May 2016 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.

Work Group 1 Telecommunication

Ballot Adjudication:

- **Ballot WG010068** for the Telecommunication Standard Implementation Guide is considered a valid ballot having received the required 60%+ of Consensus Group votes and 75%+ approval rating. Two affirmative with comments were received. WG1 reviewed and adjudicated the comments. One ballot was categorized as not persuasive and the other as persuasive and editorial (causing a minor correction to the implementation guide). See Letter Ballot Comment spreadsheet for the ballot results. While ballot WG010068 was approved and is valid, it must be held pending the outcome of the recirculation of Ballot WG110069 since both ballots contained modifications to the name and field format for Formulary ID (926-FF). These changes will be made to this field for the Telecommunication Standard once the Ballot WG110069R for the Formulary and Benefit Standard either passes or fails but not before then.

- **Ballot WG010069** for the Post Adjudication Standard Implementation Guide is considered a valid ballot having received the required 60%+ of Consensus Group votes and 75%+ approval rating. One affirmative with comment was received. WG1 reviewed and adjudicated the comment as not persuasive. 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 WG010070** for the Audit Transaction Standard Implementation Guide is considered a valid ballot having received the required 60%+ of Consensus Group votes and 75%+ approval rating. One affirmative with comment was received. WG1 reviewed and adjudicated the comment as not persuasive. 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 WG010071** for the Prior Authorization Transfer Standard Implementation Guide is considered a valid ballot having received the required 60%+ of Consensus Group votes and 75%+ approval rating. 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.

DERFs/ECLs Reviewed:

- DERF 001342 was approved as modified.
- DERF 001343 was approved as modified.
- DERF 001344 was approved as modified.
- DERF 001345 was approved as modified.
- DERF 001346 was pended.
- DERF 001347/ECL 000199 was pended.
- DERF 001348 was approved as modified.
- DERF 001349 was approved as modified.
- DERF 001350 was approved as modified.
- DERF 001351 was approved as modified.
- DERF 001352 was approved as modified.
- DERF 001353 was approved as modified.
- DERF 001356 was withdrawn.
- DERF 001357 was approved as modified.
- DERF 001358 was pended.
• DERF 001359/ECL 000200 was pended.
• DERF 001360 was withdrawn.
• DERF 001375 was pended.
• DERF 001376 was approved.
• DERF 001377 was approved as modified.
• DERF 001378 was pended.
• DERF 001379 was denied.
• DERF 001380 was pended.

Old Business:
• 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.
  o Telecommunication Standard vD.0 and all versions from that point have been updated (November 2012).
  o 03/2014 NCPDP received a response from HHS to the 03/2013 letter. The change will go through NPRM and Final Rule process.
    ▪ We have asked the industry to have input on the implementation timeframe before the NPRM is published.
    ▪ We have asked for a timeframe of NPRM publication.
  o 06/2014 Update: OESS has responded that an NPRM including Quantity Prescribed and SCRIPT electronic prior authorization is going through the review process.
  o WG1 Telecommunication FAQ Task Group brought forward a recommendation timeframe for Quantity Prescribed regulation implementation for OESS.
  o 07/21/2015 Update from NSG: Our new target for this regulation is early 2016.
  o 01/21/2016 Update from NSG: This policy item is undergoing the rulemaking process, and at this time we are unable to give you a specific timeframe.
  o 04/11/2016 Update from NSG: The request is still in the rule making stage, so at this point I can’t provide a formal comment on its status.

Task Groups:
• The Telecommunication FAQ Task Group finalized two questions with recommendations. Two DERFs and one staff recommendation were created and reviewed. Four questions are not finalized. There were five reportable items this quarter. The one request to add an FAQ to the Editorial Document was approved.
• The Coordination of Benefits Task Group finalized two questions with recommendations. The group completed a review and changes to DERFs 001342 – 001353 for the COB modifications.
• The Information Reporting Problems Task Group is reviewing and updating the COB White Paper. The group updated the SPAP ADAP BIN PCN spreadsheet and Reference Guide. The SPAP ADAP Data Exchange White Paper was completed and submitted to CMS for review. The group also completed the Nx to Bx matching hierarchy, the review of reject codes applicable to the Nx transaction processes, and the B1/B2/B3 to N1/N2/N3 process flows. The Best Practice Guide for Managing Medicare OHI for Prescription Drug Plans is close to being finalized. They have begun discussions to develop a tracking document for SPAP/ADAP issues at the State level in order to raise industry awareness around high level issues and identify potential resolutions or ways to mitigate risks.
• The Post Adjudication Task Group did not meet this quarter.
• The Definition of a Valid Prescriber Task Group reviewed the change in CMS 4159/IFC 6107 Enforcement Date, change to PDE Guidance, and Enrollment Records with retroactive effective
Questions regarding Provisional Fill Period and late claims, revisions to FAQ/Reject Code Matrix for CMS 4157 and use of SCC 42 for NPI Not Found were addressed. The group also discussed other pending concerns with CMS 4159 and IFC 6107. The revisions to the FAQ/Reject Code Matrix for CMS 4157 were approved for publication in the Editorial Document.

- The **Part D Supplemental Payment Reporting Task Group** continues to work on a reject code guide applicable to Medicare Part D Nx transactions and will develop a FAQ Document. In addition, the task group is coordinating with the WG1 Information Reporting Nx Matching Sub-Task Group to determine which fields are critical for primary matching and secondary matching. Based on the results, the task group will identify the appropriate reject codes for those fields; all other reject codes that are not appropriate will be identified.

- The **Eligibility Verification Enhancements Task Group** reviewed the Medicare Part D E1 response business requirements for plan type information. The group is considering either building a new segment or modifying an existing segment.

- The **Benefit Integration Task Group** continues work on the Single Book of Records and the creation of XML for Dual Book and Single Book of Records. The group plans to present the proposed changes the week of June 20th and to submit a DERF for the August 2016 meeting to update the Standard with the inclusion of an XML format and the Single Book of Records process.

- The **Standardized Subrogation Task Group** completed the work on the new Subrogation Standard Implementation Guide and identified the necessary modification to the Telecommunication Standard Implementation Guide. The DERF was submitted for review at the May WG meeting.

- The **Usage of Submission Clarification Codes Task Group** has addressed a question regarding the auto-population of the Submission Clarification Code. The group is reviewing all SCC and determining if the codes are used proactively, reactively or both. The group is also considering removal of some codes and creating specific fields in a future version of the Telecommunication Standard. The group is monitoring the WG14 activity to remove short cycle SCC and creating new field(s). Limiting the number of SCC iterations to correspond with the maximum number of reject codes is being considered.

- The **Compound Task Group** reviewed the three pended DERFs which introduced changes to the Telecommunication Standard enabling compounding pharmacies to more adequately and uniformly report the level of complexity in the preparation of the prescription than previously done. The group modified two of the DERFs and the third DERF was withdrawn.

- An **Attachments Task Group** was formed during this workgroup meeting.

### Work Group 2 Product Identification

**Task Groups:**

- The **Structured Product Labeling Activities Task Group** tracks the activities of the SPL and offers suggestions to improve access and usability of the FDA Structured Product Label and Electronic Drug Listings. The task group has sent 20 letters to the FDA. Task Group Leads reached out to FDA on two items:
  - The graphical versus the textual representation of data within the SPL. NCPDP asked that FDA capture the actual data elements and not the graphs whenever possible. The FDA would like a standard from NCPDP that recognizes the correlation between the raw data and the graph that represents the data.
The need for the SPL processes to be in lock-step. There is a disconnect between the timing of data being reported out of the SPL to the FDA CDER website and the DailyMed website. The FDA recommended that NCPDP request a date and time stamp be used for information that is changed in the SPL.

The Drug Compendia group submits the monthly NSDE file to the FDA containing the NCPDP Billing Units by NDC for inclusion in the SPL and continues to review billing unit exceptions and provide monthly validation information to the FDA. For February and March 2016, 1,298 new billing unit indexing files were generated by FDA based on the files received by the compendia and the compendia group is working on reconciling 98 NDCs.

There is an issue on the SPL and DailyMed regarding kits that are using a product in the kit that has a valid NDA approval and showing up on DailyMed as FDA approved. The FDA is aware of this issue and is working on a validation procedure that will be completed by the end of the year.

- 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. The task group:
  - Reviewed products listed as EACH because they have a quantity of less than 1 to see if there should be a change to the standard (based on the QUIC #201511 Nascobal discussion). Claim data on these products is being compiled and once available, discussion and review will continue.
  - Reviewed two products to determine the billing unit and package size.
  - Reviewed and submitted to WG2 for adjudication two QUIC forms: (see final adjudication determination by the WG in this report).
    - QUIC #201603 Dronabinol Oral Solution 4.25 mg/0.85 ml
    - QUIC #201604 ZS-9 Product by ZS Pharma, Inc.

- 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 (SPL) system. An update on the FDA REMS SPL pilot project was provided. The goal is to wrap up the pilot by the end of May and to start accepting REMS SPL submissions this summer. The FDA has requested all interested parties to review and comment on a draft implementation guide and related materials published on the SPL website. Comments can be submitted directly to the FDA at REMS_Standardization@fda.hhs.gov, or to the docket.

- The **Dates Associated with Pharmaceutical Products Task Group** investigates definition inconsistencies, involves government agencies to make them aware of the issues, and provides education on the importance via a white paper or other means. The task group reviewed the status of this white paper and some grids on the industry process flow. They also continued follow-up on the NSDE file termination date project. At this point the group plans to re-confirm the definitions with the Data Compendia and the way the grid will be used in this paper.

- The **Naming Standards for Drugs, Biologics and Biosimilars Task Group** reported the FDA has issued a guidance document on the Labeling for Biosimilar Products with a comment period until June 3rd. The task group plans to comment on the naming scheme outlined in the document. It was also reported that USP has been involved with the naming debate and now the FDA is proposing USP no longer have any authority over biologics. USP has reached out to
various stakeholders including NCPDP. FDA approved a second biosimilar with a unique non-
proprietary name and a random four-letter code.

- **Application of the Billing Unit Standard Clarification Task Group** did not meet this quarter.
- The **503B Guidance Task Group** researches how 503B products will be identified within the NCPDP standards. They will determine if there are applicable identifiers in the current NCPDP standards and if not, recommend an identification method for 503B products. Since 503B Outsource Facilities are registered with the FDA and assigned a labeler code, the task group felt an additional unique product identifier code is not required. They agreed to a “wait and see” approach and to revisit the topic once or twice a year as regulations regarding 503B products evolve.
- The **Product Service Identifier Expansion Task Group** evaluates Product/Service ID (PSID) field length to determine the appropriate potential expansion size to accommodate existing and new codes for current and future eHealth Care transactions. The task group reviewed the goal of the group and agreed to a scope. A spreadsheet has been compiled which lists all of the PSID related fields and what standards use them and includes analysis done a couple of years ago on the language in the standards.
- **WG9/WG2 Unbreakable Packages Task Group** did not meet this quarter.
- An update on the **WG2/WG11 Harmonization of Prescribing and Dispensing Units Task Group** was provided. See WG11 meeting minutes.

**New Business:**

- **QUIC Form Review:**
  - QUIC #201603 Dronabinol Oral Solution 4.25 mg/0.85 ml
    BU= mL with a quantity of 30 per section 5.5.1 of the BUS
  - QUIC #201604 ZS-9 Product by ZS Pharma, Inc.
    BU = each with a quantity of 30 per Section 5.1.8 of the BUS
  - QUIC #201605 Clindesse by Perrigo Pharmaceuticals NDC 45802-0042-01 and QUIC
    #201606 Gynazole-1 by Perrigo Pharmaceuticals NDC 45802-0396-01

  It was recommended that the discussion be tabled and the QUIC form be added to the agenda for the next Product Review and Billing Unit Exception Task Group meeting on May 17th. The QUIC form was submitted right before Work Group and the Task Group did not have an opportunity to review and research.

**Work Group 7 Manufacturer and Associated Trading Partner Transaction Standards**

**Task Groups:**

- The **Medical Rebate Standard Task Group** continues to review the Medical Rebate Standard and compare to the Manufacturer Rebate Standard to determine if modifications are needed.
- The **Medicaid Drug Rebate Program Task Group** collected details regarding the rebate process flows specific to numerous State Medicaid programs and discussed the types of issues manufacturers often dispute based on their review of the claim level data. This information will be used to develop educational material.
- The **Rebate Standard Update Task Group** developed an outreach approach to encourage participation in the task group. The Task Group is currently identifying the scope for a Formulary and Benefit Proof of Concept (Pilot).
  - Specialty Pharmacy Data Exchange Sub-Task Group continued work on a draft file format (beginning with a Dispense Report Use Case) in an effort to standardize the data
submitted by Specialty Pharmacy to drug manufacturers and others to support programs and agreements between the parties.

- **Rebate Reference Guide Sub-Task Group** did not meet this quarter.
- The **Regulatory Tracking/Pedigree Task Group** did not meet this quarter.
- The **Formulary Management Survey Task Group** reviewed the information obtained from the Formulary Management Survey and will draft a summary report during the next quarter.

**New Business:**

- Review of value definitions in Appendix B and Appendix O of the External Code List. WG7 approved the synchronization of the value definitions in Appendix B and Appendix O.
- **WG9 Medicare/Medicaid Claim Billing Issues Task Group** – the Medicaid Drug Rebate Program Task Group will collaborate on issues that may overlap with this new task group.

### Work Group 9 Government Programs

#### DERFs/ECLs Reviewed:

- 001335/Emergency ECL 000197 – Withdrawn by submitter
- 001361/ECL 000201 – Withdrawn by submitter
- 001362 – Approved as modified

#### Task Groups:

- The **340B Task Group** reviewed a question from WG1 Telecommunication FAQ Task Group regarding Submission Clarification Code (420-DK) field value 20 and Basis of Cost Determination (423-DN) field value 08 and submitted a response to WG1 Telecommunication FAQ Task Group for review.
- The **Government Programs Encounter Reporting Standards Task Group** will conduct a survey of State Medicaid programs to identify uses of encounter data, as well as driving forces behind the use of one NCPDP reporting standard versus another.
- The **Health Insurance Exchange/Marketplace Task Group** did not meet this quarter.
- The **Hospice Task Group** did not meet this quarter.
- The **Medicaid Subrogation FAQ Task Group** did not meet as no new questions were received.
- The **Medicare Financial Information Reporting Task Group** addressed the manual audited-off process and worked with the MAPD Help Desk to develop instructions for plans requesting audited-off enrollment information. The task group also reviewed DERF 001376 which requests removal of Group Separator from several standards including Financial Information Reporting.
- The **Medicare Part D FAQ Task Group** finalized six questions and responses for review and approval.
- The **Medicare Prescription Drug Event (PDE) Task Group** reported on current questions under review, questions submitted to CMS and pending new questions.
- The **Medicare Standardized Fraud, Waste and Abuse Training Attestation Task Group** reviewed updated guidance from CMS which will require modifications to the attestation form developed by the task group and approved by WG9 in November 2015. The revised form will be presented to WG9 for approval in August.
- The **OIG Report OEI 05-12-00540 Task Group** submitted a number of recommended options to CMS related to the observations and conclusions in the OIG report. CMS had discussions with OIG regarding the options. At this time, CMS has asked the task group to focus on the option of using the new fields Adjudicated Program Type (DERF 001342) and Other Payer Adjudicated Program Type (DERF 001343). The task group is working on a use case and process flow for this option.
• The **Prescription Drug Monitoring Program (PDMP) Task Group** developed a PDMP Facilitator Requirements document for review and approval. Iowa, Missouri and New Hampshire have expressed interest in being pilot states in the PDMP facilitation process. The task group also provided PDMP updates for ten states.

• The **Supplemental Payer Part D Reconciliation Standardization Task Group** did not meet this quarter.

• The **Unbreakable Package Task Group** will resume meetings this quarter to determine next steps since no response was received from CMS regarding the definition of unbreakable package.

• WG9 received an update from the **WG1 Standardized Subrogation Task Group**. See WG1 Telecommunication minutes and DERF 001375.

**New Business:**

• The **Medicare/Medicaid Claim Billing Issues Task Group** was formed.

• NCPDP EDvocacy Update

---

**Work Group 10 Professional Pharmacy Services**

**Task Group Reports:**

• The **MTM Communications Task Group** continues to develop new functionality using the CCDA Release 2 Clinical Notes. Currently under development are the specifications for the Pharmacist Care Plan.

• The **Acetaminophen Best Practices Hospital Safety Sub-Task Group** has submitted the *NCPDP Recommendations for Dose Accumulation Monitoring in the Inpatient Setting: Acetaminophen Case Model* white paper for publication by NCPDP and in the American Journal of Health System Pharmacy.

• **WG11 Specialty Requirements for ePrescribing Task Group** is continuing identification of other elements and messaging needed to support specialty pharmacy, including electronic prescribing of compound medications.

• An update was provided on the current status of the United States Pharmacopeia (USP) Allergy Project.

**New Business:**

• Discussion on Dose Form was postponed until August as the requester was unavailable

• ONC Update presentation was provided by Tricia Lee Wilkins

• HHS and Federal Pharmacist’s Initiatives Update was provided by Rear Admiral Pamela Schweitzer

---

**Work Group 11 ePrescribing & Related Transactions**

**Ballot Adjudication:**

• **Ballot WG110067** for the SCRIPT Standard is considered a valid ballot having received the required 60%+ of Consensus Group votes. Three affirmative with comments were received. WG11 reviewed and adjudicated the comments on this ballot as not persuasive and persuasive and editorial (causing minor changes to the implementation guide). 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 WG110068** for the Prescription Transfer Standard is considered a valid ballot having received the required 60%+ of Consensus Group votes. One affirmative with comment was received. WG11 reviewed and adjudicated the comment on this ballot as not persuasive. 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 WG110069** for the Formulary and Benefit Standard is considered a valid ballot having received the required 60%+ of Consensus Group votes. Two affirmative with comment, one accept with comment, 24 negative with comment and eight object with comment were received. WG11 reviewed and adjudicated the comments on this ballot as not persuasive and persuasive and editorial (causing a minor change to the implementation guide). See Letter Ballot Comment spreadsheet for the ballot results. Due to unresolved negative comments, Ballot WG110069 will require recirculation.

DERFs/ECLs Reviewed:
- DERF 001365 was approved with modifications.
- DERF 001367 was withdrawn.
- DERF 001373 was approved with modifications.
- DERF 001374 was pended.
- DERF 001381 was approved with modifications.
- DERF 001382 was approved.
- DERF 001383/ECL 00204 was recommended to be approved at MC.
- DERF 001384 was approved.
- DERF 001385 was approved with modifications.

Old Business:
- EDvocacy Update was given by Nicole Russell, NCPDP.
- A DEA ePrescribing for controlled substances and implementation activities update was given.

Task Groups:
- The **Formulary and Benefit Task Group** reviewed examples for the Formulary and Benefit Standard v50 and well as comments received on the ballot.
- **WG14 LTPAC ePrescribing Task Group** is working on retrospective electronic prior authorizations for long term and post-acute care. They brought forth four questions dealing with facility address, non-commercially available products and medication pass times to be added to the SCRIPT Implementation Recommendations document.
- **XML Task Group** brought forward DERF 001384 and also reviewed all submitted DERFs and provided recommendations.
- **NCPDP/HL7 Pharmacist Functional Profile Task Group** is developing EHR-S R2 functional profiles for the pharmacy practice specific setting.
- **Electronic Prescribing Best Practices Task Group** brought forward DERFs 001367 and 001385. They also provided recommendations for the SCRIPT Implementation Recommendations document for the use of RxNorm for branded drug names.
- **REMS and ePrescribing Task Group** did not meet this quarter.
- The **Electronic Prior Authorization Workflow to Transactions Task Group** brought forth DERFs 001365, 001381 and 001385. They also provided recommendations for the SCRIPT Implementation Recommendations document for PACancel.
- The **Meaningful Use and NIST Test Methods for ePrescribing Task** reviewed solutions for issues which occurred during the testing of the 2015 eRx NIST test tool.
- **Implementation of Structured Sig Task Group** reviewed questions received after the October webinar. They also reviewed “SigFreeTextStringIndicator” and worked on additional guidance related to pre-coordinated SNOMED terms (e.g. “three times weekly”).
- **Specialty Requirements for ePrescribing Task Group** did not meet this quarter.
- **Compounding Sub-Task Group** brought forth modifications to pended DERF 001372.

- **Harmonization of Prescribing and Dispensing Units Task Group** is determining a standard approach to harmonize product package size units used within prescribing, dispensing, adjudication, clinical and rebate systems to promote patient safety, improve the patient experience, and prevent financial and audit risks. They will provide recommendations that promote concordance between dispensing and billable units. In addition they reviewed three requests for QuantityUnitOfMeasure additions.

- **EPCS Renewal Request Task Group** created a letter that was sent to the DEA in February. They have received a notification the letter was received and the response from the DEA is going through the drafting and review process.

New Business:
- The SCRIPT Managed Update Schedule Task Group was formed as a result of the proposed ECL process review. This task group will review the timeline for requesting updates for the SCRIPT Standard as well as the proposed ECL timeline.
- A discussion around forwarding/redirecting electronic prescriptions for controlled substances was held.
- A discussion around the new law introduced in NY regarding an electronic prescription download was held.

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

Task Group Reports:
- The ePrescribing Task Group is looking at the use of the electronic prior authorization transactions in the long term and post-acute care industry. They brought forth four questions to be added to the SCRIPT Implementation Recommendations document, which were reviewed and approved in WG11 ePrescribing and Related Transactions.
- The LTPAC Current Billing Issues Task Group is looking at the NCPDP Telecommunication Standard to determine if the long term and post-acute care setting needs are met. They submitted DERFs 001357 and 001378 which were reviewed in Work Group 1 Telecommunication.
- The Consultant Pharmacy Interoperability Task Group is facilitating standardized messages for consultant pharmacist software, facility EHR and pharmacy dispensing systems
- Updates from the WG1 Eligibility Verification Task Group, WG9 Hospice Task Group and the Medicare Part D FAQ Task Group were provided.

New Business:
- Reviewed recommendations for changes to the Best Available Evidence (BAE) Form. The Best Available Evidence (BAE) Form Automation Task Group was reopened to address the issues.
- Discussed the needs of the LTPAC industry for a Real-time Prescription Benefit Inquiry.

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

DERFs/ECLs Discussed:
- DERF 001377 was approved by WG1 as modified.

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.
New Business:

- Handling of ASC X12 7030 TR3 reviews and comments was discussed.

Work Group 45 External Standards Assessment, Harmonization and Implementation Guidance

Old Business:

- Industry updates were provided for WEDI, ASC X12, and CAQH CORE.
- The revised WG45 Scope and Goals integrating WG3 activities were approved by the Board of Trustees.

Task Groups:

- The **Document Revision Task Group** did not meet as the requested CARCs, none of which were approved, had impact on the pharmacy industry. The mapping document as approved by the work group in November will be published in the next ASC X12 Code Value Usage in Health Care Claim Payments and Subsequent Claims Document.
- The **Pharmacy and/or Combination ID Card Task Group** did not meet but will be meeting in the next quarter to prepare a request to International Committee for Information Technology Standards (INCITS) for addition of smartphones and key tag cards for cardholder identification.
- The **ASC X12 7030 834 TR3 Review Task Group** did not meet as the publication of the TR3 was delayed.
- The **834/835 FAQ Task Group** did not meet. A call is scheduled for May 19 to discuss two questions.
- The **DSMO Task Group** received no DSMO requests for review.
- CAQH CORE Task Group did not meet this quarter.
- An update was provided on the **MC UDI Task Group**

MC Maintenance and Control

DERFs/ECLs Reviewed:

- 35 new and pended DERFs/ECLs were reviewed (see WG1, WG9 and WG11 above).
- The DERFs approved at this meeting will result in three ballots for the August 2016 ballot period
  - WG010072 for Telecommunication Standard vF2 (DERFs 001342, 001343, 003144, 001345, 001348, 001349, 001350, 001351, 001352, 001353, 001357, 001376, 001377) and Batch Standard v14 (DERF 001376)
  - WG090008 for Financial Information Reporting Standard v13 (DERFs 001362, 001376) (note see Telecommunication ballots for changes to DERF 001376)
  - WG110070 for the SCRIPT and Specialized Standard v2016xx# (DERFs 001365, 001383/ECL 00204, 001373, 001381, 001382, 001384, 001385)

Old Business:

- Updates are available in the MC May 2016 download file:
  - HIPAA

Task Groups:

- The **Education/Legislation and Regulations Task Group** prepared comments on the ONC 2016 Interoperability Standards Advisory.
- The **Unique Device Identifier (UDI) Task Group** continued their ongoing discussions, outreach, and research on how UDI will be implemented for devices in retail Pharmacy.
- The **Real Time Prescription Benefit Inquiry Task Group** continues working on use cases. Great strides have been made in completing use case development but a few open questions remain. See the NCPDP Collaborative for more information.
• The Prior Authorization Harmonization Task Group disbanded at this workgroup meeting.
• The API Task Group surveyed the membership on the status of API usage.
• The Emergency Preparedness Task Group began reviewing the Emergency Preparedness document for updating.

New Business:
• The attendees received recaps of each Work Group’s activities.
• The NCPDP Most Valued Participants were announced.
• The 2016 Work Group Co-Chairs were announced.