February 2014 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

Balloons:
- Ballot WG010060 (DERF (Telecom) 001151, 001155, 001168, 001171) Telecom E5 is considered a Valid Ballot having received the required 60% of Consensus Group votes. See Letter Ballot Comment spreadsheet for the ballot results. The comment was categorized as persuasive and editorial with the corrections made. The ballot will be sent to NCPDP Board of Trustees for approval after a 30-day appeal period.
- Ballot WG010061 (DERF 001166 (Audit 30)) was valid at 60% of the consensus group voting. See Letter Ballot Comment spreadsheet for the ballot results. The comment was categorized as not persuasive by the submitter. The ballot will be sent to NCPDP Board of Trustees for approval after a 30-day appeal period.

DERFs/ECLs Reviewed:
- DERF 001153/ECL 000148 was pended to WG1 Coordination of Benefits Task Group at November Work Group. The DERF/ECL was recommended to be pended to MC as the task group has not concluded discussion.
- DERF 001172/ECL 000152 was recommended to be pended to MC for the WG1 Compound Billing Solutions Task Group to discuss enhancements.
- DERF 001186/ECL 000154 was recommended to be approved with modifications to MC.
- DERF 001188 was pended for the WG1 Benefit Integration Task Group to continue work on the standard.

Old Business:
- **NCPDP SNIP Committee** has been reviewing initial guidance for the National Health Plan Identifier. They are working on HPID questions and the testimony to NCVHS. A HIPAA Standards, Operating Rules, and regulations (HPID/ICD/NPI/EFT/ERA) update was given.
- Use of Quantity Prescribed (460-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 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 was planned for January 1, 2014 – Notifications to industry, in Telecom D.0 Imp Guide, in Version D Editorial**
      - This date is ON HOLD. OESS is working through options, but believes that a NPRM and final rule will have to be used.

Task Groups:
- The **Telecommunication FAQ Task Group** discussed questions submitted and brought forward the task group recommendations to the Version D Editorial for questions received. They gave reportables of D-One-Hundred-Five (Grace Period), D-One-Hundred-Twelve (Compound Identification) and D-One-Hundred-Fifteen (Hyphenated...
Names). Question D-One-Hundred-Eleven ($0 claims) and D-One-Hundred-Thirteen (Version D Editorial effective date) were approved for the Version D Editorial document. Updates to the 4Rx White Paper were approved.

- The Coordination of Benefits Task Group discussed questions submitted. They will work on pended DERF 001153/ECL 000148 (Adjudicated Payment Type).
- The Financial Information Reporting Task Group worked on Post ATBT questions and continued working on FAQs for their document.
- Information Reporting Problems Task Group is working on a qualified Nx white paper and process. They submitted DERF 001186/ECL 000154 for new Reject Codes. Contracted Business Associate Access to MARx has been given by CMS. They will work with WG1 COB Task Group on Question 39.
- The Post Adjudication Task Group is discussing a file layout for Transition Fill Claims Transfers.
- The Audit Task Group is monitoring the Ballot WG010061. They are reviewing the NPRM for audit points to share with WG9.
- The 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.
- The Definition of a Valid Prescriber Task Group is working on responses to the 2015 Medicare D NPRM. The task group is building a white paper of recommendations and gaps.
- Supplemental Payer Reporting Task Group did not meet this quarter.
- Eligibility Verification Enhancements Task Group reported on the survey for the industry on the next HIPAA version. They will begin working on a project plan for a HIPAA demonstration project request. They are monitoring Ballot WG010060.
- The Transaction ID Task Group is examining the use of a unique transaction identifier for all Telecom transactions. They are working through scenarios of best practices for Reversals.
- Vaccine Services Task Group brought forward recommendations for the Version D Editorial for pharmacy benefit billing for products, services, and products and services.
- Benefit Integration Task Group is reviewing requirements for a standard for plans to share information on deductible, copay and Out of Pocket (OOP) to correctly maintain the Maximum out of pockets as described in the ACA. They submitted DERF 001188 for industry awareness and participation.

Work Group 2 Product Identification

Task Groups:

- The Structure 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.
- 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 five new QUIC forms.
  - A Checklist of Impacts by Billing Unit Changes was initiated and a draft completed for review by the WG2 attendees at this meeting.
  - A subgroup of the task group completed work on the BUS Webinar which was successfully presented on 12/5/13.
The NCPDP Product Identification Standard Task Group completed the draft of the NCPDP Product Identification Standard that is on the WG2 page for review and comment.

The SPL REMS Requirements Task Group is gathering 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. NCPDP’s detailed written comments to the FDA docket on Standardizing and Evaluating REMS Strategies were submitted. Subsequent to the July 2013 Public Hearing and receipt of written comments by FDA, the CDER’s REMS standardization activities under the REMS Integration Initiative has compiled internal and external feedback and developed a set of data requirements. These data requirements currently are being addressed by the Data Standards group to create a draft SPL REMS schema. Once the draft schema has been developed, comments from NCPDP and other stakeholders will be solicited.

The Dates Associated with Pharmaceutical Products Task Group is investigating 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 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 Janet Woodcock, M.D., Director 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:
  - #201401 Syrspend SF Alka Powder and Syrspend SF Powder NDCs 51552-1139-09; 51552-1201-09; 51552-1201-02; 51552-1139-02; 51552-1201-05; 51552-1139-05; 51552-1123-01; 51552-1274-02 – BU=gm per Section 5.4.1 of the BUS for the Syrspend SF Powder products. For the Syrspend SF Alka and Powder Products labeled in “..gm (to make..ml)”, the BU=gm for consistency with the other core 9’s listed in “gm”. Also add an update (5.4.1) to the Billing Unit Standard to include other types of products besides those named. Those compendia needing to change BU will make the SyrSpend changes for the end of Q1 (around 4-1-14).
  - #201405 Syrspend SF Liquid NDCs 51552-1079-05, 51552-1079-08; 51552-1123-05; 51552-1123-06; 51552-1123-08; 51552-1167-05; 51552-1167-08 (this may not be a comprehensive list of NDCs) – (See QUIC #201401 – Syrspend SF Alka Powder and Syrspend SF Powder) - BU=mL per Section 5.5.2 of the Billing Unit Standard for the Syrspend Liquid products, labeled in ml.
  - #201402 Crinone (progesterone) gel NDC 52544-0284-12 – BU=1.125 gm per applicator per FAQ 7.34 of the Billing Unit Standard.
Marketed Products to be listed as 1.125gm per applicator:

<table>
<thead>
<tr>
<th>Product Description</th>
<th>NDC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Crinone 4% Vaginal Gel</td>
<td>52544-0283-24</td>
</tr>
<tr>
<td>Crinone 4% Vaginal Gel -- NEW</td>
<td>52544-0255-24</td>
</tr>
<tr>
<td>Crinone 8% Vaginal Gel</td>
<td>52544-0284-12</td>
</tr>
<tr>
<td>Crinone 8% Vaginal Gel -- NEW</td>
<td>52544-0256-12</td>
</tr>
</tbody>
</table>

Note: The NCPDP BUS was applied to the newest NDCs for this product but the old NDCs were left as is to avoid disruption to the industry.

- **#201403 Copaxone 40mg NDC 68546-0325-12** – BU=one mL per syringe (package size of 12) per section 5.2.2 of the Billing Unit Standard.
- **#201404 Copaxone 20mg NDC 68546-0325-12** – change the BU from one each kit to BU=one mL per syringe (package size of 30) per section 5.2.2 of the Billing Unit Standard. Changes by the compendia will be made at the beginning of the 4th quarter, October 1, 2014. Dates will be inserted into the Billing Unit Change Template for this product on the next Product Review and BU Exceptions TG call. An NCPDP NOW will be sent soon and multiple times prior to October 1, 2014.

Work Group 3 Standard Identifiers

Old Business:
- WG45 Provider Enrollment Task Group Update – The task group reviewed the required pharmacy data elements for provider enrollment and mapped them to the ASC X12 274. NCPDP submitted a change request (CR1267) to ASC X12 regarding the addition or modified definition of fields to the ASC X12 275 Provider Enrollment transaction to meet the identified pharmacy data requirements. ASC X12 is now recommending a different standard for Provider Enrollment and the task group will need to repeat the mapping process to the recommended ASC X12 standard.

Task Groups:
- The Pharmacy and/or Combination ID Card Task Group will meet during the next quarter to review draft language for the implementation guide regarding the use of keychain cards as identification for the discount card program. The task group will submit a DERF for the May Work Group meeting requesting this revision to the implementation guide. The task group will also discuss the versioning application of NCPDP standards by the removal of the references to release-level changes and the elimination of the decimal point usage within applicable NCPDP standards.
- The Pharmacy ID Card Operating Rules Task Group did not meet this quarter.
- The Health Plan Identifier (HPID) Task Group did not meet this quarter pending the outcome of Ballot MC000006 which requested changes to existing fields and implementation guide modifications within various NCPDP standards to accommodate the mandated use of the Health Plan Identifier.

Work Group 7 Manufacturer and Associated Trading Partner Transaction Standards

Old Business:
- Regulatory/Industry Changes Impacting WG7:
  - Accountable Care Organizations - In the Manufacturer Rebate Standard is there a field (qualifier) to identify an Accountable Care Organization? It is not called out explicitly. The Rebate Standard Task Group will discuss further.
  - On November 27, 2013, H.R. 3204, the “Drug Quality and Security Act,” was signed into law. This bill establishes authority for FDA to develop a national track-and-trace system to secure the pharmaceutical supply chain and minimize opportunities for contamination, adulteration, diversion, or counterfeiting.

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 was disbanded as the white paper is published and their work is complete.

The Rebate Standard Update Task Group is working on challenges identified with the implementation of version 07.00 of the Rebate Standard. The task group met in San Antonio and future calls will be scheduled to continue work towards a solution.

The Regulatory Tracking/Pedigree Task Group did not meet this quarter. H.R. 3204 the "Drug Quality and Security Act," was signed into law. The task group is seeking information on how to participate in the development of the guidelines currently being drafted on the pedigree track and trace side.

The Formulary Management Survey Task Group met this quarter to review the draft survey for manufacturers and payers. The survey will be tested with several manufacturers and input will be used to enhance the survey prior to release.

Work Group 9 Government Programs
DERF/ECL Reviewed:

- DERF 001173/Emergency ECL 000153 was recommended to be approved by MC with modifications.
- DERF 001187/ECL 000155 was recommended to be denied by MC.

Task Groups:

- The Prescription Monitoring Program (PMP) Task Group presented updated information for states that have prescription drug monitoring programs.
- The 340B Task Group did not meet this quarter. The DERF passed in November 2013 requesting a new optional data element for identification of Health Resources and Services Administration Office of Pharmacy Affairs identification codes for 340B prescriptions is in the ballot process and comments will be reviewed in WG11 ePrescribing and Related Transactions.
- 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 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 reviewed updated CMS guidance provided on December 23, 2013. The white paper “NCPDP Recommendations for a Standardized Process to Share Medicare Part D Opioid Overutilization Data Between Sponsors” and the Standardized Overutilization Data Sharing template are being modified based on the new guidance.
  - The CMS Part D NPRM Sub Task Group is meeting to review and comment on CMS-4159-P, “Medicare Program; Contract Year 2015 Policy and Technical Changes to the Medicare Advantage and the Medicare Prescription Drug Benefit Programs.” Comments are due March 7, 2014.
- 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 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. CMS provided feedback on the extent of COB required. Plan interpretation is much broader than CMS intent. Additionally, only data elements available on a COB claim should be provided in reconciliation.

- The **Hospice Task Group** was formed 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 both point of sale and retrospectively. On December 6, 2013 CMS issued memo entitled, “Part D Payment for Drugs for Beneficiaries Enrolled in Hospice—Request for Comments.” The task group prepared and submitted comments to CMS.

**New Business:**
- **Government Programs and Industry Changes:**
  - Due to time constraints the CMS Medicaid Update was presented on Thursday, February 6, 2014 during the CMS hour.
  - Due to time constraints the WG9 Legislative Briefing was incorporated with the presentation for Maintenance and Control.

**Work Group 10 Professional Pharmacy Services**

**Old Business:**
- The **mL white paper** “NCPDP Recommendations and Guidance for Standardizing the Dosing Designations on Prescription Container Labels of Oral Liquid Medications” was approved to move forward for publication
- The MTM guidance document “Recommendations for Use of the HL7 Consolidated CDA Templates for Pharmacy” was approved to move forward for publication.

**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 initiating a paper that enumerates best practice guidelines, acetaminophen awareness, tools and technology solutions in a hospital model.
- The **Specialty and Compounding Pharmacy Service Task Group** has been divided into three groups: one in WG11 one in WG7 and one in WG1. A brief update of the WG11 task group activities was provided. There was no other update.
- The **mL White Paper Task Group** has completed the white paper. It was presented it to the work group and approved to go forward for publication.
- 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. A request was made for participation by pharmacy and practice management software and database vendors.

**Work Group 11 ePrescribing & Related Transactions**

**Ballots:**
- Recirculation Ballot WG110057R for SCRIPT, Specialized (DERF 001123, 001146 and 001147) is considered a Valid Ballot having received the required 60%+ of Consensus Group votes and 75%+ approval rating. New Affirmative and Accept comments were received. New votes and comments received on a re-circulation ballot are not categorized. See Letter Ballot Comment spreadsheet for the ballot results. The ballot will be sent to NCPDP Board of Trustees for approval after a 30-day appeal period.
- Ballot WG110058 for SCRIPT (DERF 001157, 001158, 001159) is considered a Valid Ballot having received 60% of Consensus Group votes. The Work Group adjudicated the comments received. One comment was voted as persuasive and editorial, so modifications will be made. Two comments were voted as not persuasive. If the submitters agree to change their comment 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 comment to approve or abstain as appropriate, the ballot will be recirculated.

DERFs/ECLs Reviewed:

- DERF 001161 was pended to the Electronic Prescribing Best Practices Task Group at the November Work Group. The DERF was approved with modifications.
- DERF 001162 was pended to the Prescription Delivery Task Group at the November Work Group. The DERF was withdrawn by the submitter.
- DERF 001163 was pended to the Prescription Delivery Task Group at the November Work Group. The DERF was approved with modifications.
- DERF 001169 was pended to WG11 Prior Authorization Workflow to Transactions Task Group at the November Work Group. The DERF was pended for more review by the task group and inclusion of long term care pharmacy initiated prior authorizations.
- DERF 001174 was approved with modifications.
- DERF 001175 was pended for more review by the WG11 Formulary and Benefit Task Group.
- DERF 001176 was pended to the Electronic Prescribing Best Practices Task Group.
- DERF 001177 was approved.
- DERF 001178 was pended for more work by the MC Diabetes Task Group and the WG11 XML Task Group.
- DERF 001179 was pended for more work by the MC Diabetes Task Group and the WG11 XML Task Group.
- DERF 001180 was pended for more work by the MC Diabetes Task Group and the WG11 XML Task Group.
- DERF 001181 was pended for more work by the MC Diabetes Task Group and the WG11 XML Task Group.
- DERF 001182 was pended for more work by the MC Diabetes Task Group and the WG11 XML Task Group.
- DERF 001183 was pended for more work by the MC Diabetes Task Group and the WG11 XML Task Group.
- DERF 001184 was pended for more work by the MC Diabetes Task Group and the WG11 XML Task Group.
- DERF 001185 was pended for more work by the MC Diabetes Task Group and the WG11 XML Task Group.
- DERF 001189 was approved.

Old Business:

- An industry update was provided on NCVHS Subcommittee on Standards, CMS (eprescribing), and DEA eprescribing for controlled substances and implementation activities.

Task Groups:

- The Formulary and Benefit Task Group submitted DERF 001174, 001175, and 001189.
- XML Task Group reviewed submitted DERFs. They will discuss support for extensions in schemas when information is brought forward.
- NCPDP/HL7 Pharmacist Functional Profile Task Group did not meet this quarter.
- WG11 Electronic Prescribing Best Practices Task Group worked on pended DERF 001161 (Veterinarian), submitted DERF 001176 (WrittenDate/EffectiveDate), and provided recommendations for the SCRIPT Implementation Recommendations document on additional guidance for the use of Days Supply, Date Written and Effective Date, and the Observation Segment.
- An update was given from the WG14 LTPAC ePrescribing Task Group. The group focused its efforts on capturing industry conventions for use of SCRIPT 10.6 in long-term and post-acute care settings, for use by facility vendors and pharmacies that are migrating HL7 interfaces to the SCRIPT Standard (to meet the Medicare ePrescribing standards).
• **REMS and ePrescribing Task Group** has refined their use cases between prescriber, pharmacy, REMS Administrator, and switch/intermediary for safe use programs including the data elements needed. They are working through flows from basic REMS to complex REMS exchanges. 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** is monitoring Ballot WG110058. They will bring forward updates to the white paper for the Fill Status Notification transactions based on the ballot.

• The **Electronic Prior Authorization Workflow to Transactions Task Group** met to discuss pended DERF 001169. DSMO Change Request 1189 (to request the SCRIPT Standard version 2013101 ePA transactions only (not all SCRIPT transactions) be named in HIPAA for prior authorization of medications and supplies under the pharmacy benefit) was approved and a recommendation letter was sent to NCVHS by the DSMO.

• The **WG11/2 Joint Drug Description Task Group** continued work on a project with NLM for creating processes for supporting RxNorm eprescribing names. They are working through programmable rules for injectable names.

• The **Pharmacy to Pharmacy Prescription Transfer Task Group** is monitoring Ballot WG110058.

• The **Meaningful Use and NIST Test Methods for ePrescribing Task Group** has begun discussing testing for RxChange, structured Sig, and other transactions.

• The **Electronic Signature Guidance Task Group** has completed 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 have collected top used sigs and are creating examples of those sigs.

• The **Specialty Requirements for ePrescribing Task Group** has met and begun discussing their focus and goals.

• The **Prescription Delivery Task Group** discussed 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.

Task Group Reports:

• The **ePrescribing Task Group** reported they are preparing guidance on the use of SCRIPT transactions in LTC focusing on the transition from HL7 messaging to SCRIPT based on the LTC exemption for ePrescribing being lifted in November of 2014. An update was given on the LTC pilot/demonstration project for three way communication which includes prescriber, facility and pharmacy.

• The **LTPAC Current Billing Issues Task Group** report on their activities during the last quarter including discussion of the ICD-10 transition, a pharmacy workflow which included the use of the ePA transactions and patient residence code values. In addition they prepared comments to the included in the NPRM for 2015 Medicare Part D changes affecting the LTPAC settings.

• Received updates 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:

• An IAIABC update was provided.

Task Group Reports:

• The **Legislative/Regulatory Monitoring and Education Task Group** provided an update on state regulatory and legislative initiatives affecting Workers’ compensation programs.
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 Reconsideration Survey with a resulting vote to pursue no development at this time. The task group reviewed and commented on a pre-publication draft of the North Carolina proposed “Electronic Billing and Payment Companion Guide”. A prototype letter to states currently using the UCF was created recommending their adoption of the WC/PC UCF. Customized letters have been approved for Alabama, Michigan, US OWPC and West Virginia. A letter to Oregon is now being finalized. The deferred effort to review the new workers’ compensation specific CARC codes for potential use in pharmacy is planned for completion prior to May.

New Business:
- A presentation was given by Matt Zurek, Executive Deputy Commissioner for Health Care Management & System Monitoring with the Texas Department of Insurance, Division of Workers’ Compensation on the outcomes to date from the Texas closed formulary. A significant shift in provider prescribing patterns has been noted along with reductions in cost without apparent patient harm or interruptions of care.

Work Group 45 External Standards Assessment, Harmonization and Implementation Guidance

Old Business:
- Industry updates were provided for WEDI, ASC X12, and CAQH CORE.

Task Groups:
- The Document Revision Task Group met to review CARC requests prior to the January Code Committee meeting. They also met to begin work on X12 Request for Pharmacy Industry Survey involving provider initiated payments to payers.
- 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 met to review the ASC X12 changes to support the Health Plan Identifier (HPID) and provided input to the WG3 public comment response.
- The Provider Enrollment Task Group met for further discussion of a request for long term care pharmacy related taxonomy codes. At the January X12 meeting a decision was made to move from the 274 to the 838 Standard for provider enrollment. The task group will need to review the new standard to determine the impact on its prior data maintenance request and the need for additional taxonomy codes.
- The Central Pay Task Group completed its work prior to the last work group meeting but the revised document has not completed the Inter SDO approval process. Once approved the task group will disband.

MC Maintenance and Control

Ballots:
- Ballot WG010060 (DERF (Telecom) 001151, 001155, 001168, 001171) Telecom E5 is considered a Valid Ballot having received the required 60% of Consensus Group votes. See Letter Ballot Comment spreadsheet for the ballot results. The comment was categorized as persuasive and editorial with the corrections made. The ballot will be sent to NCPDP Board of Trustees for approval after a 30-day appeal period.
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Ballot MC000006 for multiple Implementation Guides (see list below) (DERF 001154, 001167) is considered a Valid Ballot having received 60% of the Consensus Group votes. See Letter Ballot Comment spreadsheet for the ballot results. The Work Group adjudicated the comments received. The Affirmative comments were categorized as persuasive and editorial and not persuasive. The editorial comments will be added to the ballot which be sent to NCPDP Board of Trustees for approval after a 30-day appeal period. Implementation Guides included in this ballot are:

- Telecom, Uniform Payer Data, Post Adjudication, Audit, Prescription Transfer, Health Care Identification Card, Medical Rebate Data Submission, Manufacturer Rebate, SCRIPT and Specialized

Implementation Guides to be updated for DERF 001167 the next time they are balloted include:


DERFs/ECLs
23 new and pended DERFs/ECLs were reviewed (see WG1, and WG11 above). The DERFs approved at this meeting will result in:

- One ballot for the February 2014 ballot period
  - WG110059 for SCRIPT

Old Business:

- Updates given:
  - HIPAA
  - NCPDP Legislative/Regulatory Activities
  - GS1

Task Groups:

- The Education/Legislation and Regulations Task Group prepared comments for the Health Plan Certification NPRM.

- The Ordering of Diabetic Supplies Standard Task Group submitted several DERFs. The DERFs were pended allowing the task group to work with the appropriate task groups out of WG11 ePrescribing and Related Transactions for a solution.

- 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. They will begin work 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 reported on the activities of the S&I Framework PDMP group. The S&I Framework have weekly calls for the PDMP & Health IT Integration Initiative. They are going through the process of creating use cases for the access of PDMP data for prescribers and pharmacies. 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.

- The UDI Task Group was created to incorporate the Unique Device Identifier (UDI) into the NCPDP Standards.
There was a discussion on the timing of posting final documentation for new and pended DERFs to the NCPDP website to ensure members have time to review prior to Work Group meetings. It was decided that all documentation must be posted a minimum of two weeks prior to the Work Group meetings. Any changes identified after that date must be presented at the Work Group meeting.