquiries or questions related to this letter, please contact:

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NCPDP
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Respectfully,



Lee Ann C. Stember
President & CEO
National Council for Prescription Drug Programs (NCPDP)