August 2016 Work Group Recaps:


Work Group 1 Telecommunication

DERFs/ECLs Reviewed:

- DERF 001346 was approved as modified.
- DERF 001347/ECL 000199 was recommended for MC approval.
- DERF 001358 was approved as modified.
- DERF 001359/ECL 000200 was recommended for MC approval as modified.
- DERF 001375 was pended.
- DERF 001378 was approved as modified.
- DERF 001380 was pended.
- DERF 001386 was approved.
- DERF 001387 was approved.
- DERF 001388 was approved as modified.
- DERF 001389 was approved.
- DERF 001390 was approved.
- DERF 001391 was approved.
- DERF 001392 was approved as modified.
- DERF 001393 was approved as modified.
- DERF 001394 was pended.
- DERF 001395 was pended.
- DERF 001396 was pended.
- DERF 001397 was pended.
- DERF 001398 was approved.
- DERF 001399 was approved as modified.
- DERF 001400 was pended.
- DERF 001401/ECL 000205 was recommended for MC to pend.
- DERF 001403 was withdrawn.
- DERF 001404 was approved.
- DERF 001405/ECL 000206 was withdrawn.
- DERF 001406 was pended.
- DERF 001407/ECL 000207 was recommended for MC to pend.
- DERF 001408 was approved as modified.
- DERF 001409 was approved as modified.
- DERF 001410 was pended.
- DERF 001411/ECL 000208 was recommended for MC to pend.
- DERF 001412 was pended.
- DERF 001413 was approved as modified.
- DERF 001414 was pended.
- DERF 001415 was approved as modified.
- DERF 001416 was approved as modified.

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 only.
• Telecom D.0 and all versions from that point have been updated (November 2012).
• 03/2014 NCPDP received a response from HHS to the 03/2013 letter. The change will go through NPRM and Final Rule process.
  ▪ NCPDP asked for the industry to have input on the implementation timeframe before the NPRM is published.
  ▪ NCPDP asked for a timeframe of NPRM publication.
• 06/2014 Update: OESS has responded that an NPRM including Quantity Prescribed and SCRIPT electronic prior authorization is going through the review process.
• WG1 Telecommunication FAQ Task Group brought forward a recommendation timeframe for Quantity Prescribed regulation implementation for OESS.
• 07/21/2015 Update from NSG: Our new target for this regulation is early 2016.
• 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.
• 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.
• 07/25/2016 Update from NSG: Additional questions were received and documentation from 2010, 2012 and 2013 was provided to answer the questions.

Task Groups:
• The Telecommunication FAQ Task Group finalized eleven questions with recommendations and/or DERFs. One question remains under discussion. The group reviewed the FAQs in the Telecommunication Standard Implementation Guide and the Editorial Document to determine which questions/answers needed to be incorporated into the body of the Implementation Guide and created DERFs. There were two reportable items this quarter.
• The Coordination of Benefits Task Group reviewed four FAQs, created two DERFs, modified two DERFs and discussed sales tax and COB. The group will be updating examples, developing transition guidance, reviewing the Medicare Part D FAQ document for COB related items and developing a COB webinar.
• The Information Reporting Problems Task Group is reviewing and updating the COB White Paper. The group created a DERF to modify the Telecommunication Standard to support the processing of the claim in a rebill transaction when the reversal rejected. The group completed the Best Practice Guide for Managing Medicare OHI for Prescription Drug Plans paper. The paper is going through the review process. The group also completed the Nx to Bx transaction matching hierarchy. The SPAP/ADAP Data Exchange White Paper was approved by CMS and the Standardization Committee. They are working on recommendations to standardize fields on COB member notifications.
• The Post Adjudication Task Group did not meet this quarter.
• The Definition of a Valid Prescriber Task Group reviewed the CMS revisions to the Medicare Individual Provider Enrollment File Layout, four FAQs and created a DERF to add a data element to the prescriber segment in the Telecommunication Standard. FAQs for “Soft Messaging Prior to 02/01/2017” and “OAP Determination When Multiple Taxonomies Are Associated to the Prescriber NPPES Record” 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. A DERF for a new segment and revisions to existing segments was submitted for WG review.


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

The **Usage of Submission Clarification Codes (SCC) Task Group** defined the reject code/reject category for each SCC, performed analysis on the use of SCC 2 and reviewed the SCC for consideration of removal and creation of specific fields in a future version of the Telecommunication Standard. The task group created three new DERFs which sunset existing SCC values and created three new indicator fields. The task group also created a DERF to limit the number of SCC iterations to correspond with the maximum number of reject codes. The task group will continue to monitor WG14 activity on removing short cycle SCCs.

The **Compound Task Group** modified the two DERFs introduced in February and pended in May. The DERFs request changes to the new Telecommunication Standard addressing how compounding pharmacies can report the level of complexity in the preparation of the prescription more adequately and more uniformly than has been previously done. Trading partners will define the adjudication rules for each case but stay within the framework of the standard for reporting. The task group also reviewed compound specific guidance in the Version D.0 Editorial document for elimination, modification or carry-over to the Version F2 Editorial document. The task group will explore and recommend guidance to the industry for handling of compound ingredients without NDC numbers.

The **Attachments Task Group** created high-level business use cases for attachments. The group determined the formats to be accepted. The task group is looking for feedback on the maximum size of a real-time transaction and participants.

The **Copay Assistance Task Group** was formed at this meeting.

**New Business:**
- WG Scope and Goals were reviewed and approved as modified.

**Work Group 2 Product Identification**

**Old Business:**

**Pended QUIC Forms Review:**
- QUIC #201605 Clindesse by Perrigo Pharmaceuticals NDC 45802-0042-01 and QUIC #201606 Gynazole-1 by Perrigo Pharmaceuticals NDC 45802-0396-01
  
  BU= gm with a quantity of 5.0 per section 7.34 of the BUS for active NDCs.

**Task Groups:**
- The **Structured Product Labeling Activities Task Group** had no new activity to report this quarter.
- The **Product Review and Billing Unit Exception Task Group** is reviewing the exceptions within the Implementation Guide and issues resulting from changes to existing products or release of new products. The task group:
  - Reviewed ten products to determine the billing unit and package size.
• Reviewed and submitted to WG2 for adjudication two pended and one new QUIC form: (see final adjudication determination by the WG in this report).
  ▪ QUIC #201605 Clindesse 5.8G NDC 45802-0042-01 (pended from May WG)
  ▪ QUIC #201606 Gyanzole-1 5.8G NDC 45802-03916-01 (pended from May WG)
  ▪ QUIC #201607 ProstaScint 5MG/1ML NDC 57902-0817-01
• The Billing Unit Discrepancies working group has been moved from the SPL Activities Task Group to the Product Review and Billing Unit Exception Task Group. This Drug Compendia group submits the monthly NSDE file to the FDA containing the NCPDP Billing Units by NDC for inclusion in the SPL and reviews and provides monthly validation information to the FDA.
• For April, May and June 2016, 2,471 new billing unit indexing files were generated by FDA based on the files received by the compendia. Of the 61 NDCs with discrepancies in the files, all but the 10 still in process have been reconciled.
• The SPL REMS Requirements Task Group provided an update on the FDA REMS SPL pilot project for the submission of final approved Risk Evaluation and Mitigation Strategies (REMS) and certain REMS summary information electronically in a standard Structured Product Labeling (SPL) format. The two rounds of the pilot program have been completed. The FDA has tasks to complete prior to the launch of the REMS SPL Submission Program, including conducting an informational webinar. Three NCPDP members served as panelists on Leveraging Existing Data Standards and Partnerships to Facilitate the Development and Implementation of the Common REMS Platform. They participated in development of a use case including discussion of the process and identification of the data elements needed to carry out the scenario and refinement of the exchange process.
• The Dates Associated with Pharmaceutical Products Task Group has revamped the table of contents and the flow of the Defining Beginning and End Dates Associated with Commercialized Pharmaceutical Products document. The “beginning dates” section has been completed and the “ending dates” section is in progress.
• The Naming Standards for Drugs, Biologics and Biosimilars Task Group reported that NCPDP and other groups submitted comments in opposition to the FDA’s guidance document on the Labeling for Biosimilar Products. NCPDP also provided their support to USP and its standard when the FDA proposed to strip USP of their authority over biologics. Highlights of some sections of the FDA guidance were provided.
• The Application of the Billing Unit Standard Clarification Task Group did not meet.
• The 503B Guidance Task Group did not meet.
• The Product Service Identifier Expansion Task Group reviewed all of the identifiers in Appendix B in the ECL to validate the current length of the identifier. They also identified and evaluated all fields using the qualifier values from Appendix B to determine whether their lengths should be the same as the PSID. They submitted a DERF to expand the PSID field and related identifier fields to 40 bytes. See Maintenance and Control for adjudication.
• An update on the WG9/WG2 Unbreakable Packages Task Group was provided. See WG9 meeting minutes.
• An update on the WG2/WG11 Harmonization of Prescribing and Dispensing Units Task Group was provided. See WG11 meeting minutes.

New Business:
• WG Scope and Goals were approved.
• New QUIC Form Review:
  QUIC #201607 ProstaScint NDC 57902-0817-01
BU= mL with a quantity of 3.0 per section 5.2.2 and 5.2.9 of the BUS.

- 2016 Scope and Goals were reviewed and approved.

Presentation:
- Gerry McEvoy of ASHP gave a presentation on the discordance of SPL dosage forms – NClt vs FDA Approved and Official USP.

Work Group 7 Manufacturer and Associated Trading Partner Transaction Standards

Task Groups:
- The Medical Rebate Standard Task Group did not meet this quarter. Future topics for discussion will include the feasibility of incorporating the Medical Rebate Standard into the Manufacturer Rebate Standard.
- The Medicaid Drug Rebate Program Task Group reviewed the task group’s white paper published in 2010 and will draft an update during the next quarter. A Medicaid Drug Rebate Program overview was presented to WG7.
- The Manufacturer Rebate Standard Task Group developed an outreach approach to encourage participation in the task group. The Task Group is currently working on a Formulary and Benefit Proof of Concept (Pilot). The Task Group is also reviewing potential new fields for the Manufacturer Rebate Standard and DERFs submitted in May and August with potential impact to the Manufacturer Rebate and Medical Rebate Standards.
  - 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. The Task Group has identified the needed data elements for the fulfillment report and has mapped approximately 95% of the fields to existing data elements in the NCPDP Data Dictionary.
  - Rebate Reference Guide Sub-Task Group presented Rebate Reference Guides for Manufacturer Rebate Standard versions 05.00-06.01 and 07.00-07.01 which were approved and will be published. Going forward, the task group will consider enhancements to the content of the current Reference Guides.
- The Regulatory Tracking/Pedigree Task Group was disbanded. WG7 will continue to monitor the technology for the interoperable exchange of product tracing information.
- 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:
- WG7 Scope and Goals were approved.

Work Group 9 Government Programs

DERFs/ECLs Reviewed:
- DERF 001417/ECL 000209 was approved as modified.
- DERF 001418/ECL 000210 was approved.
- DERF 001419 was approved as modified.
- DERF 001420 was approved as modified.

Task Groups:
- The 340B Task Group reviewed DERF 001396 submitted by the NCPDP WG1 Usage of Submission Clarification Code (SCC) Task Group requesting to sunset Submission Clarification Code (Field 420-DK) value 20 – 340B and create a new field, 340B Indicator. Some concerns
were noted by Medicaid representatives related to programming and regulation changes. It was also noted the Field Limitation stated in the DERF is inconsistent with the current information in the ECL.

- The **Government Programs Encounter Reporting Standards Task Group** developed a survey for 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 task group also created a one-page flyer to be available for distribution during the upcoming Medicaid Enterprise Systems Conference.

- The **Health Insurance Exchange/Marketplace Task Group** did not meet this quarter.

- The **Hospice Task Group** met to discuss current processes including the use of the “Hospice Information for Medicare Part D” form, retroactive eligibility, and payment reconciliation. The task group will develop a survey to gather input and in collaboration with CMS will pursue automation of the reconciliation process between Hospice and Payers/Processors.

- 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 recommended modifications to the Prescription Drug Benefit Manual, Chapter 14-30.2-1-Other Payer Supplemental to Part D and applicability to TrOOP. Three questions and responses were presented to WG9 for approval.

- The **Medicare Part D FAQ Task Group** finalized two questions and responses for WG9 review and approval. The task group also reviewed appropriate sections of the Version D Editorial Document to determine if the content should be moved to the new HIPAA version of the Telecommunication Standard Implementation Guide or added to the Medicare Part D FAQ document.

- The **Medicare Prescription Drug Event (PDE) Task Group** reported that five questions were finalized and submitted to CMS, six questions were completed and closed and five questions are under review.

- The **Medicare Standardized Fraud, Waste and Abuse Training Attestation Task Group** presented a revised Fraud, Waste and Abuse Training Attestation form based on recent CMS guidance. WG9 approved the revised form which will be submitted to NCPDP Database Services for inclusion in dataQ®.

- The **OIG Report OEl 05-12-00540 Task Group** is drafting a white paper which recommends the use of new fields Adjudicated Program Type and Other Payer Adjudicated Program Type as the best available long term solution for prevention of improper copayment coupon use for drugs paid for by Medicare Part D.

- The **Prescription Drug Monitoring Program (PDMP) Task Group** reviewed the Telecommunication Standard Intermediary Segment and its impact on PDMP and presented four DERFs for review. The task group also provided PDMP updates for the District of Columbia, Georgia, Minnesota, Ohio, Oklahoma, Texas and Vermont.

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

- The **Unbreakable Package Task Group** was disbanded based on the decision by CMS to abstain from commenting on the Task Group’s proposed definition of unbreakable package.

- The **Medicare/Medicaid Claim Billing Issues Task Group** has requested CMS assistance in establishing applicable identifiers to allow pharmacy systems to identify claims as Medicaid FFS or Medicaid MCO prior to claim submission process. The Task Group will gather information in order to provide education to States/MCOs regarding the validity of negative claim payments.
• WG9 received an update from the **MC Unique Device Identifier Task Group**. See MC Maintenance and Control minutes and DERFs 001432, 001433, 001434, 001435.

New Business:
• WG9 Scope and Goals were approved.
• NCPDP Edvocacy/Legislative Update was provided.

**Work Group 10 Professional Pharmacy Services**

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

Task Group Reports:
• The **MTM Communications Task Group** continues to develop new functionality using the CCDA Release 2 Clinical Notes. The *Pharmacist Care Plan: Guidance on the Use of the HL7 CDA Consolidated Templates for Clinical Notes R2.1 Care Plan* was presented and approved by the work group.
• The **Acetaminophen Best Practices Hospital Safety Sub-Task Group** reported the *NCPDP Recommendations for Dose Accumulation Monitoring in the Inpatient Setting: Acetaminophen Case Model* white paper was published by NCPDP and electronically by the American Journal of Health System Pharmacy in June, with the print version August 1. For the month of July, of the 100 most frequently read articles in AJHP, the White Paper ranked number 6 and the accompanying editorial ranked number 5.
• WG11 **Specialty Requirements for ePrescribing Task Group** did not meet during the quarter.

New Business:
• Work Group Scope and Goals were approved.
• Presentation was provided by Gerry McEvoy on the discordance of dosage forms resulting from the use of multiple terminologies: SPL dosage forms – NClt, FDA and Official USP approved labeling, Orange Book and Drugs@FDA and RxNORM.
• HHS and Federal Pharmacist’s Initiatives Update was provided by Rear Admiral Pamela Schweitzer highlighting the need for involvement in the “Turn The Tide opioids campaign”. Go to [www.TurnTheTideRx.org](http://www.TurnTheTideRx.org) for information on use of opioids including a pain treatment toolbox and for pharmacists and other health care professionals across the United States to show their commitment to ending the opioid epidemic by signing the pledge.

**Work Group 11 ePrescribing & Related Transactions**

Ballot Adjudication:
• **Ballot WG110069R** for the Formulary and Benefit Standard is considered a valid ballot having received the required 60%+ of Consensus Group votes. No new written comments were received. Following a 30-day appeal period, the ballot will be sent to NCPDP Board of Trustees for approval.

DERFs Reviewed:
• DERF 001374 was withdrawn by the submitter.
• DERF 001421 was pended.
• DERF 001422 was approved.
• DERF 001423 was approved with modifications.
• DERF 001424 was approved.
• DERF 001425 was approved with modifications.
• DERF 001426 was approved.
DERF 001427 was approved with modifications.
DERF 001428 was approved with modifications.
DERF 001429 was pended.
DERF 001430 was approved with modifications.
DERF 001431 was pended.

Old Business:
- Edvocacy Update was given by Nicole Russell.
- A DEA eprescribing for controlled substances and implementation activities update was given.
- An update was provided on the request to CMS for the next named version of the SCRIPT Standard.

Task Groups:
- The **Formulary and Benefit Task Group** has begun working on Operating Rules for the Formulary and Benefit Standard Implementation Guide v50.
- The **WG14 LTPAC ePrescribing Task Group** is working on a possible new segment for SCRIPT which would contain facility specific information needed to be sent to the pharmacy.
- The **XML Task Group** brought forward DERF 001324. The task group reviewed all submitted DERFs and brought forward recommendations for them.
- The **NCPDP/HL7 Pharmacist Functional Profile Task Group** did not meet this quarter.
- The **WG11 Electronic Prescribing Best Practices Task Group** brought forward DERFs 001421, 001422, 001425, 001426 and 001429. They also provided recommendations for the SCRIPT Implementation Recommendations document for the use of Medication Notes and coupons.
- The **REMS and ePrescribing Task Group** did not meet this quarter.
- The **Electronic Prior Authorization Workflow to Transactions Task Group** brought forth DERFs 001427, 001430 and 001431.
- The **Meaningful Use and NIST Test Methods for ePrescribing Task** did not meet this quarter.
- The **Implementation of Structured Sig Task Group** focused on more complicated, frequently used Sigs. They also provided recommendations for the SCRIPT Implementation Recommendations document for the use \(<\text{TextString}>\).
- The **Specialty Requirements for ePrescribing Task Group** did not meet quarter.
- The **Compounding Sub-Task Group** did not meet this quarter.
- The **Harmonization of Prescribing and Dispensing Units Task Group** is determining a standard approach to harmonize product units used within prescribing, dispensing, adjudication, clinical and rebate systems to promote patient safety, improve the patient experience, and prevent financial and audit risks and provide recommendations that promote concordance between dispensing and billable units.
- The **EPCS Renewal Request Task Group** submitted comments to the DEA in February. They have received notification the letter was received and the response from the DEA is going through the drafting and review process. They are also looking at the electronic redirection of prescription.
- The **SCRIPT Managed Updates Schedule Task Group** is reviewing the proposal to update the NCPDP SCRIPT Standard on a more predictable basis as well as the NCPDP External Code List (ECL) proposals implementation proposal. The task group focused on the relationship between the schema and the External Code List document this quarter.

New Business:
- Received information on the new SCRIPT and Specialized Examples Guidance documents.
- Approved the proposed 2016 WG11 Scope and Goals.
**WG14 Long Term and Post Acute Care (LTPAC)**

**Old Business:**
- Highlights of the Comprehensive Addiction & Recovery Act (CARA) were presented as mentioned in the CMS Medicare Part D and Medicaid Discussion.

**Task Group Reports:**
- 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. DERF 001378, pended during May WG, was reviewed and approved by WG1 Telecommunication.
- 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 are currently discussing a Facility Specific segment for addition to SCRIPT.
- The **Consultant Pharmacy Interoperability Task Group** is facilitating standardized messages for consultant pharmacist software, facility EHR and pharmacy dispensing systems. The task group has selected the Consultant Note Template as the “best fit” of existing C-CDA templates for consultant pharmacist messaging.
- The **Best Available Evidence (BAE) Automation Task Group** is reviewing scenarios and recommendations related to the form and process. They have requested additional information prior to commenting on the proposed recommendations from one of the payers.
- Received updates from the **WG1 Eligibility Verification Task Group, WG9 Hospice Task Group, WG9 Medicare Part D FAQ Task Group** and **MC Real Time Prescription Benefit Inquiry (RTPBI) Task Group**.

**New Business:**
- Reviewed and approved the 2016 Scope and Goals.

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

**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. They provided comments to Florida and are preparing comments for Colorado proposed rules.

**New Business:**
- Work Group Scope and Goals were approved with a few non-substantive modifications.
- Handling of ASC X12 7030 TR3 reviews and comments was discussed.
- Modifications to existing published documents for alignment to the next version of the standards were discussed.
- DERFs of interest to WG16 for changes to Telecommunication Standard were discussed. See WG1 for disposition of DERFs 001389, 001393, 001394, 001395, 001396 and 001414.
- A new task group (**Future Development Needs for WC/PC Task Group**) was formed to work across SDOs to address changes needed to support workers’ compensation and property casualty for adoption of the next versions of standards.

**Guest Presentation:**
- John L. Hanna RPh, MBA, Pharmacy Program Director, Ohio Bureau of Workers’ Compensation provided a highly informative presentation on the OH BWC Prescription Benefit Drug Program with emphasis on work on opioid utilization.
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 did not meet as the requested CARCs did not impact the pharmacy industry. One CARC was approved by the Code Committee and the mapping document was approved as updated by the work group. It will be published on the web site and submitted for inclusion 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.
- The ASC X12 7030 834/835 TR3 Review Task Group did not meet as the publication of the TR3 was delayed. The scope of the task group was modified to specify the 834 and 835.
- The 834/835 FAQ Task Group met and discussed two questions. The first question was withdrawn by the submitter with no further action needed by the task group. The second produced a recommendation for the formation of a new task group.
- The DSMO Task Group received no DSMO requests for review.
- The CAQH CORE Task Group did not meet this quarter.

New Business:
- Work Group Scope and Goals were approved.
- The DIR 835 Reporting Task Group was formed “to identify use cases of DIR fees currently experienced to determine financial impact and develop examples of suggested reporting in the ASC X12 835”.

MC Maintenance and Control

DERFs/ECLs Reviewed:
- 56 new and pended DERFs/ECLs were reviewed (see WG1, WG9 and WG11 above as well as task groups below).

Old Business:
- Updates are available in the MC August 2016 download file:
  - Board of Trustee
  - HIPAA

Task Groups:
- The Education/Legislation and Regulations Task Group did not meet.
- 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. They brought forward the following DERFs:
  - DERF 001432 was approved with modifications.
  - DERF 001433 was approved.
  - DERF 001434 was approved.
  - DERF 001435 was approved.
- The Real Time Benefit Check Task Group continues working on use cases. They have made great strides in completing their use case development but still have a few open questions to complete. They will be presenting their work in MC on Thursday, November 3, 2016. See the NCPDP Collaborative for more information.
- The API Task Group reviewed the survey on the status of API usage. They developed a work plan for moving forward with development of diagrams, examples and educational material.
• The **Emergency Preparedness Task Group** continued reviewing the Emergency Preparedness document for updating. They submitted DERF 001402 which was approved.

**New Business:**

• The attendees received recaps of each Work Group’s activities.
• Approved the request for a new **Biologic and Biosimilar Access and Traceability Task Group** for WG11. This task group will address the needs of reporting batch number, lot number and expiration data for biosimilars and biologics from the dispenser back to the prescriber.
• Formed the **ASC X12 TR3 Comment Coordination Task Group**. This task group will coordinate the review and comments for ASC X12 TR3 guides as they are released for public comment.
• Approved the proposed 2016 Scope and Goals.