May 2017 Work Group Recaps:

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

Work Group 1 Telecommunication

Ballot Adjudication:

- Ballot WG010074 for the initial release of the Batch Standard Subrogation 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 categorized the comment. See Letter Ballot Comment spreadsheet for the ballot results. Following a 30-day appeal period, the ballot will be sent to the NCPDP Board of Trustees for approval.

- Ballot WG010075 for enhancements to the Telecommunication Standard Implementation Guide, Batch Implementation Guide, Post Adjudication Standard Implementation Guide, Audit Transaction Standard Implementation Guide and Uniform Healthcare Payer Data Standard Implementation Guide is considered a valid ballot having received the required 60%+ of Consensus Group votes and 75%+ approval rating. Forty-four (44) affirmative with comment and one (1) negative with reason comment were received. WG1 reviewed and categorized the comments. See Letter Ballot Comment spreadsheet for the ballot results. Due to the categorization of ballot comments, the ballot will be recirculated.

- Ballot WG010076 for enhancements to the Benefit Integration 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 categorized the comment. See Letter Ballot Comment spreadsheet for the ballot results. Following a 30-day appeal period, the ballot will be sent to the NCPDP Board of Trustees for approval.

DERFs/ECLs Reviewed:

- DERF 001500 was pended.
- DERF 001501/ECL 000222 was recommended for MC to approve.
- DERF 001502/ECL 000223 was recommended for MC to approve with modifications.
- DERF 001503/ECL 000224 was recommended for MC to pend.
- DERF 001508/ECL 000229 was recommended for MC to deny.

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.
    - 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.
  - 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 rulemaking 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.
10/14/2016 Update from NSG: We are in the Rulemaking stage of this policy item. We should have an NPRM out by Mid-2017.
02/2017: Still tracking to a mid-2017 date.
05/2017: Summer 2017

- WG1 2016 Year in Review was presented.

Task Groups:
- The **Telecommunication FAQ Task Group** finalized four questions and one question remains under discussion. The group formed a sub-task group to resolve a question on morphine equivalent dosing (MED). The group will create a new FAQ to look at the larger issue with the misuse of the U&C field.
- The **Coordination of Benefits Task Group** reviewed ten FAQs and created ballot comments to the WG1 Telecommunication Standard ballot. The group began a review of the ECL lists/values for fields used in COB. The group will be updating examples, developing transition guidance and developing a COB webinar.
- The **Information Reporting Problems Task Group** reviewed the CMS Memo - Medicare Part D Transaction Facilitator Updates, screen mock-ups of new HPMS module for SPAP/ADAP module, the impact of the SSNRI to OHI File, and updated the SPAP/ADAP & Medicare Part D Resources pages of NCPDP Website. The group continues to review and update the Medicare Part D COB White Paper. The N to B Matching Logic Best Practices document has been completed and is being reviewed by the task group. Work continues on answering questions passed from other task groups.
- The **Post Adjudication Task Group** did not meet this quarter.
- The **Definition of a Valid Prescriber Task Group** completed four FAQs. An Editorial Document update was created for work group approval. The group will continue working on FAQs.
- The **Part D Supplemental Payment Reporting Task Group** revised the Nx reject code list. The list is published on the MedifacD website and on the NCPDP website Medicare Part D Resource page. The group reviewed and finalized the new process for Nx updates on MedifacD and the new Reject Report.
- The **Eligibility Verification Enhancements Task Group** did not meet this quarter.
- The **Benefit Integration Task Group** began work on a synchronization file layout as a flat file and XML syntax.
- The **Standardized Subrogation Task Group** did not meet this quarter.
- The **Usage of Submission Clarification Codes (SCC) Task Group** created a DERF to sunset SCC 99 and to add a value limitation to SCC 2. The task group will create a transition mapping for SNIP. The task group will continue to monitor WG14 activity on removing short cycle SCCs.
- The **Compound Task Group** submitted a DERF to clarify the value limitations for values 16-22 in the DUR/PPS Level of Effort (474-8E). The task group has developed guidance for the new fields (Compound Level of Complexity (compound segment), Preparation Environment and Preparation Environment Event Code (claim segment)) which is being reviewed by the WG1 Telecommunication FAQ Task Group. The group will continue to develop guidance.
• The **Upstream Reporting of Copay Assistance Task Group** is creating a paper to document, for future reference, the results of the task group research; not to provide recommendations or solutions. To date, the group has identified program types, possible use cases, obstacles to reporting and appropriateness of the reporting.

**New Business:**
- An FDA presentation on a *Common REMS Platform* was given.
- The 2017-2018 Work Group Co-Chairs were announced.

**Work Group 2 Product Identification**

**Ballots:**
- **Ballot W020009** for the Product Identifiers Standard Implementation Guide v1.4 is considered a valid ballot having received 60%+ of Consensus Group votes and 75%+ approval rating. One affirmative with comment vote was received. WG2 reviewed and categorized the comment. See Letter Ballot Comment spreadsheet for the ballot results. Following a 30-day appeal period, the ballot will be sent to the NCPDP Board of Trustees for approval.

**Old Business:**
- WG2 2016 Year in Review was presented.
- Tom Bizzaro of First Data Bank (FDB) provided comments on health policy focusing on drug pricing and the President's Commission on Combating Drug Addiction and the Opioid Crisis.
- Tammy Powell of the National Library of Medicine (NLM) provided an update on RxNorm and DailyMed and announced the upcoming NLM Jamboree on September 19, 2017.

**Task Groups:**
- The **Structure 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 and submitted to WG2 for adjudication one new QUIC form: (see final adjudication determination by the WG in this report).
  - QUIC #201701 Vyeexos 100 units per vial - 5 units per mL NDC# 68727-0745-01- single vial, 68727-0745-02-2-pack carton, 68727-0745-05-5 pack carton
  - Reviewed six products to determine the billing unit and package size.
  - For February and March 2017, 2,631 new and zero changed billing unit indexing files were generated by FDA based on the files received by the compendia. The Billing Unit Discrepancies working group comprised of compendia representatives has reconciled the 15 NDCs with discrepancies.
  - Drafted four letters to manufacturers on the subjects of multiple identifiers on products and the re-use of NDC’s.
- The **SPL REMS Requirements Task Group** provided an update on the status of implementation of REMS via SPL. Although REMS SPL files have not yet been posted on DailyMed, the FDA continues to see strong interest from pharmaceutical manufacturers for voluntarily converting their REMS to the SPL format. The FDA has posted an updated sample REMS SPL file on its SPL Website. The FDA continues to work on publishing its draft guidance for regulatory submission in electronic format under Sec. 745A(a) of the Food, Drug, and Cosmetic (FDC) Act, which, when finalized, will require submission of REMS in the SPL format. That requirement would take effect in 2019 at the earliest. The FDA will be hosting an informational webinar on REMS SPL.
• The Dates Associated with Pharmaceutical Products Task Group continues to work on the content of a white paper which describes the definitions of the data elements in the different market segments and the life cycle of a product.

• The Naming Standards for Drugs, Biologics and Biosimilars Task Group has sent letters to the Office of Management and Budget (OMB) and to new Health and Human Services (HHS) Secretary Price to comment on the potential financial impact of the FDA's Final Guidance for Industry: Nonproprietary Naming of Biological Products. Similar letters have also been drafted to the new Food and Drug Administration (FDA) Commissioner, Scott Gottlieb, M.D. and the new National Coordinator for Health Information Technology, Donald Rucker, M.D.

• The Application of the Billing Unit Standard Clarification Task Group did not meet this quarter.

• The WG2/WG11 Harmonization of Prescribing and Dispensing Units Task Group did not meet this quarter.

New Business:

• New QUIC Form Review:

  QUIC #201701 Vyxeos 100 units per vial- 5 units per mL NDC# 68727-0745-01-single vial, 68727-0745-02-2-pack carton, 68727-0745-05-5 pack carton

  BU = each with a quantity based upon how much of the package is dispensed per section 5.1.2 of the BUS.

• The 2017-18 WG2 Co-Chairs were announced.

• Adam Kroetsch of the FDA gave a presentation on the FDA Common REMS Platform Document. The FDA will be issuing a “platform needs assessment” to help them identify REMS activities for which standards should be addressed; determine which information needs to be communicated to help carry out these activities and look for opportunities to leverage existing standards.

• Michele Davidson of Walgreen Co. gave a presentation with an update on the Drug Supply Chain Security Act (DSCSA). Some manufacturers are replacing the existing linear barcode with a 2D barcode or stacked linear barcode to comply with the requirement of a unique product identifier on drug packaging by November 2017. The scanners in retail pharmacies are unable to read the 2D or stacked barcodes which is resulting in manual overrides.

Work Group 7 Manufacturer and Associated Trading Partner Transaction Standards

DERFs/ECLs Reviewed:

• DERF 001446 was approved with modifications.

• DERF 001505 was approved with modifications. The ECL designation was removed.

• DERF 001506/ECL 000227 was recommended for approval by MC with modifications.

• DERF 001507 was approved.

Old Business:

• WG7 2016 Year in Review was presented.

Task Groups:

• The Medical Rebate Standard Task Group did not meet this quarter.

• The Medicaid Drug Rebate Program Task Group continued to work on updating the white paper titled, *Use of the NCPDP Manufacturer Rebate Standard to Support Payment Processes Between Medicaid and Supplemental Programs and Pharmaceutical Companies* published in 2010. A draft will be presented at the August Work Group meeting.

• The Manufacturer Rebate Standard Task Group continued review of the Manufacturer Rebate Standard Implementation Guide and revisions related to pended DERF 001446.
Specialty Pharmacy Data Exchange Sub-Task Group is developing a Specialty Pharmacy Data Reporting Standard 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 identified the necessary data elements and agreed on a flat file format. During the next quarter, the task group will continue work on the development of an implementation guide.

- The Formulary Management Survey Task Group did not meet this quarter.

New Business

- NCPDP 340B Stakeholder Action Group Update – The NCPDP 340B Stakeholder Action Group was held on April 18, 2017 in Baltimore, MD. Stakeholder groups represented were pharmacy, covered entities, trade associations, manufacturers, software vendors, government software vendors, consultants and state Medicaid agencies as well as government representation from CMS Medicaid/Medicare and HRSA. The meeting started with a report on the 340B Stakeholder Action Group held last fall which largely dealt with the transaction flow from the point of dispensing to the payer/processor and was followed by a comprehensive overview of the Medicaid Drug Rebate Program. The remainder of the meeting focused on what is not working and what role NCPDP could play based on the identification of pain points not sufficiently addressed by the existing standards and the need for additional options over and above the existing processes. Items discussed included:
  - Identification methods of claims for drugs purchased under 340B rights that are provided to states directly by either covered entities or their administrators or contract pharmacies similar to a process that is available today in the State of Oregon.
  - Retroactive reimbursement at Actual Acquisition Cost on a 340B covered drug (State Medicaid agencies).
  - Identification of Medicaid beneficiaries through the use of unique Bins/PCNs.

The 340B Task Group will meet to discuss these topics to determine next steps. The task group needs participation from all stakeholder groups and also members who may be interested in co-leading the task group or any of the sub-task groups that may be formed to accomplish the work.

- The 2017-2018 Work Group Co-Chairs were announced.

Work Group 9 Government Programs

Ballot Adjudication:

- Ballot WG090009 for the Financial Information Reporting Standard Implementation Guide Version 14 is considered a valid ballot having received the required 60%+ of Consensus Group votes and 75%+ approval rating. One Affirmative comment was received. WG9 reviewed and categorized the comment. 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.

DERF/ECL Reviewed:

- DERF 001504/Emergency ECL 000224 was recommended for approval by MC with modifications.

Old Business:

- WG9 2016 Year in Review is available with the meeting documents, but was not presented due to time constraints.

Task Groups:

- The Prescription Drug Monitoring Program (PDMP) Task Group reviewed C1/C2 requirements as a standalone standard to supplement the B1 real-time reporting to the PDMP Facilitator and
Nebraska HIE requirements to determine best standard for all claim HIE reporting. The task group will continue to work on creating a version of the Controlled Substance Reporting Standard to report fields to the PDMP facilitator that are required by states but not in the B1 Telecommunication transaction. The task group submitted a New Project Development Form to look at the SCRIPT Standard/Medication History as a base for creating a new all-medication reporting transaction to state HIE’s.

- The 340B Task Group did not meet this quarter; however, a report was provided on the NCPDP 340B Stakeholder Action Group held on April 18, 2017 in Baltimore. Stakeholder groups represented were pharmacy, covered entities, trade associations, manufacturers, software vendors, government software vendors, consultants and state Medicaid agencies as well as government representation from CMS Medicaid/Medicare and HRSA. The meeting started with a report on the 340B Stakeholder Action Group held last fall which largely dealt with the transaction flow from the point of dispensing to the payer/processor and was followed by a comprehensive overview of the Medicaid Drug Rebate Program. The remainder of the meeting focused on what is not working and what role NCPDP could play based on the identification of pain points that are not sufficiently addressed by the existing standards and the need for additional options over and above the existing processes. Items discussed included
  - Identification methods of claims for drugs purchased under 340B rights that are provided to states directly by either covered entities or their administrators or contract pharmacies similar to a process that is available today in the State of Oregon.
  - Retroactive reimbursement at Actual Acquisition Cost on a 340B covered drug (State Medicaid agencies).
  - Identification of Medicaid beneficiaries through the use of unique BIs/PCNs.
  - The 340B Task Group will meet to discuss these topics to determine next steps. The task group needs participation from all stakeholder groups and also members who may be interested in co-leading the task group or any of the sub-task groups that may be formed to accomplish the work.

- The Government Programs Encounter Reporting Standards Task Group continues to work through a field-by-field review of the Post Adjudication Standard, their use within existing State Medicaid encounter file layouts and/or similar field use from the Telecommunication Batch Standard. Review of fields associated with eligibility or accumulator content have been tabled for focused discussion. Over 500 fields have been reviewed to date.

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

- The Medicaid Best Practices Using NCPDP Standards to Implement Reimbursement Methodology Task Group developed four FAQs which were added to the white paper titled, The Proper Use of the NCPDP™ Telecommunication Standard Version D.0 as it applies to the Implementation of Medicaid Reimbursement Methodologies Based on Actual Acquisition Cost (AAC) Plus a Professional Dispensing Fee. This intent of this white paper is to provide guidance to Medicaid agencies and fiscal agents in implementing new acquisition cost based reimbursement rules for covered outpatient drugs.

- The Medicaid Frequently Asked Questions Task Group sent a letter to the State of Michigan regarding implementation of Reject Code 831 prior to NCPDP’s recommended implementation date of October 15, 2017. After issuing the letter, the State of Michigan agreed to delay the implementation of the edit to coincide with NCPDP’s recommendation. In response to discussions on state Medicaid ORP (Ordering, Referring, Providing) requirements, the task group submitted DERF 001504/Emergency ECL 000225 requesting reject codes, submission clarification codes, and approved message codes specific to Medicaid enrollment status. The task group is also discussing state Medicaid ORP requirements and how to efficiently streamline
the validation process from state to state, specifically the standardization of enrollment file formats.

- The Medicare/Medicaid Claim Billing Issues Task Group was disbanded and any questions related to claim billing issues will be directed to the Medicaid Frequently Asked Questions Task Group.
- The Hospice Task Group reviewed the initial results of a survey developed for hospices, Part D plans and pharmacies impacted by Hospice processing to assess policy implementation and form usage and identify operational challenges. Based on the results of the survey, the task group drafted a letter to CMS conveying recommendations for improvement to the process. The letter is currently under review by the Standardization Committee.
- The Medicare Standardized Fraud, Waste and Abuse Training Attestation Task Group did not meet this quarter.
- The Medicare Prescription Drug Event (PDE) Task Group reviewed six new questions received this quarter, finalized five questions which were submitted to CMS for response and closed one question.
- The Medicare Financial Information Reporting Task Group finalized and published an update to the white paper, Part D Plans Moving Processors. The task group will continue review of the Plan to Plan (P2P) reconciliation process and review the layout for the reject reports and the addition of the Medicare Beneficiary Identifier (MBI).
- The Supplemental Payer Part D Reconciliation Standardization Task Group did not meet this quarter.
- The OIG Report OEI 05-12-00540 Task Group presented a revised version of the Adjudicated Program Type and Other Payer Adjudicated Program Type process flow diagram contained in the Recommendations for Use of the NCPDP Telecommunication Standard to Prevent Use of Copayment Coupons by Medicare Part D Beneficiaries and Applicability to other Federal Programs white paper. WG9 approved the revision. The white paper will be modified and submitted to the Standardization Committee for approval.
- The Medicare Part D FAQ Task Group presented six questions and responses which were approved for publication. The task group closed three questions and transferred three questions to other task groups.
- The Social Security Number Removal Initiative (SSNRI) Task Group developed and prioritized a list of questions related to the crosswalk file, impacted reports such as TRR, new MBI, auditing and PBM specific. After reviewing the “Advance Announcement of the May 2017 Software Release,” the task group was able to reduce the number of questions which will be submitted to CMS.
- The Coordination of Benefits Contractor (COBC)/Benefits Coordination & Recovery Center (BCRC) Task Group reviewed industry concerns and questions around the Plan Communication User Guide (PCUG) update from December 2016. The task group is drafting a communication to CMS to share concerns and questions for their consideration as they develop the memo for the industry.

New Business:
- The 2017-2018 Work Group Co-Chairs were announced.

Work Group 10 Professional Pharmacy Services

Old Business:
- An update was provided on the current status of the United States Pharmacopeia (USP) Allergy Project
• A report was provided which showed the NCPDP Recommendations for Dose Accumulation Monitoring in the Inpatient Setting: Acetaminophen Case Model white paper broke records on coverage and attention: AJHP attention rating was five times one of their most popular articles; and the Altmetrics score (which measures news media pickups, social media engagement, and other factors) ranked the paper in the top five percent of all published scholarly works including publications such as JAMA and the New England Journal of Medicine.

• WG10 2016 Year in Review was presented.

Task Group Reports:
• The MTM Communications Task Group was renamed MTM and Pharmacist Clinical Services Task Group. The task group goal was revised to add ‘other’ and ‘provided by pharmacists’: This task group is working with pharmacy professionals and other stakeholder organizations, to enable adoption, enhance existing, or develop new standards for electronic communications amongst and between payers and providers related to medication therapy management and other clinical services provided by pharmacists. The marketing document which calls attention to the various NCPDP standards and recommendation documents supporting pharmacist’s clinical services was published on the resource page and as a Hot Topic on the NCPDP.org Home Page. An outdated MTM billing document currently on the WG10 web page is being updated to reflect billing for all pharmacist provided clinical services.
• The mL White Paper Task Group met one time and established plans for updating the white paper. Depending on the nature of the changes, either the revised white paper or the executive summary is intended to be published in the American Journal of Hospital Pharmacists.
• An update was provided on the activities of the WG11 Specialty Requirements for ePrescribing Task Group.
• An update was provided on the C-CDA development work being pursued by the WG14 Consultant Pharmacist Interoperability Task Group.

New Business:
• Discussion occurred on potential needed updates to the Structured and Codified Sig Standard. Changes to the SCRIPT Standard and findings by the WG11 Implementation of Structured and Codified Sig Task Group as they have worked through examples and recommendations have revealed incongruities between the two standards. Identification of the needed changes will be done by the WG 11 task group and returned to WG 10 to update and ballot the Sig standard.
• The 2017-2018 Work Group Co-Chairs were announced.

Work Group 11 ePrescribing & Related Transactions

Ballots Adjudicated:
• Ballot WG110072 for the SCRIPT, Specialized and XML Standard is considered a valid ballot having received the required 60%+ of Consensus Group votes and 75%+ approval rating. One affirmative written comment was received. WG11 reviewed and categorized the comment. 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 WG110073 for the Formulary and Benefit Standard is considered a valid ballot having received the required 60%+ of Consensus Group votes and 75%+ approval rating. One affirmative written comment was received. WG11 reviewed and categorized the comment. 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 WG110074 for Operating Rules for the Formulary and Benefit Standard is considered a valid ballot having received the required 60%+ of Consensus Group votes and 75%+ approval rating. Only affirmative comments were received. WG11 reviewed and categorized the comments. 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 WG110075 for the Prescriber File Transfer Standard is considered a valid ballot having received the required 60%+ of Consensus Group votes and 75%+ approval rating. No comments were received. 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.

Old Business:
• Update on the next version of the SCRIPT Standard regulation was given.
• WG11 2016 Year in Review was presented.
• A small group will begin reviewing the documents related to WG11 found on the NCPDP website. Interested parties should contact tstrickland@ncpdp.org.

DERFs Reviewed:
• DERF 001509 was pended.
• DERF 001510 was approved.
• DERF 001511 was approved.
• DERF 001512 was approved with modifications.
• DERF 001513 was approved.
• DERF 001514 was withdrawn by the submitter.
• DERF 001515 was approved with modifications.
• DERF 001516 was approved.
• DERF 001517 was approved with modifications.
• DERF 001518 was pended.
• DERF 001519 was approved with modifications.
• DERF 001520 was approved.
• DERF 001521 was approved with modifications.
• DERF 001522 was pended.
• DERF 001523 was approved.

Task Groups:
• The Formulary and Benefit Task Group received approval to add guidance on the creation of alternatives to the Formulary and Benefit Recommendations document. They brought forth DERF 001523.
• The WG14 LTPAC ePrescribing Task Group continued looking into a notification type message to be sent to the facility/assisted living center for new prescription.
• The XML Task Group reviewed all submitted DERFs and provided recommendations for them.
• The NCPDP/HL7 Pharmacist Functional Profile Task Group did not meet this quarter. They are waiting on comments received from the MU EHR FP R2 ballot based on ONC Health IT Certification 2015 certification criteria, to be reconciled. Once the comments have been reconciled the task group will begin to evaluate how this FP will affect e-prescribing, immunization, eCare Plan, allergies and PDMP for pharmacy.
• The Electronic Prescribing Best Practices Task Group received approval for the following recommendations to be added to the SCRIPT Implementation Recommendations document:
  o New FAQ “Is it legal to use a Refill Response as a newly authorized prescription?”
  o Guidance for RxChange transactions
• The **REMS and ePrescribing Task Group** did not meet this quarter. Adam Kroetsch of the FDA provided an update on a document to be published on a Common REMS Platform. Based on the presentation the task group changed their name to **REMS Workflow to Transaction Task Group** with the purpose of creating comments on the REMS Platform document once it published and to identify gaps in the current standards.

• The **Electronic Prior Authorization Workflow to Transactions Task Group** continues working on a long-term care use case for a clinical pharmacist to submit an electronic prior authorization.

• The **Meaningful Use and NIST Test Methods for ePrescribing Task** did not meet this quarter and was disbanded.

• The **Implementation of Structured Sig Task Group** focused on validating the sig examples in the SCRIPT Standard v2016071. They brought forward DERF 001516.

• The **Specialty Requirements for ePrescribing Task Group** began looking into the creation of an intake form.

• The **Harmonization of Prescribing and Dispensing Units Task Group** did not meet this quarter. They brought forward DERF 001518.

• The **EPCS Renewal Request Task Group** received approval to change their name to **ePrescribing Regulatory Issues Task Group** and modify their scope as follows: This task group will work with Legislative and Regulatory agencies to resolve inconsistencies with proposed or passed legislation/regulation and the SCRIPT Standard. A response was received from the DEA on the NCPDP letter regarding RxRenewal. The task group will continue working towards a solution for the RxRenewal/RefillRequest transaction.

• The **SCRIPT Managed Updates Schedule Task Group** is reviewing both the proposal to update the NCPDP SCRIPT Standard on a more predictable basis and the implementation proposal for the NCPDP External Code List (ECL). The task group completed their review of the Data Dictionary and External Code List compared to the xml schema and brought forth DERFs 001512, 001513 and 001517. They are continuing their examination of a more regular process to request a new version of the SCRIPT Standard to be named in regulations.

• The **Biologics and Biosimilar Access and Traceability Task Group** continues to look at use cases for the sending and receiving of information using the NCPDP SCRIPT RxFill and medication history transactions. They brought forward DERF 001521.

• The **X12 270/271 version 7030 Review Task Group** did not meet this quarter as the X12 TR3 has not been released.

**New Business:**

• The 2017-2018 Work Group Co-Chairs were announced.

• The **Integrate S&I PDMP Guidance into SCRIPT Task Group** was formed with the purpose of taking the guidance created by the S&I Framework PDMP initiative and determining where the associated guidance should be integrated into SCRIPT.

• Received an update and request for participation from the **WG1 Morphine Equivalent Dosing Sub-Task Group** the scope of which is to promote standardization of the use of the NCPDP Telecommunication fields and ECL values for the implementation of MED edits or any other controlled substance clinical limitations.

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

**Old Business:**

• WG14 2016 Year in Review was presented.
• An industry update was provided highlighting the implemented portions of The Improving Medicare Post-Acute Care Transformation (IMPACT) Act of 2014 and elements of the final “2018 Medicare Part D Call Letter” which was released in April.

Task Group Reports:
• The **LTPAC Current Billing Issues Task Group** reviewed and discussed proposed modifications to the Long Term Care section of the Version D.0 Editorial Guide. The task group also reviewed content on the members’ only Work Group page of the NCPDP website.
• The **ePrescribing Task Group** is focusing its efforts on addressing needs for long-term and post-acute care settings in the SCRIPT Standard. The task group continues to be focused on a new Rx notification from either a pharmacy or prescriber to a facility which would populate the facility’s eMAR system.
• The **Consultant Pharmacy Interoperability Task Group** worked on the development of the recommendations document for use of the C-CDA Consult Note templates. Incorporation of the storyboards was initiated and the group began validation of the flows. Discussion of the physician/facility review, response and incorporation of the pharmacist’s recommendations into the goals and planned interventions in the resident’s care plan is underway.
• The **Best Available Evidence (BAE) Automation Task Group** reviewed the February 2017 CMS Memo Clarified BAE guidance about the automation of BAE through HPMS Complaints Tracking Module (CTM) effective March 2017. Plan sponsors are working towards implementation of this guidance.
• Received updates from the **WG1 Eligibility Verification Task Group, WG9 Hospice Task Group, WG9 Medicare Part D FAQ Task Group, and WG11 Prior Authorization Workflow-To-Transactions Task Group**.

New Business:
• The 2017-18 Co-Chairs for WG14 were announced.

Work Group 16 Property & Casualty/Workers Compensation

Old Business:
• The “Explanation on using the UCF for Compounds” document was revised and posted on the Universal Claim Forms Product page at [www.NCPDP.org](http://www.NCPDP.org).
• WG16 2016 Year in Review was presented.

Task Group Reports:
• The **Legislative/Regulatory Monitoring and Education Task Group** provided an update on a new process and tool to be used for tracking state regulatory and legislative initiatives affecting Workers’ Compensation programs. Many states are proposing adoption of formularies.
• 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 **Future Development Needs for WC/PC Task Group** will begin meeting once next versions of both NCPDP and relevant X12 TR3s are finalized to identify WC needs and develop strategies to meet those needs.

New Business:
• The 2017-2018 Work Group Co-Chairs were announced.
• Presentation by Gregg Lutz Director, Standards Development and Outreach, IAIABC on the current activities of the IAIABC and the need for collaboration with NCPDP

Work Group 45 External Standards Assessment, Harmonization and Implementation Guidance
Old Business:
- Industry updates were provided for WEDI, the SNIP Committee and X12.
- WG45 2016 Year in Review was presented.

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 approved by the work group to be added to the mapping document as an N for pharmacy. It will be published on the web site and submitted for inclusion in the next *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 meet to revise the implementation guide to reflect the change from BIN to IIN and prepare a DERF for August. Initial updates have been made.
- The **X12 7030 834/835 TR3 Review Task Group** did not meet and was placed on hiatus pending any needed follow-up review on the X12 834 and 845 TR3s.
- The **834/835 FAQ Task Group** did not meet. A question has been referred to them so a call or calls will be scheduled.
- The **DSMO Task Group** received no DSMO requests for review.
- The **DIR Task Group** presented documentation for the most straight forward DIR recoupment transaction. The work group approved the approach being used, so the task group will continue with additional use cases.
- An update on the **MC UDI Task Group** was provided.

New Business:
- The 2017-2018 Work Group Co-Chairs were announced.

**MC Maintenance and Control**

**DERFs/ECLs Reviewed:**

25 new and pended DERFs/ECLs were reviewed (see WG1, WG7, WG9 and WG11).
- DERF 001446 was approved with no additional modification.
- DERF 001500 was pended.
- DERF 001501/ECL 000222 was approved.
- DERF 001502/ECL 000223 was approved with additional modification.
- DERF 001503/ECL 000224 was pended.
- DERF 001504/ Emergency ECL 000225 was approved with no additional modification.
- DERF 001505/ECL 000226 was approved with no additional modification.
- DERF 001506/ECL 000227 was approved with no additional modification.
- DERF 001507 was approved.
- DERF 001508/ECL 000228 was denied with 3 in opposition.
- DERF 001509 was pended.
- DERF 001510 was approved.
- DERF 001511 was approved.
- DERF 001512 was approved with no additional modification with 42 in opposition.
- DERF 001513 was approved.
- DERF 001514 was withdrawn by the submitter.
- DERF 001515 was approved with no additional modification.
- DERF 001516 was approved.
- DERF 001517 was approved with no additional modification.
- DERF 001518 was pended.
• DERF 001519 was approved with no additional modification.
• DERF 001520 was approved.
• DERF 001521 was approved with no additional modifications.
• DERF 001522 was pended.
• DERF 001523 was approved.

Old Business:
• Received updates on:
  o Board of Trustees
  o HIPAA
  o SNIP Committee
• Update on Project Development Form 00042 Real-Time Prescription Benefit Standard,
  o The Real Time Prescription Benefit Inquiry (RTPBI) Task Group was disbanded.
  o Created the Real Time Prescription Benefit Standard Task Group which will take the
    use cases developed by the RTPBI task group and develop a new single standard which
    will be supported by two syntaxes (SCRIPT and Telecommunication).
• Update on Project Development Form 00043 PDMP & HIT Integration Initiative.
  o A new task group was created in WG11.
• MC 2016 Year in Review was presented.

Task Groups:
• The Education/Legislation and Regulations Task Group did not meet this quarter.
• The Unique Device Identifier (UDI) Task Group reviewed DERF 001486 for modification to
  Section 3.1 of the NCPDP Product Identifier Standard. The task group also created a FAQ for the
  Version D Editorial Guide which explains how to convert a Unique Device Identifier to an NCPDP
  11 digit identifier.
• The Real Time Prescription Benefit Inquiry Task Group did not meet this quarter and was
  disbanded.
• The API Task Group received approval for their proposed presentation at NCPDP’s Annual
  Conference. “What You Need to Know About Connectivity: APIs and More” was one of the track
  sessions on May 10th. The task group plans to document current API use and develop “best
  practices” recommendations.
• The Emergency Preparedness Task Group reviewed the NCPDP.org website to ensure all
  Emergency Preparedness information was current and accurate. The task group completed
  updates to the Emergency Preparedness Information Document.
• The X12 TR3 Comment Consolidation Task Group completed review of the 007030X323 Health
  Care Claim: Professional (837P) TR3 and provided a total of 14 comments, most directing to
  updated values in our ECL.
• The ECL Task Group updated its Scope and Goals. The task group created a draft of best
  practices for ECL and Emergency ECL DERF submission. They reviewed all ECL DERFs submitted
  for May Work Group to ensure suggested values and/or changes were complete and
  appropriate.
• The Specialty Task Group will provide a monthly update to the Specialty Pharmacy community
  on NCPDP activity either specifically targeting specialty workflows or work that may
  impact/benefit specialty stakeholders. The task group created content for www.ncpdp.org to
  assist visitors with finding specialty-related activity and for the Collaborative Workspace
  summarizing other task groups.

New Business:
• The attendees received recaps of each Work Group’s activities.
• Created the **2D Barcode Implementation Task Group** which will work with manufacturers to determine how and when product packaging is being changed to comply with the Drug Supply Chain Security Act (DSCSA).

• New Project Development Form 000044 Dispensed Medication Reporting Standard was pended with two in opposition until the August 2017 Work Group meeting.

• New Project Development Form 000045 Enhancing Standards for Patient Equality was approved with the recommendation to assign to a new task group in MC. Two members have volunteered to serve as co-leads of the task group.

• The 2017-2018 Work Group Co-Chairs were announced.

• Adam Kroetsch of the FDA gave a presentation on the FDA Common REMS Platform Document. The FDA will be issuing a “platform needs assessment” to help them identify REMS activities for which standards should be addressed; determine which information needs to be communicated to help carry out these activities and look for opportunities to leverage existing standards.