August 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

Ballots Adjudicated:

- **Ballot WG010075R** 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. No new comments were received. 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 001503/ECL 000224 was recommended for MC to approve.
- DERF 001524/ECL 000232 was recommended for MC to pend.
- DERF 001525/ECL 000233 was recommended for MC to pend.
- DERF 001526/ECL 000234 was recommended for MC to pend.
- DERF 001527/ECL 000235 was recommended for MC to approve as modified.
- DERF 001528 was approved with modifications.
- DERF 001529 was approved with modifications.
- DERF 001530/ECL 000236 was recommended for MC to approve.
- DERF 001531/ECL 000237 was recommended for MC to approve.
- DERF 001532/ECL 000238 was recommended for MC to approve as modified.
- DERF 001533/ECL 000239 was recommended for MC to approve as modified.
- DERF 001534/ECL 000240 was recommended for MC to approve as modified.
- DERF 001535/ECL 000241 was recommended for MC to approve as modified.
- DERF 001536/ECL 000242 was recommended for MC to approve.
- DERF 001537 was approved.

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.
  - 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 processes.
    - NCPDP has asked the industry to provide input on the implementation timeframe before the NPRM is published.
    - NCPDP has 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: The new target date 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 a specific timeframe cannot be provided.

o 04/11/2016 Update from NSG: The request is still in the rule making stage, so at this point CMS cannot provide a formal comment on its status.

o 07/25/2016 Update from NSG: Additional questions were received and documentation from 2010, 2012 and 2013 was provided to answer the questions.

o 10/14/2016 Update from NSG: This policy is in the rulemaking stage, there should be an NPRM out by Mid-2017.

o 02/2017: Still tracking to a mid-2017 date.

o 05/2017: Summer 2017

o 08/2017: Still tracking to a late summer 2017 NPRM.

Task Groups:

- The Telecommunication FAQ Task Group finalized five questions. The response to the question, ‘Should the diagnosis count be reduced to 2 and harmonized with the Script Standard?’ was approved for publication in the Version D.0 Editorial Document.

  - The Morphine Equivalent Dosing (MED) Sub-Task Group presented the four business cases reviewed and the recommendations from the group. The work group members agreed with the direction of new MED and opioid utilization management specific reject and drug utilization review codes.

- The Coordination of Benefits Task Group reviewed four FAQs which resulted in two questions being added to the Version D.0 Editorial Document and two DERFs being submitted. The task group also submitted two additional DERFs which resulted from their ECL value review. The task group plans to finalize examples, complete pending FAQs, and draft additional guidance.

- The Information Reporting Problems Task Group reviewed three approaches for multiple N1’s for a single Part D claim as well as N transaction adjustments. The group will continue to review and revise the current Part D COB white paper and complete the work on the formatting of the FAQ document. The group also reactivated the SPAP/ADAP sub-task group to review documents and processes for possible modifications based upon the CMS released memo announcing the new HPMS module.

- The Post Adjudication Task Group did not meet this quarter.

- The Definition of a Valid Prescriber Task Group had nothing to report this quarter.

- The Part D Supplemental Payment Reporting Task Group reviewed the CMS Transaction Facilitator Memo, revised the Nx Reject Code document and reviewed the situation on file with a missing group separator.

- The Eligibility Verification Enhancements Task Group did not meet this quarter.

- The Benefit Integration Task Group continues to work on the benefit synchronization flat file and XML file layout.

- The Standardized Subrogation Task Group did not meet this quarter.

- The Usage of Submission Clarification Codes (SCC) Task Group reviewed the usage of SCC – 1 (No override). The group will create transition mapping from version D.0 to F2 and update any references to the SCC in the F2 Editorial Guide/Best Practices document.

- The Compound Task Group reviewed and accepted the WG1 Telecommunication FAQ TG recommended modification to the version D.0 Editorial Guidance document for DUR Level of Effort field values 16-22. The group plans to develop version F2 Editorial Guidance for Compound Level of Complexity, Preparation Environment and Preparation Environment Event Code and transition guidance for Compound Level of Complexity.
• The **Upstream Reporting of Copay Assistance Task Group** is creating a paper to document the results of the task group research; not to provide recommendations or solutions. The research is exploring options for providing a record of payment made by supplemental payers in order for primary/prior payers to maintain accurate accumulator values.

**New Business:**
• The 2017 - 2018 Work Group 1 Scope and Goals were reviewed and approved as modified.

**Work Group 2 Product Identification**

**DERFs/ECLs Reviewed:**
• DERF 001538 was approved as modified.

**Old Business:**
• Tammy Powell of the National Library of Medicine (NLM) provided an update on RxNorm and DailyMed.

**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 three new QUIC form: (see final adjudication determination by the WG in this report).
    • QUIC #201702 Brineura (cerliponase alpha) 68135-0811-02
    • QUIC #201703 Symjepi 38739-200-01 and 38739-200-02
    • QUIC #201704 AVXS-101
  • Reviewed six products to determine the billing unit and package size.
  • For April, May and June 2017, 2,448 new and one 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 13 NDCs with discrepancies.
  • Drafted a letter template to formalize the notification to manufacturers of a response to a QUIC form. The work group approved the letter template.
  • Submitted DERF 001538 to add a new FAQ and modify an existing FAQ in the Billing Unit Standard.
• The **SPL REMS Requirements Task Group** had no new activity to report this quarter.
• 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** sent letters to Dr. Scott Gottlieb, FDA Commissioner, and to Dr. Donald Rucker, National Coordinator for Health Information Technology. The letters offered congratulations on their recent appointments and shared NCPDP’s letter in response to the FDA’s January 2017 Guidance “Nonproprietary Naming of Biological Products”.
• The **Application of the Billing Unit Standard Clarification Task Group** completed review and categorization of products which were subjects of QUIC forms. The task group is consolidating categories related to the exceptions in preparation for drafting a guidance document.
• The **WG2/WG11 Harmonization of Prescribing and Dispensing Units Task Group** had no new activity to report this quarter.
• Received an update from the **WG11 REMS Workflow to Transactions Task Group**.
• Received an update from the **MC 2D Barcode Implementation Task Group**.

**New Business:**

**New QUIC Form Review:**

- QUIC #201702 Brineura (cerliponase alpha) 68135-0811-02
  
  **BU = EA.** An exception was made to the BUS because of patient safety, hospital administration and unique packaging.

- QUIC #201703 Symjepi 38739-200-01 and 38739-200-02
  
  **Billing Unit = EA, Package size = 1 (for NDC ending in -01) and 2 (for NDC ending in -02) per BUS sections 4.3, 5.6 and 7.21.**

- QUIC #201704 AVXS-101
  
  **BU = EA (kit) with a quantity of 1 per section 5.5.1 of the BUS.**

- Beth Rader, Director, BioMarin gave a presentation about their product, Brineura. It is the first drug to be administered via intraventricular infusion and is used to slow the loss of ambulation in symptomatic pediatric patients ages 3 and older with late infantile neuronal ceroid lipofuscinosis Type 2 (CLN2) disease.

- The 2017 - 2018 Work Group 2 Scope and Goals were reviewed and approved.

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

**DERFs/ECLs Reviewed:**

- DERF 001539 was approved.
- DERF 001540 was approved.
- DERF 001541 was approved.
- DERF 001542 was approved with modifications.

**Task Groups:**

- The **Medical Rebate Standard Task Group** did not meet this quarter.
- The **Medicaid Drug Rebate Program Task Group** did not meet this quarter.
- The **Manufacturer Rebate Standard Task Group** submitted three DERFs which requested modifications to the Manufacturer Rebate Standard. Future task group work includes: develop Formulary and Benefit examples for the Manufacturer Rebate Standard Implementation Guide, discuss merging the Medical Rebate Standard with the Manufacturer Rebate Standard and continue the discussion of value-based rebates and identification of use case(s).
  
  - **Specialty Pharmacy Data Exchange Sub-Task Group** finalized the Specialty Pharmacy Data Reporting Standard Implementation Guide which is intended to standardize the data submitted by Specialty Pharmacy to drug manufacturers and others to support programs and agreements between the parties. Submission of DERF 001542 requesting the new standard was approved with modifications.

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

**New Business:**

- The 2017- 2018 Work Group 7 Scope and Goals were reviewed and approved as modified.
- **WG9 340B Task Group Update** - In response to the 340B Stakeholder Action Group held in April 2017, the WG9 340B Task Group is reviewing the next steps and what role NCPDP plays in improving on existing standards, developing new standards, etc. A grid was developed for the purpose of identifying the stakeholders, approaches, opportunities and drawbacks. The review process began with the State of Oregon Batch File approach. A batch file is exchanged between the 340B covered entity side (covered entity, contract pharmacy, contracted administrator, etc.)
and the State of Oregon’s rebate vendor in order to identify the transactions. This approach connects the end points to the transaction leaving out anyone in the middle. The task group discussed whether it would be feasible for NCPDP to take this model and make it more general for use outside of the State of Oregon. While it seems to be working well in Oregon, it is limited and it does not seem to be appropriate at this time for NCPDP to pursue any work on this model. However, there may be an opportunity to provide guidance or best practices within the existing 340B Information Exchange Reference Guide. Review of the various approaches will continue next quarter.

- Regulatory Product Tracing Report – The scope of the Maintenance and Control 2D Barcode Implementation Task Group is to “work with manufacturers to determine how and when product packaging is being changed to comply with the Drug Supply Chain Security Act (DSCSA).” The task group is writing a white paper to identify issues and provide background details as well as recommendations surrounding the requirement for manufacturers to affix or imprint the new product identifier to each package.

Work Group 9 Government Programs

DERFs/ECLs Reviewed:
- 001543/ECL 000243 was approved.
- 001544/ECL 000244 was approved with modifications.

Task Groups:
- The Prescription Drug Monitoring Program (PDMP) Task Group reviewed Controlled Substance Reporting (CI-CII) requirements as a standalone standard to supplement the B1 real-time reporting to the PDMP Facilitator as outlined in the white paper, NCPDP’s Recommendations for an Integrated, Interoperable Solution to Ensure Patient Safe Use of Controlled Substances. New fields from the Telecommunication Standard vF2 and fields required by states currently or in the future were added to the document. This work will continue next quarter. The task group also reviewed the State PMP Tracking Document and updated PMP information for the following states: Alaska, Arizona, Colorado, Florida, Georgia, Kentucky, Massachusetts, Maine, Mississippi, North Dakota, Nebraska, New Hampshire, Rhode Island, South Carolina, Texas and Wyoming.
- The 340B Task Group, in response to the 340B Stakeholder Action Group held in April 2017, is reviewing the next steps and what role NCPDP plays in improving on existing standards, developing new standards, etc. A grid was developed for the purpose of identifying the stakeholders, approaches, opportunities and drawbacks. The review process began with the State of Oregon Batch File approach. A batch file is exchanged between the 340B covered entity side (covered entity, contract pharmacy, contracted administrator, etc.) and the State of Oregon’s rebate vendor in order to identify the transactions. This approach connects the end points to the transaction leaving out anyone in the middle. The task group discussed whether it would be feasible for NCPDP to take this model and make it more general for use outside of the State of Oregon. While it seems to be working well in Oregon, it is limited and it does not seem to be appropriate at this time for NCPDP to pursue any work on this model. However, there may be an opportunity to provide guidance or best practices within the existing 340B Information Exchange Reference Guide. Review of the various approaches will continue next quarter.
- The Government Programs Encounter Reporting Standards Task Group completed an initial field-by-field review of the use of the Post Adjudication Standard and the Telecommunication Batch Standard within existing State Medicaid encounter file layouts. The task group is currently reviewing a sub-set of fields that were set aside for more focused discussions. Future work includes: evaluate encounter file layouts against the master field layout to determine additional
needs or alternate field uses for consideration in the proposed standard; evaluate new fields proposed in the standard and the impact on the proposed standard and/or timeframes. The task group has need of participants from State Medicaid programs or vendors that support State Medicaid programs.

- 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 published version 1.2 of the white paper, 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 based on feedback from Wisconsin Medicaid on FAQ #3. The task group also wrote a letter to the State of New York regarding their guidance for utilizing Dispense as Written (DAW)/Product Selection Code (408-D8) values when dispensing “brand name drug when less expensive than generic.” The white paper was provided to the attendees of the Southern Medicaid Pharmacy Administrators Association in June and will be the subject of a presentation during the 2017 Medicaid Enterprise Systems Conference in August.
- The Medicaid Frequently Asked Questions Task Group decided to draft a letter to CMS requesting to delay the enforcement date of the Medicaid Mega Rule requirements for Medicaid ORP (Ordering, Referring, Providing) until 1/1/2020. The task group is requesting non-enrolled Medicaid provider metrics from Medicaid agencies and processors in order to document the impact to pharmacy/payers and patients. 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 Hospice Task Group is reviewing educational opportunities for Hospice Providers and Medicare Part D Plans/Processors as a result of the Hospice survey conducted in December 2016. The task group will submit a request to NCPDP’s Education Advisory Group for the scheduling of two educational webinars. Future work includes content development for the webinar and further discussion regarding automation of the reconciliation process between Hospice and Payer/Processors in collaboration with CMS.
- 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 and discussed eight questions this quarter. Six new questions were received. One question was finalized and submitted to CMS for response. Responses were developed for four questions which were closed.
- The Medicare Financial Information Reporting Task Group reviewed modifications to the Daily Cumulative FIR Aging Report Guide to include Medicare Beneficiary Identifier (MBI). Next quarter the task group will review the sample file layout with the inclusion of the MBI.
- The Supplemental Payer Part D Reconciliation Standardization Task Group did not meet this quarter.
- The OIG Report OEI 05-12-00540 Task Group reviewed CMS’s response to the white paper, 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. The white paper was updated to reference the response from CMS. The task group also submitted DERF 001544/ECL 000244 requesting a new Reject Code to be used when Other Adjudicated Program Type is unknown.
- The Medicare Part D FAQ Task Group sent a letter to HHS/DEA recommending a delay in the enforcement of Section 702 Partial Fills of Schedule II Controlled Substances of CARA until after
publishing a Final Rule adopting the revised NCPDP Telecommunication Standard Version D.0 (which would permit reporting of Quantity Prescribed). The task group also submitted DERF 001543/ECL 000243 which requests a modification of the value limitation for Reject Code 828, “Plan/Beneficiary Case Management Restriction in Place”, to allow its use for other lines of business. One question and proposed response was submitted to WG9 for approval – POS Edits for Pharmacy Service Type.

- The **Social Security Number Removal Initiative (SSNRI) Task Group** received a request from the NCVHVS standards subcommittee to identify any concerns related to the SSN Replacement project and whether no end-to-end testing is an issue. The task group will draft a response next quarter. The task group identified the data elements in the NCPDP transactions which currently carry the HICN and thus could be impacted by the SSNRI/MBI. The task group invites Medicaid participation in the task group to facilitate questions/concerns from the Medicaid space. The task group will continue to address industry questions and concerns.

- The **Coordination of Benefits Contractor (COBC)/Benefits Coordination & Recovery Center (BCRC) Task Group** sent an e-mail to CMS regarding which date Part D plans should use (Effective Date of Other Drug Coverage vs. Coordination of Benefits effective date) and the challenges plans are having using the Effective Date of Other Drug Coverage in BCRC as the PCUG recommends. CMS is researching the identified concerns.

**New Business:**
- The 2017 – 2018 Work Group 9 Scope and Goals were reviewed and approved as modified.

**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** was renamed **MTM and Pharmacist Clinical Services Task Group**. The task group was given an update on the eCare Plan Innovation Grant pilot which now has provided training for 23 vendors and is routinely providing care plans to Community Care of North Carolina. The group is currently updating the MTM billing document located on the WG10 web page to provide guidance on billing for all pharmacist-provided clinical services. Once the HL7 Pharmacist eCare Plan C-CDA and FHIR ballots close, the group will work on resolution of comments.

- The **mL White Paper Task Group** met twice 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 Specialty related task groups in WG7, WG11 and Maintenance and Control.

- The **WG14 Consultant Pharmacist Interoperability Task Group** has completed the guidance document for use of the C-CDA Consult Note template by consultant pharmacists for documenting and sharing their recommendations electronically with providers.

**New Business:**
- The 2017 - 2018 Work Group 10 Scope and Goals were approved.
- Lisa Schwartz, RPh, PharmD, Senior Director of Professional Affairs with the National Community Pharmacists Association provided a presentation on Pharmacists Provider Status.

**Work Group 11 ePrescribing & Related Transactions**
DERFs/ECLs Reviewed:

- DERF 001509 was pended.
- DERF 001518 was approved as modified.
- DERF 001522 was withdrawn by the submitter.
- DERF 001545 was approved.
- DERF 001546 was approved.
- DERF 001547 was approved.
- DERF 001548/ECL 000245 recommended approval at MC.
- DERF 001549 was approved.
- DERF 001550 was approved.
- DERF 001551 was approved.
- DERF 001552 was approved as modified.
- DERF 001553 was approved.
- DERF 001554/ECL 000246 recommended approval at MC.
- DERF 001555 was approved.

Old Business:

- Update on the next version of the SCRIPT Standard regulation was given.
- Update on electronic prescribing of controlled substance prescriptions was given.

Task Groups:

- The **Biologics and Biosimilar Access and Traceability Task Group** continue to look at use cases for the sending and receiving of information using the NCPDP SCRIPT RxFill and medication history transactions. They received approval to add guidance to the *SCRIPT Implementation Recommendations* document for triggering of biosimilars and biologics.

- The **Electronic Prescribing Best Practices Task Group** brought forth DERFs 001549, 001550 and 001555. Received approval to change the task groups name to Electronic Prescribing Recommendations Task Group. Received approval for updates to the *SCRIPT Implementation Recommendations* document for numeric representation, modifications to verbiage in the RxChange section and a new FAQ on how to identify a hospital in a medication history request.

- The **ePrescribing Regulatory Task Group** continued discussion on the response received from the DEA on the NCPDP letter regarding RxRenewal and will continue working towards a solution for the RxRenewal/RefillRequest transaction.

- The **Formulary and Benefit Task Group** began looking at options to link alternative to specific indications or diagnosis.

- The **Harmonization of Prescribing and Dispensing Units Task Group** did not meet this quarter. They received approval to modify the verbiage in the *SCRIPT Implementation Recommendations* document for QuantityUnitOfMeasure.

- The **Implementation of Structured Sig Task Group** focused on validating the sig examples in the SCRIPT Standard v2016071.
  - The **Structured And Codified Sig Format Implementation Guide Analysis Sub-Task Group** began identifying probable changes for the *Structured and Codified Sig Format Implementation Guide* (housed in WG10).

- The **Integrate S&I PDMP Guidance into SCRIPT Task Group** began the process of formulating a plan for their work.

- The **NCPDP/HL7 Pharmacist Functional Profile Task Group** did not meet this quarter. The task group will meet once more to review the medication and care plan related requirements and criteria of the adjudicated HL7 Meaningful Use EHR Functional Profile R2 ballot. Once verified,
the task group will recommend use of the Meaningful Use EHR Functional Profile in lieu of a separate pharmacist-pharmacy specific profile.

- The **Prior Authorization Workflow to Transactions Task Group** continues working on the use case for a clinical pharmacist to submit an electronic prior authorization as well as a new PANOtification transaction.
- The **REMS Workflow to Transactions Task Group** began reviewing the *REMS Platform Standards Initiative Needs Assessment* document which was recently released by the FDA.
- The **SCRIPT Managed Updates Schedule Task Group** brought forth proposals to update the NCPDP SCRIPT Standard on a more predictable basis and a proposal to separate the ecl.xsd from the remainder of the schema allowing for an annual update of NCPDP External Code List (ECL). The both passed.
- The **Specialty Requirements for ePrescribing Task Group** continued looking into the creation of an intake form.
- The **WG14 LTPAC ePrescribing Task Group** reviewed pended DERF 001518 making modifications and brought forth DERFs 001545, 001546, 001547 and 001548/ECL 000245.
- The **X12 270/271 version 7030 Review Task Group** did not meet this quarter as the X12 TR3 is expected to be released in September 2017.
- The **XML Task Group** reviewed all submitted DERFs and provided recommendations for them.

**New Business:**
- The 2017 - 2018 Work Group 11 Scope and Goals were approved as modified.

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

**Task Groups:**
- The **LTPAC Current Billing Issues Task Group** continued to review and discuss proposed modifications to the Long Term Care section of the Version D.0 Editorial Guide. The task group submitted DERF 001535/ECL 000241 to update the description of the Submission Clarification Code ECL value of 4 (Lost Prescription) to incorporate the term “damaged”. The ECL DERF was approved as modified in WG1 Telecommunication and approved with no further modifications in MC Maintenance and Control.
- The **ePrescribing Task Group** is focusing its efforts on addressing needs for long-term and post-acute care settings in the SCRIPT Standard. They submitted DERFs 001545, 001546, 001547 and 001548/ECL 000246 which were reviewed and approved by WG11 ePrescribing and Related Transactions and MC Maintenance and Control.
- The **Consultant Pharmacy Interoperability Task Group** completed drafting a guidance document for use of the C-CDA Consult Note to communicate consultant pharmacist observations and recommendations, along with the prescriber’s response to the recommendations. The guidance document was presented to WG14 and approved.
- The **Best Available Evidence (BAE) Automation Task Group** discussed feedback on the automation of BAE through HPMS Complaints Tracking Module (CTM) which was mandatory as of June 1, 2017. No issues were reported and plan sponsors noted an improvement in turn-around time. The task group was disbanded.
- 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 - 2018 Work Group 14 Scope and Goals were reviewed and approved.
Work Group 16 Property & Casualty/Workers Compensation

Old Business:
- An update on IAIABC activities was provided.
  - A new task group was formed to look at code sources used in state reporting with a goal of producing a reference document of the name, source and URL for the code sets.
  - Another task group is beginning to update the Model Billing Rule and Companion Guide.
  - The Tennessee Companion Guide is under review.
- The IAIABC Annual Meeting will be held in Portland, Oregon October 2-5, 2017.

Task Groups:
- The Legislative/Regulatory Monitoring and Education Task Group provided an update on state regulatory and legislative initiatives affecting Workers’ Compensation programs. Several states including California, Montana, and Nebraska are proposing or adopting formularies.
- The Billing and State Reporting Task Group provided an update regarding states moving to adopt regulations for e-billing including New Jersey and Tennessee and letters to the states.
- The Future Development Needs for WC/PC Task Group did not meet this quarter. This 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. Members were asked to submit any known issues for consideration.

New Business:
- The 2017 - 2018 Work Group 16 Scope and Goals were approved as modified.

Work Group 45 External Standards Assessment, Harmonization and Implementation Guidance

DERFs/ECLs Reviewed:
- DERF 001556 was approved with modifications.
- DERF 001557/ECL 000247 was recommended for MC to approve as modified.

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

Task Groups:
- The Document Revision Task Group did not meet. The two new CARCs and one added usage note which were approved by the Code Committee at the June meeting did not impact the pharmacy industry. The updated mapping document was presented and approved by the work group. 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 met twice. They completed modifications to the implementation guide to reflect the change from BIN to IIN as well as minor editorial changes. Similar changes were also made to the NCPDP Health Care Identification Card Fact Sheet and Pharmacy and/or Combination ID Card and the NCPDP Pharmacy ID Card Data Elements Mapped to ASC X12 005010X279 Health Care Eligibility Benefit Inquiry and Response (270/271) Fields documents. DERFs were submitted and approved for the implementation guide revisions and for ECL updates to add code IN for IIN to the valid values of element A35.
- 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 835 TR3s.
- The 834/835 FAQ Task Group did not meet this quarter. 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 examples of transactions representing positive and negative claim level DIR taken on the original claim and retroactively, including partial repayment of an assessed fee. The work group approved the approach being used, so the task group will continue with additional use cases.

New Business:
• The 2017 – 2018 Work Group 45 Scope and Goals were approved.

**MC Maintenance and Control**

**DERFs/ECLs Reviewed:** 34 new and 4 pended DERFs/ECLs were reviewed (see WG1, WG2, WG7, WG9, WG11 and WG45).

- DERF 001500 was pended.
- DERF 001503/ECL 000224 was approved.
- DERF 001509 was pended.
- DERF 001518 was approved with no further modifications.
- DERF 001522 was withdrawn by the submitter.
- DERF 001524/ECL 000232 was pended.
- DERF 001525/ECL 000233 was pended.
- DERF 001526/ECL 000234 was pended.
- DERF 001527/ECL 000235 was approved with no further modifications.
- DERF 001528 was approved with no further modifications.
- DERF 001529 was approved with no further modifications.
- DERF 001530/ECL 000236 was approved.
- DERF 001531/ECL 000237 was approved.
- DERF 001532/ECL 000238 was approved with no further modifications.
- DERF 001533/ECL 000239 was approved with no further modifications.
- DERF 001534/ECL 000240 was approved with no further modifications.
- DERF 001535/ECL 000241 was approved with no further modifications.
- DERF 001536/ECL 000242 was approved with no further modifications.
- DERF 001537 was approved.
- DERF 001538 was approved with no further modifications.
- DERF 001539 was approved.
- DERF 001540 was approved.
- DERF 001541 was approved.
- DERF 001542 was approved with no further modifications.
- DERF 001543/ECL 000243 was approved.
- DERF 001544/ECL 000244 was approved with no further modifications.
- DERF 001545 was approved.
- DERF 001546 was approved.
- DERF 001547 was approved.
- DERF 001548/ECL 000245 was approved.
- DERF 001549 was approved.
- DERF 001550 was approved.
- DERF 001551 was approved.
- DERF 001552 was approved with no further modifications.
- DERF 001553 was pended.
- DERF 001554/ECL 000246 was approved.
• DERF 001555 was approved.
• DERF 001556 was approved with no further modifications.
• DERF 001557/ECL 000247 was approved with no further modifications.

Old Business:
• Received updates on:
  o Board of Trustees
  o HIPAA
• Pended Project Development Form 00044
  o Approved with the recommendation to assign to a new task group in WG11 with an invite to WG1 to participate.
• Update on Project Development Form 00045
  o Created the Gender Transition Task Group in MC which will review NCPDP standards that contain sex/gender fields and ensure they accommodate individuals who are transitioning or have transitioned genders.

Task Groups:
• The Education/Legislation and Regulations Task Group submitted comments on 2017 ONC Proposed Interoperability Standards Measurement Framework.
• The Unique Device Identifier (UDI) Task Group created a FAQ to address the question of what Product Service ID qualifier value is used for a converted UDI-DI. The task group was disbanded.
• The Real Time Prescription Benefit Standard Task Group completed the mapping of the data elements of the Request transaction to data elements in Telecommunication and SCRIPT standards. Mapping of the data elements of the Response transaction was initiated. The task group agreed upon their scope and goals.
• The API Task Group aided in the development of the well-received “What You Need to Know About Connectivity: APIs and More” presentation at NCPDP’s Annual Conference. The task group outlined desired content related to APIs and deferred significant work until after August Work Group.
• The Emergency Preparedness Task Group did not meet this quarter.
• The X12 TR3 Comment Consolidation Task Group joined WG 45 in discussion of the X12 7030 group.
• The ECL Task Group is developing best practices for ECL and Emergency ECL DERF submission. They reviewed all ECL DERFs submitted for August Work Group to ensure suggested values and/or changes were complete and appropriate.
• The Specialty Task Group posted content to www.ncpdp.org to assist visitors with finding specialty-related activity. The task group added WG11 Prior Authorization Workflow to Transactions Task Group to the list of monthly updates to the Specialty Pharmacy community on NCPDP activity.
• The 2D Barcode Implementation Task Group is developing a white paper with pharmacy specifics to ensure a smooth transition from the UPC-A Linear Bar Code to the 2D Bar Code as indicated in the Drug Supply Chain Security Act (DSCSA). The task group agreed upon their scope and goals.

New Business:
• The attendees received recaps of each Work Group’s activities.
• New Project Development Form 000046 was approved with the recommendation to assign to a new task group in WG9.
• The 2017 - 2018 MC Work Group Scope and Goals were reviewed and approved.