November 2013 Work Group Recaps:

For results of Data Element Request Forms (DERFs) and External Code Set (ECLs) reviewed see DERF Resolution at [http://www.ncpdp.org/members/members_wg_info.aspx?wgid=wgmc](http://www.ncpdp.org/members/members_wg_info.aspx?wgid=wgmc)

Work Group 1 Telecommunication

Ballots:
- Ballot WG010059 Telecom E.4 (DERF 001116) was valid at 70.04% of the consensus group voting and received a 75% approval rating. There were no comments. The ballot will be sent to NCPDP Board of Trustees for approval after a 30-day appeal period.

DERFs/ECLs Reviewed:
- DERF 001151 was approved.
- DERF 001152/ECL 000147 was recommended to MC to be approved with modifications.
- DERF 001153/ECL 000148 was recommended to MC to be pended with assignment to WG1 Coordination of Benefits Task Group.
- DERF 001164/ECL 000150 was recommended to MC to be approved.
- DERF 001166 was approved.
- DERF 001167 was approved.
- DERF 001168 was approved as modified.
- DERF 001170/Emergency ECL 000151 was recommended to MC to be approved.
- DERF 001171 was approved with modifications.

Old Business:
- **NCPDP SNIP Committee** has not met. They will work on further notification and education to industry on the requirement to support Quantity Prescribed in Telecom D.0 billing transactions (see more information under “Updates” below). They will discuss educational opportunities for compound/specialty pharmacy entities and the National Health Plan Identifier.
- A HIPAA Standards, Operating Rules, and regulations (HPID/ICD/NPI/EFT/ERA) update was given.
- Use of Quantity Prescribed (46Ø-ET) in the Telecommunication Standard claim billing - Note this field would be required for Part D Schedule II Controlled Substance claims; however the use of this field is not limited to Part D claims only.
  - Telecom D.0 and all versions from that point have been updated (November 2012).
  - DSMO Change Request filed (and approved).
  - OESS and NCVHS have been sent information.
    - NCVHS sent a recommendation letter to HHS.
    - OESS has responded approving the request to proceed however the initial response of proceeding with a Federal Register notice only has been stopped as OGC says OESS will need to publish either a Notice of Proposed Rule Making (NPRM) or an Interim Final Rule (IFR) or Interim Final Rule with Comment (IFC).
      - NCPDP submitted a letter to the Secretary of HHS requesting clarification and a response. It may require a second opinion.
      - NCPDP and JC White have requested an explanation of the Senate intent of section 1104 Administration Simplification of ACA.
    - **Industry implementation January 1, 2014 – Notifications to industry, in Telecom D.0 Imp Guide, in Version D Editorial that this date is on hold.**
  - Approved WG1 Scope and Goals have been posted.

Task Groups:
- The **Telecommunication FAQ Task Group** discussed questions submitted and brought forward the task group’s recommendations to update the Version D Editorial for questions
received. The Work Group discussed the suggested approach for D-One-Hundred Six and Eight (see documents in WG1 zip file).

- **Coordination of Benefits Task Group** discussed questions submitted. They submitted DERF 001164/ECL 000150.
- **Financial Information Reporting Task Group** is completing a non-plan of record white paper. They completed a white paper recommending a Post Automated TrOOP Balance Transfer (ATBT) Process (see [http://www.ncpdp.org/Whitepaper.aspx](http://www.ncpdp.org/Whitepaper.aspx)). They built a manual retrigger report.
- **Information Reporting Problems Task Group** is working on a qualified N white paper and process. The WG1 Supplemental Payer Reporting Task Group sent them a request to examine the ability to return PLRO status on N transactions.
- **Post Adjudication Task Group** is discussing a file layout for Transition Fill Claims Transfers.
- **Audit Task Group** discussed enhancements to the standard based on the pilot and brought forward DERF 001166.
- **Safe Use Processing – REMS Task Group** will remain active in case there are implementation questions or action items related to the federal PDMP under discussion.
- **Definition of a Valid Prescriber Task Group** brought forward items to be included in the Version D Editorial document and questions they are working on. The task group is building a white paper of recommendations and gaps.
- **Supplemental Payer Reporting Task Group** met to discuss statistics on N processing which has improved greatly with unique BIN/PCN usage.
- **Eligibility Verification Enhancements Task Group** submitted DERF 001171. They created a survey for the industry on the next HIPAA version.
- **Service Billing Task Group** completed their work and disbanded.
- **Compound Billing Solutions Task Group** brought forward recommendations for claim processing with product identifiers that are not NDCs. See Topic 3 section 1.3.1 Examples and Recommendations. These recommendations are available for review and will be submitted as a DERF for the February Work Group meetings.
- **Transaction ID Task Group** is examining the use of a unique transaction identifier for all Telecom transactions. They are working through scenarios. They submitted DERF 001152/ECL 000147.
- **Appendix G Task Group** completed review of the Telecom Standard Imp Guide’s “Appendix G. Two Way Communication to Increase the Value of On-line Messaging” and submitted DERF 001168. The task group completed their work and disbanded.
- **Vaccine Services Task Group** is discussing pharmacy benefit billing for products, services, and products and services. They will discuss further based on recommendations from the Work Group.
- **Benefit Integration Task Group** is reviewing requirements for a standard for entities to share information on deductible, copay and other Out of Pocket (OOP) amounts to correctly maintain the Maximum Out of Pocket (MOOP) accumulations as described in the ACA.

**New Business:**

- The work group discussed a request for assistance from the WG10 Specialty and Compounding Pharmacy Task Group.

**Work Group 2 Product Identification**

**DERFs/ECLs Reviewed:**
- DERF 001165 – withdrawn by the submitter.

**Task Groups:**

- **Structured Product Labeling Activities Task Group** tracks the activities of the SPL, offers suggestions to improve access and usability of the FDA Structured Product Label and Electronic Drug Listings, and monitors the work of the Guiding Coalition for feedback to the work group. The Coalition has sent 18 letters to the FDA and is working
on one other letter regarding Storage Conditions. This letter would recommend indexing the storage conditions that appear in the package inserts. Update from Lonnie Smith of the FDA—there are currently 55,630 product SPL files posted on DailyMed. Recognition was given to the subgroup formed to work on adding the NCPDP Billing Unit to the SPL. At last report the number of Billing Unit SPL files on DailyMed is over 54,437.

- The **Product Review and Billing Unit Exception Task Group** is reviewing the exceptions within the Implementation Guide and issues that result from changes to existing products or release of new products.
  - Reviewed four new QUIC forms.
  - Submitted a DERF for NHRICs with 5-digit labeler codes and 5-digit product codes recommending conversion by inserting the zero in the sixth position. This will require a change to Appendix D of the Telecommunication Standard.
  - The subgroup is nearing completion of the presentation for a BUS. The webinar is scheduled for 12/5/13 and will be ACPE approved.

- The **NCPDP Product Identification Standard Task Group** has completed the draft of the NCPDP Product Identification Standard and submitted a DERF for review at this work group meeting.

- The **SPL REMS Requirements Task Group** is to gather the data needed to develop a template for pharmaceutical manufacturers to use in electronic submission of all the components for risk evaluation and mitigation strategies (REMS) drugs to a central repository (DailyMed) via FDA’s Structured Product Labeling system. Worked on the detailed written comments submitted by NCPDP to the FDA docket on Standardizing and Evaluating REMS Strategies. October 28, 2013, Gerry McEvoy presented an update on the current status of advocating SPL as the preferred path for standardizing REMS at the first Annual SPL Jamboree hosted jointly by the National Library of Medicine and FDA.

- The **Dates Associated with Pharmaceutical Products Task Group** is to investigate definition inconsistencies, involve government agencies to make them aware of the issues, and provide education on the importance via a white paper or other means. The group continues to investigate dates used throughout the industry.

- The **Evaluation of BUS’s Billing Units Task Group** is to gain an understanding of the issues by looking at the unique attributes of patient administered products, identify any challenges in the current BUS, review billing and reimbursement processes for these products, identify similarities amongst these products and review past work on these products by WG2 and WG7. A presentation with speaker notes is in development to re-educate several stakeholders regarding the Billing Unit Standard and why it is important. An initial primary goal will be to leverage how FDA promotes the BUS through NCPDP to make that the standard for CMS.

- The **Naming Standards for Drugs, Biologics and Biosimilars Task Group** has sent a letter to the Director of CDER. In anticipation of a meeting with the FDA, the group is working on a presentation for the FDA that stresses the concerns: decisions made in a vacuum with no considerations to systems impact and potential for medication errors.

- An update on the joint **WG11 and WG2 Drug Description Task Group** was provided. See WG11 meeting minutes.

- An update on the **MC NDC Depletion Task Group** was provided. See MC meeting minutes.

**New Business:**

- **QUIC Form Review:**
  - **201324 SwabFlush NDC 63807-0103-01**: the BU=mL per Section 5.2.2 of the Billing Unit Standard.
  - **201325 HCG, EP Powder NDC 51927-3560-00**: BU=1 EACH per Section 5.5.2 of the Billing Unit Standard.
  - **201326 Breo Ellipta NDC 0173-0859-14**: BU= each quantity of 28 (total number of blisters) per Section 5.1.3 of the Billing Unit Standard.
o #201327 Breo Ellipta NDC 0173-0859-10 – BU= each quantity of 60 (total number of blisters) per Section 5.1.3 of the Billing Unit Standard.
  o #201328 Gemcitabine Hydrochloride For Injection (Brand GEMZAR®) NDC 55111-0686-07 & 55111-0687-25 - BU=1 EACH per Section 5.1.2 of the Billing Unit Standard.

- Formed two new task groups:
  - The Application of BUS Clarification Task Group will identify the rationale used to determine the billing unit from past QUIC forms/products reviewed and the causes that lead to product reviews to capture/document the rationale and the process followed.
  - The UDI Definition Task Group will define the UDI as it applies to all applicable NCPDP standards and review the definitions of existing product identifiers used in the NCPDP standards for accuracy.

Work Group 3 Standard Identifiers

DERFs/ECLs Reviewed:

- DERF 001154 was approved with modifications.
- DERF 001155 was approved.

Task Groups:

- The Pharmacy and/or Combination ID Card Task Group modified the implementation guide based on the implementation of Health Plan Identifier. The revised implementation guide was submitted as part of DERF 001154 (see DERFs above). During the next quarter, the Task Group will work to develop recommended language for a implementation guide for the use of keychain cards as identification cards for the discount card program and continue to track US House Bill 2828 (smart card legislation).
- The Pharmacy ID Card Operating Rules Task Group did not meet this quarter.
- The Health Plan Identifier (HPID) Task Group submitted DERFs 001154 and 001155 (see above) which identify modifications to support the implementation of Health Plan Identifier. These DERFs requested modifications to the Data Dictionary, External Code List and the documents listed below:
  - Telecommunication Standard
  - Uniform Healthcare Payer Data Standard
  - Post Adjudication Standard
  - XML Standard
  - Health Care Identification Card: Pharmacy and/or Combination ID Card Implementation Guide

  Next steps: The HPID Task Group in conjunction with WG11 ePrescribing and Related Transactions and WG45 External Standards Assessment, Harmonization and Implementation Guidance will review the ASC X12 Type 3 Technical Report Maintenance Documents and clarifications that were identified and developed to support consistent implementation of the Health Plan Identifier.

Work Group 7 Manufacturer and Associated Trading Partner Transaction Standards

Ballots:

- Recirculation Ballot WG070010R Manufacturer Rebate Standard v07.00 was valid at 79.30% of the consensus group voting and received a 75% approval rating. New Negative and Objection comments were reviewed by the Work Group. The ballot will be sent to NCPDP Board of Trustees for approval after a 30-day appeal period.

Task Groups:

- The Reference Guide Task Group did not meet this quarter.
- The Medical/Biologics Task Group did not meet this quarter.
- The Medicare Part D Coverage Gap Task Group did not meet this quarter.
- The CMS Task Group did not meet this quarter.
- The Formulary-E-Prescribing & Tracking Task Group did not meet this quarter.
The **Rebate Standard Update Task Group** responded to questions related to the Manufacturer Rebate Standard.

The **Regulatory Tracking/Pedigree Task Group** met this quarter to discuss the Federal Legislative efforts underway. HR 3204 passed the House in September. It would establish an electronic, interoperable system to track pharmaceuticals over the course of 10 years. Phase 1 of the bill would take effect July 2015.

**New Business:**

- WG7 formed the **Formulary Management Survey Task Group** to develop and conduct a survey to understand the current scope, process and challenges for both the manufacturers and payer/processors in formulary management and validation.

**Work Group 9 Government Programs**

**DERF/ECL Reviewed:**

- DERF 001156/Emergency ECL 000149 was recommended to be approved by MC with a modification to the value definition.

**Old Business:**


**Task Groups:**

- The **Prescription Monitoring Program (PMP) Task Group** presented updated information for states that have prescription drug monitoring programs.

- The **340B Task Group** submitted a DERF for review by WG11 ePrescribing and Related Transactions. The DERF requests the addition of a new optional data element to allow exchange of the associated Health Resources and Services Administration (HRSA) Office of Pharmacy Affairs (OPA) Identification Code(s) in various SCRIPT Messaging.

- The **Dual Eligible Recipients and Medicare Advantage Plans Task Group** did not meet this quarter.

- The **Health Insurance Exchange/Marketplace Task Group** brought forward questions and responses for review by Work Group 9. The responses are not final at this time due to fluctuation of information.

- The **Medicaid Subrogation FAQ Task Group** did not meet as no new questions were received.

- The **Medicare Part D FAQ Task Group** brought forward questions and recommended responses for approval by Work Group 9. The FAQ document will be updated and published.
  - The **Data Sharing for Overutilizers Sub Task Group** is reviewing the drugs being used in the categories of APAP and Opioids due to an expanded CDC list, technical specifications/process for uploading responses to CMS reports and handling of APAP management (case management vs. POS edits). The task group provided recommendations to CMS for improvement in the reporting tool and filter criteria.

- The **Supplemental Payer Part D Reconciliation Standardization Task Group** is working to determine if standards can be created to communicate Part D beneficiary liability changes to other payers that are supplemental to Part D and allow the supplemental payer to communicate any changes in coverage as a result of the Part D changes. The task group continued work on data elements for a standard report. The task group also discussed level of effort required by Part D plans for COB, specifically how the various activities are being interpreted as meeting the COB requirement today.

- The **Hospice Task Group** was formed at the August Work Group meetings to identify and propose solutions to issues associated with the recognition and verification of Medicare Part A Hospice eligibility and Part D processing of possible Medicare Part A Hospice claims at both the point of sale and retrospectively. The task group composed a
letter to CMS requesting additional guidance and clarification of existing guidance and
verbal comments made at the August Work Group meetings.

New Business:
- Government Programs and Industry Changes:
  - CMS Medicaid Update
    - Medicaid Alternative Benefit Plans and Essential Health Benefits
  - Legislative Briefing Topics:
    - Insurance Marketplace Update
    - Continuity of Care/ "Churning"
    - Program Integrity Rule (DHHS 9957-F)
    - USP Medicare Model Guidelines v6.0
- WG1 Benefit Integration Task Group Update - This task group is developing a standard for exchange of accumulator dollars in an effort to maintain a total accumulator amount that is combined of various benefit types (e.g. Medical, Pharmacy).

Work Group 10 Professional Pharmacy Services

Old Business:
- There was an update on the potential development of a pilot project for integration of device and telemedicine functions into pharmacy workflow and systems.
- Changes made during the Board approval process of the WG10 Scope and Goals were shared with the work group.

Task Group Reports:
- The MTM Communications Task Group continues with development of pharmacy targeted applications for existing Consolidated CDA documents.
- The Acetaminophen Best Practices Task Group is awaiting decision on actions stemming from the June Focus Group targeting inpatient and transition of care overdose issues related to acetaminophen. Updates on the industry adoption of the white paper recommendations were provided.
- The Specialty and Compounding Pharmacy Service Task Group presented proposals to subdivide into three sub groups to address the use cases associated with Telecommunication, eprescribing and manufacture reporting. Members of the task group continue to work with the WG1 Compound Billing Solutions Task Group.
- The mL White Paper Task Group has completed draft content for the mL white paper and is beginning editing and formatting for continuity, consistency and flow.
- The DUR Rejection Review Task Group review of Appendix G has been completed by WG1 Appendix G Task Group. The task group was disbanded.
- The Prescribable Medication Information at Point of Care Task Group has initiated a white paper aimed at recommending best practices to assure the availability of accurate and timely medication information at the point of care.

Work Group 11 ePrescribing & Related Transactions

Ballots:
- Ballot WG110057 SCRIPT/Specialized (DERF 001103, 001123, 001146, 001147) is considered a Valid Ballot having received 70.48% of Consensus Group votes. The Work Group adjudicated the comments received. The comments were voted as persuasive and editorial, so modifications will be made. If the submitters agree to change their vote to approve or abstain as appropriate, the ballot will not be recirculated and will proceed to the Board of Trustees for approval after the required appeal period. If the submitters do not wish to change their vote to approve or abstain as appropriate, the ballot will be recirculated.

DERFs/ECLs Reviewed:
- DERF 001128 was withdrawn by the submitter.
- DERF 001138 was withdrawn by the submitter.
- DERF 001157 was approved with modifications.
• DERF 001158 was approved with modifications.
• DERF 001159 was approved.
• DERF 001160 was denied while a valid idea, the request does not support meeting patient and prescriber expectations for the pharmacy workflow.
• DERF 001161 was pended for more discussion by the Electronic Prescribing Best Practices Task Group.
• DERF 001162 was pended for more discussion by a new Delivery Task Group.
• DERF 001163 was pended for more discussion by a new Delivery Task Group.
• DERF 001169 was pended to WG11 Prior Authorization Workflow to Transactions Task Group for more work.

Old Business:
• An industry update was provided on NCVHS Subcommittee on Standards, CMS (eprescribing), and DEA eprescribing for controlled substances and implementation activities.
• Approved WG11 Scope and Goals have been posted.

Task Groups:
• The Formulary and Benefit Task Group worked on pended DERFs (withdrawn due to lack of business case) and new DERFs which have been submitted for the February 2014 work group meetings.
• The XML Task Group reviewed submitted DERFs. They will discuss support for extensions in schemas. See overview in WG11 zip file.
• The NCPDP/HL7 Pharmacist Functional Profile Task Group did not meet this quarter.
• The WG11 Electronic Prescribing Best Practices Task Group brought forward DERF 001161 and recommendations for the SCRIPT Implementation Recommendations document on veterinarian identifiers, CancelRx, use of Notes, and coupon identifiers (see WG11 zip file). A report was provided on the recent Prescription Quality Stakeholders Group and suggestions for next steps to the Electronic Prescribing Best Practices Task Group.
• An update was given from the WG14 LTPAC ePrescribing Task Group. They are evaluating enhancements for LTPAC in eprescribing such as Opportunities to use the prescription change workflow (RxChange) and query (ClinicalInfoRequest) in the LTPAC setting. Workflows to accommodate controlled substance prescriptions—transmitted directly from the prescriber's system to the pharmacy (bypassing the facility), electronic prior authorization, and messaging between a consultant pharmacist and a physician. The task group decided to create implementation recommendations for use by facility vendors and pharmacies that are migrating HL7 interfaces to the SCRIPT standard (to meet the Medicare e-prescribing standards).
• The REMS and ePrescribing Task Group has refined their use cases between prescriber, pharmacy, REMS Administrator, switch/intermediary for safe use programs, and has identified the data elements needed. They worked through flows and decided to use the transaction flow like electronic prior authorization for REMS. They will work through the actual transactions and then updates to an implementation guide. They have provided trigger/data element analysis information to the WG2 SPL Task Group.
• The RxFill Task Group modified the existing implementation guidance for the Fill Status Notification transactions. They also worked with the Pharmacy to Pharmacy Prescription Transfer Task Group and jointly submitted DERF 001158.
• The Electronic Prior Authorization Workflow to Transactions Task Group did not meet this quarter. DSMO Change Request 1189 has been filed to request the SCRIPT Standard version 2013071 ePA transactions only (not all SCRIPT transactions) be named in HIPAA for prior authorization of medications and supplies under the pharmacy benefit. This will be a topic at the January NCVHS meeting.
• The WG11/2 Joint Drug Description Task Group have begun a project with NLM for creating processes for supporting RxNorm eprescribing names.
- The **Pharmacy to Pharmacy Prescription Transfer Task Group** brought forward DERF 001158 for the transfer exchanges between pharmacies.
- The **Meaningful Use and NIST Test Methods for ePrescribing Task Group** is on hiatus. They will begin discussing testing for RxChange, structured Sig, and other testing.
- The **Electronic Signature Guidance Task Group** is completing a white paper for outreach to explain signature terms and use in electronic prescribing.
- The **Implementation of Structured Sig Task Group** began building guidance on implementation and Q&A from implementers. They are also collecting top used sigs and creating examples of those sigs.

**New Business:**
- An overview was given on CMS Call Letter on Prescription Delivery Consent.
- WG11 and WG45 discussed the need to review ASC X12 transactions using HPID (Nov/Dec review) – WG3 HPID Task Group will host a call and invite the appropriate WG45 Task Group and the WG11 ePrescribing Best Practices Task Group for input. They will discuss the ASC X12 270/271, and then move to the other transactions.
- The work group discussed a request for assistance from the WG10 Specialty and Compounding Pharmacy Task Group. A new **Specialty Requirements for ePrescribing Task Group** was formed.
- A new **Prescription Delivery Task Group** was formed to discuss pended DERFs 001162 and 001163.

**WG14 Long Term and Post Acute Care (LTPAC)**

**Old Business:**
- Industry/Regulatory updates were provided which included HIPAA and NCVHS.
- Co-Chairs reported that the WG Scope and Goals were approved by the Board of Trustees and have been posted on the NCPDP website.

**Task Group Reports:**
- The **ePrescribing Task Group** reported they will prepare guidance on the use of SCRIPT transactions in LTC focusing on the transition from HL7 messaging to SCRIPT based on lifting of the LTC exemption for ePrescribing effective November of 2014.
- The **LTPAC Current Billing Issues Task Group** provided a report on their last quarter activities including discussions on the ICD-10 transition, a pharmacy workflow incorporating the use of the ePA transactions, patient residence code values and additional changes for the LTC section of the vD.0 Editorial Guide.
- The **Review of Telecommunication Standard Appendix G Task Group** in conjunction with WG1 Telecommunication completed the review of the current Appendix G in the Telecommunication Implementation Guide and a DERF was approved to remove it from a future version of the standard. The information will now reside in the vD.0 Editorial Guide. The task group has completed their work and was disbanded.
- Updates were provided from the **WG1 Eligibility Verification Enhancements Task Group**, the **WG9 Medicare Part D FAQ Task Group** and the **WG9 Hospice Task Group**.

**Work Group 16 Property & Casualty/Workers Compensation**

**Old Business:**
- The revised Manual Claim Forms Reference Implementation Guide incorporating Colorado compound codes has been published.
- An IAIABC update was provided.
- The Reconsideration Billing Survey is available by link from the NCPDP website and the Collaborative Workspace. Delay in IAIABC publication may necessitate extension beyond the current November 22 closure date.
- Changes made during the Board approval process of the WG16 Scope and Goals were shared with the work group.

**Task Group Reports:**
• The Legislative/Regulatory Monitoring and Education Task Group provided an update on state regulatory and legislative initiatives affecting Workers’ compensation programs. Of note was the Florida exemption of pharmacies from EOBR requirements and several states updated fee schedules and their requirements for documentation of need for brand medications and opioid coverage.

• The Billing and State Reporting Task Group provided an update regarding states moving to adopt regulations for e-billing, standard paper billing and EDI reporting. The task group reported on the publication of their Reconsideration Survey, letters in response to proposed regulations in California and Texas. A letter to be sent to all states currently using the UCF recommending their adoption of the WC/PC UCF is underdevelopment. The next effort will be review of the new workers’ compensation specific CARC codes for potential use in pharmacy.

New Business:
• A presentation was given by Nanci Johnston, Medical Policy Analyst with the Oregon Workers’ Compensation Division on the state’s plans for adoption of electronic billing and use of D.0 and the NCPDP WC/PC UCF. Members were invited to participate in the discussions and planning meetings. Information regarding participation and scheduling of the meetings and the current proposals are available at www.wcd.oregon.gov.

Work Group 45 External Standards Assessment, Harmonization and Implementation Guidance

Old Business:
• Industry updates were provided for WEDI, ASC X12, and CAQH CORE.
• WG45 Scope and Goals as modified and approved by the Board were shared with the work group. Additional goals had been added to explicitly call out functions already part of the work group activity.

Task Groups:
• The Document Revision Task Group presented a new recommendation document “NCPDP Claim Paid but No Financial Transaction Reporting on the ASC X12/00010X221A1 Health Care Claim Payment/Advice (835)” to demonstrate the handling of paid claims which do not have an associated transfer of money because of contractual agreements. The document was approved. The task group also presented a new version of the CARC to NCPDP Reject Code Mapping document that had been revised to reflect the CARCs approved at the September Code Committee. None of the new CARC codes had been identified as required for pharmacy. The revised document was approved. Both documents will follow the inter-SDO process for DISA and ASC X12 approval and copyright.
• The 834/835 FAQ Task Group received no new questions, therefore did not meet.
• A DSMO Task Group received no new DSMO Change Requests. The task group will meet to review the ASC X12 changes to support the Health Plan Identifier (HPID).
• The Provider Enrollment Task Group is on hold pending the outcome of their ASC X12 Change Request. They will be meeting during the next quarter for further discussion of a request for long term care pharmacy related taxonomy codes.
• The Central Pay Task Group presented their recommendations related to the reporting of adjustments done without claim activity and reporting of negative balances when there is no claim activity. The first issue was felt to be fully covered by existing ASC X12 835 guidance. The later issue was resolved with the addition of three items to the Task Group Goal section of the Central Pay Business Model. The revised document was approved by the work group.

New Business:
• Margaret Weiker provided a presentation on the Health Plan Identifier and the steps taken by NCPDP and ASC X12 to address needed changes in their respective standards to accommodate its use in transactions.

MC Maintenance and Control
Ballots:
- Ballot WG010059 Telecom E.4 (DERF 001116) is valid at 70.04% of the consensus group voting and received a 75% approval rating. There were no comments. The ballot will be sent to NCPDP Board of Trustees for approval after a 30-day appeal period.
- Recirculation Ballot WG070010R Manufacturer Rebate Standard v07.00 (DERF 1096) is valid at 79.30% of the consensus group voting and received a 75% approval rating. New Negative and Objection comments were reviewed by the Work Group. The ballot will be sent to NCPDP Board of Trustees for approval after a 30-day appeal period.
- Ballot WG110057 SCRIPT/Specialized (DERF 001103, 001123, 001146, 001147) is valid at 70.48% of consensus group voting. The Work Group adjudicated the comments received as persuasive and editorial requiring modifications to the implementation guide. Should the submitters of the comments change their vote to approve or abstain, the ballot will not require recirculation and will proceed to the Board of Trustees for approval after the required appeal period.

DERFs/ECLs:
23 new and pended DERFs/ECLs were reviewed (see WG1, WG2, WG3, WG9, and WG11 above). The DERFs approved at this meeting will result in four ballots for the November 2013 ballot period:
- WG010060 for Telecommunication
- WG010061 for Audit
- WG110058 for SCRIPT, XML, and Prescription Transfer
- MC000006 for Telecommunication, Audit, Health Care ID Card, Post Adjudication, Prescription Transfer, Uniform Healthcare Payer Data, and XML Standards. In addition, the Batch, Formulary and Benefit, Medicaid Subrogation, Retiree Drug Subsidy, Financial Information Reporting and Prior Authorization Transfer Standards are impacted and will be updated for versioning on their next ballot.

Old Business:
- Updates given:
  - HIPAA
  - NCPDP Legislative/Regulatory Activities
  - GS1
  - Modeling and Methodology
  - Status of MC Scope and Goals

Task Groups:
- The Education/Legislation and Regulations Task Group received no new legislation to review and did not meet.
- The Ordering of Diabetic Supplies Standard Task Group has scheduled a call for November 14th.
- The NDC Depletion Task Group
  - Held a preliminary call with FDA Office of Compliance staff to begin discussion on concerns and suggestions for future solutions.
  - Will begin working on a white paper of best practices for use of product identifiers and how to address changes after the approval of the Product Identification Standard.
- The PDMP White Paper Task Group has finalized the PDMP White Paper which has been forwarded to the Office of the National Coordinator (ONC). The S&I Framework will begin having calls for the PDMP & Health IT Integration Initiative on November 14, 2013. To participate in the PDMP & Health IT Integration Initiative you can “join the initiative” by completing the form on the PDMP & Health IT Integration Initiative Join wiki page.

New Business:
- The attendees received daily Work Group recaps.
- DSMO Change Request 1189 was reviewed with a recommendation to approve with the modification that version 2013101 of the SCRIPT Standard for ePA be adopted.