February 2019 Work Group Recaps:


Work Group 1 Telecommunication

DERFs/ECLs Reviewed:
- DERF 001636 was pended.
- DERF 001662 was approved with modifications.
- DERF 001663/ECL 000286 was recommended for MC to approve.

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.
  - 01/21/2016 Update from NSG: This policy item is undergoing the rulemaking process, and at this time a specific timeframe cannot be provided.
  - 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.
  - 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: This policy is in the rulemaking stage, there should be an NPRM out by Mid-2017.
  - 02/2017: Still tracking to a mid-2017 date.
  - 08/2017: Still tracking to a late summer 2017 NPRM.
  - 05/2018: In HHS Clearance - Sometime in 2018.
  - 10/2018: Administrative Simplification: Update of Retail Pharmacy Standards (CMS-0055-P) – NPRM scheduled for November 2018

Work Group Recaps
01/2019 – We have an NPRM!! - [https://www.govinfo.gov/content/pkg/FR-2019-01-31/pdf/2019-00554.pdf](https://www.govinfo.gov/content/pkg/FR-2019-01-31/pdf/2019-00554.pdf) The NPRM requires covered entities to use the Quantity Prescribed (460-ET) field in the August 2007 Version of the NCPDP Telecommunication Standard Version D.0 for retail pharmacy transactions for Schedule II drugs. Comments are due on April 1, 2019. The NCPDP SNIP Committee will be formulating NCPDP’s comments.

Task Groups:

- **The Telecommunication FAQ Task Group** reviewed two questions, one DERF and heard two presentations. The updated opioid guidance to the *Telecommunication Version D and Above Questions, Answers and Editorial Updates* document was approved with modifications.
  - The **Morphine Equivalent Dosing (MED) Sub-Task Group** addressed a question and reviewed member opioid/benzodiazepine “lock-in” scenarios, updated the opioid guidance for the claim request/response fields and reviewed Medicare Part D Opioids and Benzodiazepines Requirements. The group will revisit the business case where a member must try a short-acting opioid before a long acting opioid and answer questions. The sub-task group will become a task group with the name of WG1 Clinical & Safety Edits Task Group.
  - The **FAQ Controlled Substance Guidance Update Sub-Task Group** continues to track certain state-level controlled substance legislation and regulations and create letters to states requiring proration on controlled substance incremental (partial) fills. Questions regarding prorated copay for controlled substance incremental fills will be routed to the parent task group. The group created a DERF to lengthen the Scheduled Prescription Number ID field. The group continues to develop D.0 billing scenarios and examples for CII’s. The group plans to complete the existing guidance white paper.
- The **Coordination of Benefits Task Group** reviewed and answered two questions. The group will finalize Telecommunication Standard vF2 guidance for populating the financial fields for OPAP COB claims, review current tax guidance in vF2 and will begin developing transition guidance and educational materials. The question related to the OPPRA (352-NQ) field length greater than other COB financial fields was approved with modifications and will be incorporated into the *Telecommunication Version D and Above Questions, Answers and Editorial Updates* document.
- The **Information Reporting Problems Task Group** continues to review the application of negative PLRO in non-EGWP single payer. Examples of LIS and non-LIS examples were sent to CMS. The group continues to review and revise the *Overview of the Medicare Part D Prescription Drug Coordination of Benefits (COB) Process* white paper. The SPAP/ADAP Data Exchange Sub-Task Group was disbanded. The review of the *NCPDP Best Practices Guide for Managing Med D OHI* continued based on feedback from the Standardization Committee. The group continues to work with CMS on resolution/guidance for negative PLRO in non-EGWP scenarios.
- The **Post Adjudication Task Group** did not meet this quarter.
- The **Definition of a Valid Prescriber Task Group** reviewed open areas of concern with the CMS 4182-F Precluded Provider Requirements, assessed the need for a Provider Taxonomy Code for Assistant Physician and reviewed the WG11 SCRIPT Implementation Recommendation task group recommendations for the new MessageRequestCode, MessageRequestSubCode and ResponseReasonCode in the RxChange Prescriber Authorization workflow. The group began development of a Prescriber DEA Situation Fact Sheet for states with conflicting or unclear language on the use of the Prescriber DEA (as a result of DERF 1616). The task group will determine the applicable updates to the *Telecommunication Version D and Above Questions, Answers and Editorial Updates* document to remove references to Medicare Enrollment and incorporate applicable Precluded Provider guidance, will draft a DERF for new response fields and an ECL DERF
for Additional Message Information Qualifiers (132-UH) that will identify the Exclusion/Preclusion file source and Effective Date and will complete two FAQs.

- The Eligibility Verification Enhancements Task Group did not meet this quarter.
- The Benefit Integration Task Group continues to modify the Benefit Integration Implementation Guide to include Benefit Synchronization where appropriate.
- The Standardized Subrogation Task Group did not meet this quarter.
- The Usage of Submission Clarification Codes (SCC) Task Group did not meet this quarter.
- The Compound Task Group did not meet this quarter.
- The Expand Dollar Fields Task Group created guidance to the NCPDP Universal Claim Forms Frequently Asked Questions document. The task group will go on hiatus.

Other Reportables:

- **DSMO Change Requests:** Received an update on the status of the DSMO Change Request 1201 (New Version of the Telecommunication and Batch Standards) and 1202 (New Standard - Subrogation Implementation Guide for Batch Standard).
- **MC Patient ID TG:** Received an update on the work of the task group.
- **WG11 X12 270/271 Version 7030 Review TG:** Provided a review of the task group activity.

HIPAA Version Discussion:

- The work group was provided with an overview of the changes to the Telecommunication Standard since Version F2. The attendees determined to request the most recent version at the time the NPRM is published.

New Business:

- Task Group Leader Certificates of Appreciation were presented.

**Work Group 2 Product Identification**

Old Business:

- Tom Bizzaro of First Data Bank (FDB) provided comments on health policy focusing on the opioid crisis, biosimilar naming, and promoting participation by the FDA in the Work Group’s efforts.
- Tammy Powell of the National Library of Medicine (NLM) provided an update on RxNorm and DailyMed.

Task Groups:

- The Structured Product Labeling Activities Task Group did not meet this quarter. The task group will go on hiatus.
- The Product Review and Billing Unit Exception Task Group reviewed issues resulting from changes to existing products or to the release of new products. The task group:
  - Reviewed and submitted to WG2 for adjudication six new QUIC forms (see final adjudication determination by the WG in this report):
    - QUIC #201808 Imiquimod
    - QUIC #201812 Sunosi
    - QUIC #201810 gammaCore Sapphire Device
    - QUIC #201902 gammaCore Refill Card
    - QUIC #201903 Udenyca
    - QUIC #201904 Gleolan
  - Provided an update on pending QUIC Form #201807 for Enbrel®. A letter has been submitted to the FDA in support of Amgen’s request to revert to original volumetric units on labeling. Amgen received a response from the FDA and NCPDP is awaiting notification from Amgen regarding their next steps.
Reviewed six products via email to determine the billing unit and package size.

The Work Group 2 Co-Chairs and Product Review and Billing Unit Exceptions task group leads will be meeting with a CMS representative on February 12, 2019 to discuss potential efforts to harmonize and improve communications and education to the industry on billing unit differences and designations between CMS and NCPDP.

For October, November and December 2018, 3,257 files and no changed billing unit indexing files were generated by the FDA based on the files received by the compendia. The compendia group reconciled the 50 NDCs with discrepancies.

- The **SPL REMS Requirements Task Group** did not meet this quarter. The task group will go on hiatus and is considering submitting a request to be disbanded at May Work Group.
- The **Naming Standards for Drugs, Biologics and Biosimilars Task Group** did not meet this quarter.
- The **Application of the Billing Unit Standard Clarification Task Group** is working on the draft guidance that will discuss the rationale used to determine the billing unit from past QUIC forms/products reviewed and the causes that lead to product reviews and the processes followed.

Other Reportables:
- **WG11 REMS Workflow to Transaction TG**: Received an update on the work of the task group.
- **MC NDC Scarcity TG**: Received an update on the work of the task group.
- **MC Digital Therapeutics TG**: Received an update and presentation on the work of the task group.

New Business:
- New QUIC Form Review and Final Adjudication:
  - QUIC #201808 Imiquimod
    - BU=EA and PS=24 sachets for Imiquimod per section 4.2.1 of the Billing Unit Standard.
  - QUIC #201812 Sunosi
    - BU=EA and PS= either 30 or 100 for Sunosi depending on the bottle size per section 5.1.1 of the Billing Unit Standard.
  - QUIC #201901 gammaCore Sapphire Device
    - BU=EA and PS=1 for gammaCore Sapphire Device per section 5.5.1 of the Billing Unit Standard.
  - QUIC #201902 gammaCore Refill Card
    - BU=EA and PS=1 for gammaCore Refill Card per section 5.5.1 of the Billing Unit Standard.
  - QUIC #201903 Udenyca
    - BU=mL and PS=0.6mL for Udenyca per section 5.2.2 of the Billing Unit Standard.
  - QUIC #201904 Gleolan
    - BU=EA and PS=1 for Gleolan per section 5.1.8 of the Billing Unit Standard.
- Task Group Leader Certificates of Appreciation were presented.

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

DERFs Reviewed:
- DERF 001664 was approved with modifications.
- DERF 001665 was approved with modifications.

Task Groups:
- The **Medical Rebate Standard Task Group** developed questions for a survey of Payers/PBMs and Pharmaceutical Manufacturers and a target list for each category. The purpose of the survey is to solicit feedback on the best way to move forward with the Medical Rebate standard: (1) enhance the current Medical Rebate Data Standard to incorporate new fields (retain as standalone standard), (2) add the Record Type for Medical Rebate to the Manufacturer Rebate guide and add
new fields as needed (combine two guides), or (3) eliminate the Record Type (Utilization Detail Medical) for Medical Rebate and add existing fields (and new fields as needed) to the Manufacturer Rebate Utilization Detail record (combine two guides). The telephone survey will begin next quarter.

- The **Medicaid Drug Rebate Program Task Group** continued to work on the development of a white paper, *Medicaid Drug Rebate Program - Challenges Across the Industry*. The white paper will provide the pharmaceutical industry an overview of the Medicaid Drug Rebate Program (MDRP) and information related to disputing invoiced claims, 340B claims submitted for rebate, terminated claims, claim level data necessary to validate summary level invoices, and high-level recommendations which would benefit the overall MDRP processes.

- The **Manufacturer Rebate Standard Task Group** submitted two DERFs related to Outcomes Based Contracting (OBC). DERF 001664 requested the addition of two new fields in the Utilization Detail Record Type – Patient Eligibility Start Date and Patient Eligibility End Date. DERF 001665 requested the addition of a new Record Type for Outcomes Detail to use as a ‘reference’ file to identify prescription lines, but not duplicate those deemed to be eligible for OBC rebates and to use as a means to share additional data elements to calculate the OBC metrics. The task group also formed the Manufacturer Rebate Standard Review for State Reporting Sub-Task Group to (1) review the Manufacturer Rebate flat files (Utilization, Plan, Market Basket, Reconciliation and Formulary Description) for CMS compliance, utilization and accessibility and (2) incorporate requests for efficiencies, i.e., electronic payments.

Other Reportables:
- **WG9 340B Task Group**: Received an updated on the work of the task group.

New Business
- Task Group Leader Certificates of Appreciation were presented.

**Work Group 9 Government Programs**

Task Groups:
- The **Prescription Drug Monitoring Program (PDMP) Task Group** modified the white paper, *NCPDP Standards-based Facilitator Model for PDMP, An Interoperable Framework for Patient Safety, Version 10* based on input from the Standardization Committee. The task group also reviewed the *State PMP Tracking Document* and updated PMP information for the following states: California, Florida, Hawaii, Illinois, Louisiana, Michigan, Ohio, Tennessee, Texas and Washington.

- The **340B Task Group** continued review of the *340B Information Exchange Reference Guide*. A new status report was developed to track the task group’s progress on updating the reference guide. The task group will continue to review the remaining comments and make appropriate updates as needed. Per the task group’s decision during the January 11, 2019 call, the task group will target the May Work Group meeting for review/approval of the modified reference guide. The task group is more than half-way through their review of the guide and encourages stakeholder participation.

- The **Government Programs Encounter Reporting Standards Task Group** completed its field-by-field assessment of the Telecommunication and Post Adjudication Standards for inclusion in the proposed encounter reporting standard. During that review a decision was made to include the ability to report Pharmacy Paid Amount but not the ability to report MCO Billed Amount. The task group also submitted a draft survey to the Standardization Committee and began reviewing feedback. During the next quarter the task group will review all pricing fields in the layout to ensure there is clarity on referencing Pharmacy Paid Amount, enhance/modify the survey, which will include creating two surveys – one targeted to State Medicaid agencies and one targeted to
Processors and MCO’s and resubmit final versions of the surveys to the Standardization Committee with a goal of achieving publication before May Workgroup.

- The Medicaid Subrogation FAQ Task Group did not meet this quarter.
- The Medicaid Frequently Asked Questions Task Group reviewed the Florida/Tennessee Medicaid requirements to distribute specific forms to patients when point-of-sale rejections cannot be resolved and the need for a new reject code or the use of an existing reject code with specific messaging. The task group requested additional input from WG9. During the next quarter the task group will consolidate the Medicaid Provider Enrollment File and Medicaid Pharmacy Enrollment Files and develop an implementation guide and Data Dictionary/ECL modifications with a goal of submitting a DERF for approval in May.
  - The Medicaid Formulary Standard File Layout Sub-Task Group will continue review of proposed new fields and values for the Formulary & Benefit Standard and will discuss Cost Share, Prior Authorization Processor Indicator, and Messaging to Pharmacy and PBM.
- The Hospice Task Group reviewed questions related to reporting the Hospice Identifier on the Daily Transaction Reply Report (DTRR) and the start and end dates of Transaction Reply Code 071 and 072. Questions were submitted to CMS for response. During the next quarter the task group will work with CMS on the development of a Hospice Collection Notice. The task group will also review the Hospice Information for Medicare Part D Plans form and submit modifications to CMS.
- The Medicare Standardized Fraud, Waste and Abuse (FWA) Training Attestation Task Group did not meet this quarter.
- The Medicare Prescription Drug Event (PDE) Task Group reviewed and submitted the following issues to CMS:
  - Increase in PDE Edit 738 (non-Coverable NDC) for claims involving the medication TADALAFIL. CMS corrected the issue.
  - Editing logic for PDE Edit 880 to calculate the maximum allowable gap discount based on a 70% value instead of 50%. CMS corrected the issue.
  - Editing logic for PDE Edit 671 – Enhanced Alternative (EA) and Employer Group Waiver Plan (EGWP) addendum. Examples were provided as requested on 8/24/18 and 9/5/18. The task group also discussed the change to the monthly timeline for the FDA NDC SPL Data Elements (NSDE) file. No issues of concern were noted.
- The Medicare Financial Information Reporting (FIR) Task Group reviewed an error noted in the October 18, 2018 HPMS memo “Part D Coordination of Benefits Process Updates” which was drafted by the task group. CMS will not republish the memo but requested the FIR Task Group publish the correction in the Financial Information Reporting Questions, Answers and Editorial Updates document. During the next quarter the task group will continue review of the Financial Information Reporting Questions, Answers and Editorial Updates document, payer sheets, and examples.
- The OIG Report OEI 05-12-00540 Task Group is on hiatus.
- The Medicare Part D FAQ Task Group received three new questions this quarter which are under review. In coordination with WG1 Morphine Equivalent Dosing Sub-Task Group, the task group reviewed existing opioid guidance in the WG9 Medicare Part D Questions and Answers document and modified questions 2.51, 2.55, 2.75 and 2.76 to align with guidance in the Version D Editorial document. The task group will review HHS Proposed Rule RIN 0936-AA08: Fraud and Abuse; Removal of Safe Harbor Protection for Rebates Involving Prescription Pharmaceuticals and Creation of New Safe Harbor Protection for Certain Point-of-Sale Reductions in Price on Prescription Pharmaceuticals and Certain Pharmacy Benefit Manager Service Fees and determine if a standards related response is appropriate.
• The Medicare Card Project Task Group did not meet this quarter.

• The Coordination of Benefits Contractor (COBC)/Benefits Coordination & Recovery Center (BCRC) Task Group finalized the topics for discussion with CMS and the Benefits Coordination & Recovery Center contractor related to challenges with data format and content of Other Health Insurance in the COB file. A face-to-face meeting was held on January 29, 2019 and the issues brought forth will be prioritized and an action plan will be developed. The task group also worked with CMS on a SPAP/ADAP BIN PCN list, phase 1. NCPDP was not always getting updates from the SPAPs/ADAPs and thought CMS would have greater leverage to get the updates. The target date for the first file is March 2019. Guidance in Chapter 14 of the Medicare Prescription Drug Benefit Manual will be modified to reflect this change.

• The Medicare Part D Multi-Payer Reconciliation Task Group continued review of scenarios in the Multi-Payer Non-Responder Financials document to develop a best practice document.

New Business:

• Additional Preclusion List Requirements. The work group reviewed the February 7, 2019 HPMS memo, Additional Preclusion List Requirements, which provides clarifying guidance regarding organizational Type 2 National Provider Identifiers (NPIs) identified on the Preclusion List.

• Task Group Leader Certificates of Appreciation were presented.

Work Group 10 Professional Pharmacy Services

Old Business:

• A USP Allergy Update was provided to the Work Group by Shelly Spiro on behalf of Donna Bohannon of USP.

Task Groups:

• The MTM and Pharmacist Clinical Services Task Group provided an update that the NCPDP/HL7 Pharmacist eCare Plan C-CDA template and Fast Healthcare Interoperability Resources (FHIR®) Implementation Guides (IGs) for September 2017 HL7 comment only ballot were reconciled. Lantana has been contracted to complete the linking of Pharmacist HIT Collaborative value sets to the implementation guides as well as assist with the FHIR® implementation guide. The joint project between NCPDP and HL7 to complete implementation guides in time for the May 2019 ballot cycle is moving forward. An update on Pharmacist eCare Plan work was provided to HL7 Structured Documents, Pharmacy, and Patient Care work groups during HL7 Work Group meetings in San Antonio, TX January 14th to January 17th, 2019.

• The Electronic Referral Task Group obtained feedback from the work group on next steps. It was determined that they will be re-writing the Specialized Standard Implementation guide, to include requests for any type of service (not just MTM) between clinicians.

• The mL White Paper Task Group coordinated with NCPDP Marketing and submitted the survey to recipients a second time using a different mechanism due to low participation. Tom Bizarro made phone calls to recipients to encourage survey participation. These efforts proved successful. The intent of the survey is to collect feedback on the implementation of (or lack thereof) policies as a result of the NCPDP Recommendations and Guidance for Standardizing the Dosing Designations on Prescription Container Labels of Oral Liquid Medications White Paper. The task group will begin work on reviewing recent survey results. The final author in rolling authorship is reviewing the revised document before submitting for task group review.

• The Universal Medication Schedule White Paper Task Group provided an update on the scope of the task group and next steps to revise the Universal Medication Schedule White Paper. The task
group has had some preliminary review and revisions of the white paper by task group participants and is working with industry SMEs to review the paper.

Other Reportables:
- **WG14 Consultant Pharmacist Interoperability TG**: Received an update on the work of the task group.
- **Joint WG10/WG14 Standardized Medication Profile TG**: Received an update on the work of the task group.
- **WG18 Specialty Requirements for ePrescribing TG**: Received an update on the work of the task group.

New Business:
- Pamela Schweitzer, Pharm.D., BCACP, RADM (retired) provided an update to the Work Group on the new Center for Medicare and Medicaid Innovation (CMMI) model addressing social determinants of health for beneficiaries and the importance of the model to health care payers.
- Task Group Leader Certificates of Appreciation were presented.

**Work Group 11 ePrescribing & Related Transactions**

**DERFs/ECLs Reviewed:**
- DERF 001645/ECL 000280 was withdrawn by the submitter.
- DERF 001650/ECL 000282 was modified by the task group and recommended approval at MC.
- DERF 001651/ECL 000282 was modified by the Work Group and recommended approval at MC.
- DERF 001652/ECL 000284 was modified by the Work Group and recommended approval at MC.
- DERF 0001658 was approved with modifications by the Work Group.
- DERF 001663/ECL 000286 had no modifications and recommended approval at MC.
- DERF 001666/000287 was modified by the Work Group and recommended approval at MC.
- DERF 001667/000290 was modified by the Work Group and recommended approval at MC.
- DERF 001668 was approved with no modifications.
- DERF 001669 was approved with no modifications.
- DERF 001670 was approved with no modifications.
- DERF 001671 was pended to the WG11/WG14 RxFill Task Group.
- DERF 001672 was approved with no modifications.
- DERF 001673 was pended to the WG11 SCRIPT Implementation Recommendations Task Group.
- DERF 001674/ECL 000288 was pended to the WG11 SCRIPT Implementation Recommendations Task Group.
- DERF 001675 was approved with no modifications.
- DERF 001676 was approved with no modifications.
- DERF 001677 was pended to the WG11 Formulary and Benefit Task Group.
- DERF 001678 was approved with no modifications.
- DERF 001679 was approved with no modifications.
- DERF 001680 was pended to the WG11 Formulary and Benefit Task Group.
- DERF 001681 was approved with no modifications.
- DERF 001682 was approved with no modifications.

Old Business:
- The following update on the next version of the SCRIPT Standard regulation was provided:
  - Anyone with requests for additions to a transaction guidance document, should email tstrickland@ncpdp.org.
Future webinars for a deeper dive into implementation of the SCRIPT Standard are in the planning stage. Anyone wishing to join this planning group should email tstrickland@ncpdp.org.

There will be three track sessions at the Annual Conference in May for SCRIPT 2017071.
- SCRIPT Version 2017071 Prescriber/EHR Perspective
- “Tales from the Field – Successes, Lessons, and the Final Stages of the NCPDP SCRIPT Standard Version 2017071 Migration”
- SCRIPT Version 2017071 Implementation Roundtable – Have your implementation questions answered by industry experts.

Testing tool
- A webinar is tentatively scheduled for March on the use of the testing tool.

Examples documents for v2017071, V2018041 and v2018071 have been republished. Examples showing the use of Diagnosis were updated to use ICD-10.

As a reminder, the QuantityUnitOfMeasure code values list is to be sunsetted on September 1, 2019. This list of code value being sunsetted can be found in the February 2019 Supporting Documentation folder on the WG11 members’ only webpage.

Updates were provided for the adoption of the electronic prior authorization and adoption of the electronic prescribing for controlled substances.

Task Groups:
- The **Dispensed Medication Reporting Task Group** brought forth pended DERFs 001658 for a new reporting transaction of dispensed medications to HIE and HIE-type entities.
- The **ePrescribing Regulatory Task Group** is on hiatus pending additional needs as the dynamic legislative and regulatory environments dictate, question(s) from member(s) and/or regulations to review.
- The **Formulary and Benefit Task Group** brought forth DERFs 001675, 001676, 001677, 001678, 001679, 001680, 001681 and 001682 for enhancements and modifications to the Formulary and Benefit Standard. The DERFs approved at this work group meeting will be held and combined with the DERFs approved at the May and August work group meetings for the August ballot period.
- The **Implementation of Structured Sig Task Group** did not meet this quarter.
  - The **Structured and Codified Sig Format Implementation Guide Analysis Sub-Task Group** was disbanded.
- The **NCPDP/HL7 Pharmacist Functional Profile Task Group** brought forth their guidance document on the use of the *HL7 EHR-S Functional Profile: Meaningful Use, Release 1 - US Realm (MU EHR-S FP)* for the pharmacy industry. The Work Group approved the document.
- The **Prior Authorization Workflow to Transactions Task Group** continued working on modification to the **SCRIPT Standard Implementation Guide** and the delegated electronic prior authorization.
- The **REMS Workflow to Transactions Task Group** did not meet this quarter. They will work with the Formulary and Benefit Task Group on a proposed DERF to add REMS elements to the Formulary and Benefit Standard over the next quarter.
- The **WG11/WG14 RxFill Task Group** brought forth pended DERFs 001650/ECL 000282, 001651/ECL 000283 and 0001652/ECL 000284 and a new DERF 001672. They created new short-term and long-term goals and are looking at renaming and redefining the RxFill transaction making it more of a notification transaction.
- The **SCRIPT Implementation Recommendations Task Group** brought forth DERFs 0001673 and 001674/ECL000288. They received approval on updates to the **SCRIPT Implementation Recommendations** document. There is a small group working on the allergy and adverse event
elements, if you are interested please contact tstrickland@ncpdp.org and she will forward the information to the leads of the small group.

- The **X12 270/271 version 7030 Review Task Group** completed the review of the X12 270/271 TR3. The comments have been submitted to X12.
- The **XML Task Group** reviewed and provided recommendations on all submitted DERFs and discussed a reorganization of the current medication elements and making the product identification mandatory.

Other Reportables:

- The **WG14 Long Term and Post Acute Care ePrescribing Task Group** brought forth and received approval on three new and updated FAQs for inclusion in the *SCRIPT Implementation Recommendations* document.

New Business:

- Task Group Leader Certificates of Appreciation were presented.

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

Old Business:

- An update was provided on CMS Medicare Part D call letter, the NPRM for the use of the Quantity Prescribed field in the NCPDP Telecommunication Standard VD.0 and the EPA Final Rule on hazardous pharmaceutical waste.

Task Groups:

- The **LTPAC Current Billing Issues Task Group** provided updates on their activities throughout the quarter which includes:
  - Firvanq Billing Issue Update
  - Discussed Post Consumption billing issue where an NDC change occurs mid-cycle.
  - Discussed use of CMS Part D Defined Qualified Facility (997-G2) by the industry today.
  - Submitted DERF 001663/ECL 000286 for Patient Residence Code to align definitions of values “6” and “15” with the CMS Place of Service code descriptions.
- The **Consultant Pharmacist Interoperability Task Group** did not meet this quarter but provided an update regarding the efforts underway to pilot the *C-CDA Consult Note Guidance Document*. Efforts to organize a pilot that incorporates the task group’s recommendations continue. The pilot will include an LTC EHR participant, an LTC physician practitioner EHR participant and a consultant pharmacist software participant. Currently, two consultant pharmacist software packages, two LTC facility EHR systems, and one LTC practitioner EHR system have expressed an interest. All these companies have development pipelines that are already at capacity therefore, development efforts specific to the Consultant Pharmacist Consult Note pilot are likely a few months out.
- The **Long Term and Post-Acute Care ePrescribing Task Group** brought forth three new and updated FAQ for inclusion in the *SCRIPT Implementation Recommendations* document which were reviewed and approved in WG11 ePrescribing and Related Transactions. They also brought forth DERF 001669 which was approved in WG11 ePrescribing and Related Transactions.
- The **WG14/WG10 Standardized Medication Profile Task Group** continued to analyze data fields available in the SCRIPT/Specialized Standards today, specifically looking to fill gaps through use of existing fields in commonly used transactions.
- The **WG11/WG14 RxFill Task Group** created new short and long-term goals for the task group which were approved at WG11 e-Prescribing and related transactions. They brought forth DERFs 001650/ECL 000282, 001651/ECL 000283 and 001652/ECL 000284 which were approved and DERF 001671 and DERF 001672 which were pended in WG11 ePrescribing and Related Transactions.
Other Reportables:

- **WG1 Morphine Equivalent Dosing Sub-TG**: Received an update on the work of the task group.
- **WG9 Medicare Part D FAQ TG**: Received an update on the work of the task group.
- **WG9 Hospice TG**: Received an update on the work of the task group.
- **WG11 270/271 Version 730 Review TG**: Received an update on the work of the task group.

New Business:

- Task Group Leader Certificates of Appreciation were presented.
- Discussed cross-functional Work Group participation and how to help improve the members experience in task groups and work groups.
- Discussed the use of Submission Clarification Code value of “57” (Discharge Medication) and its expected use. A question is being submitted to CMS for clarification.

**Work Group 16 Property and Casualty/Workers’ Compensation**

**Task Groups:**

- The **Legislative/Regulatory Monitoring and Education Task Group** provided legislative and regulatory updates for the following states: California, Kentucky, Montana, Nebraska, and New York.
- The **Billing and State Reporting Task Group** provided an update on Illinois’ proposed amendments to their existing workers’ compensation electronic billing rules due to recently enacted legislation.
- The **Future Development Needs for WC/PC Task Group** did not meet this quarter. The task group will go on hiatus until an issue is brought forth for discussion.

New Business:

- A proposal to combine the **Legislative/Regulatory Monitoring Task Group** and the **Billing and State Reporting Task Group** was approved. The newly combined task group name is **Workers’ Compensation Monitoring, Billing and Education Task Group**. The Work Group proposed that the new task group be added as a reportable to Work Group 1’s agenda going forward.
- Task Group Leader Certificates of Appreciation were presented.

**Work Group 18 Specialty Pharmacy**

**Task Groups:**

- The **Specialty Pharmacy Data Exchange Sub-Task Group** defined four business cases (patient census, performance metrics, inventory, and patient-reported data). The task group also revised its scope statement to include additional specialty pharmacy stakeholders.
- The **Specialty Requirements for ePrescribing Task Group** had presentations on Fast Healthcare Interoperability Resources (FHIR®©), the results of the WG18 survey, and specialty workflow. The task group also began working on a use case for a new specialty transaction to request specialty related data.
- The **Stakeholder Outreach and Education Task Group** worked on developing communication pieces and discussed possible education opportunities to encourage participation and membership by Specialty Pharmacy stakeholders. The task group also drafted their task group scope statement.
- The **Benefit Coverage Identification Task Group** reviewed the results of the WG18 survey, created a benefit identification spreadsheet and had a presentation on X12.

Other Reportables:

- **WG1 Expanded Dollar Fields TG**: Received an update on the work of the task group.
- **WG11 Prior Authorization Workflow-to-Transaction TG**: Received an update on the work of the task group.
• **WG11 REMS Workflow-to-Transaction TG:** Received an update on the work of the task group.
• **MC Real Time Prescription Benefit Standard TG:** Received an update on the work of the task group.

**New Business:**
- There were two guest presentations on the topic of Specialty Hubs.
- Task Group Leader Certificates of Appreciation were presented.

**Work Group 45 External Standards Assessment, Harmonization and Implementation Guidance**

**Old Business:**
- Industry updates were provided for WEDI, NCPDP SNIP, CAQH CORE, X12 and Health Exchanges.

**Task Groups:**
- The **DIR 835 Reporting Task Group** completed and brought forth a Direct/Indirect Remuneration (DIR) Reporting Recommendations document for the Work Group to approve. The document was approved by the Work Group.
- The **Document Revision Task Group** reviewed and approved two versions of updates to NCPDP CARC Mapping documents. Both mapping documents will be submitted to the Standardization Committee and the version posted is contingent on the approval of the DIR Guidance document by the Standardization Committee. The task group provided an update on the status of revisions to the *Payer Audit Reporting Transaction* document to include a PLB level and PLB with claim level examples. The task group is also in the process of revising the *X12N/005010X220A1 Benefit Enrollment and Maintenance (834)* and the *X12N/005010X221A1 Health Care Claim Payment/Advice (835) Questions and Answers* document as an action item from the Standardization Committee to ensure consistency in format as well as in questions and answers. The F2 Tracking Spreadsheet template has been completed and is on hold pending guidance from SNIP on the timeline on adoption of the next Telecommunication version.
- The **Pharmacy and/or Combination ID Card Task Group** did not meet this quarter.
- The **X12 7030 834/835 TR3 Review Task Group** did not meet this quarter.
- The **834/835 FAQ Task Group** did not meet this quarter.
- The **DSMO Task Group** received no DSMO requests for review.

**New Business:**
- Task Group Leader Certificates of Appreciation were presented.

**MC Maintenance and Control**

**DERFs/ECLs Revised:** 21 new and 5 pended DERFs/ECLs were reviewed (see WG1, WG7 and WG11).
- DERF 001636 was pended.
- DERF 001645/ECL 000280 was withdrawn by the submitter.
- DERF 001650/ECL 000282 was approved with no further modifications.
- DERF 001651/ECL 000283 was approved with no further modifications.
- DERF 001652/ECL 000284 was approved with no further modifications.
- DERF 001658 was approved with further modifications.
- DERF 001662 was approved with further modifications.
- DERF 001663/ECL 000286 was approved.
- DERF 001664 was approved with no further modifications.
- DERF 001665 was approved with no further modifications.
- DERF 001666/ECL 000287 was approved with no further modifications.
- DERF 001667/ECL 000290 was approved with no further modifications.
DERF 001668 was approved.
DERF 001669 was approved.
DERF 001670 was approved.
DERF 001671 was pended.
DERF 001672 was approved.
DERF 001673 was pended.
DERF 001674/ECL 000288 was pended.
DERF 001675 was approved.
DERF 001676 was approved.
DERF 001677 was pended.
DERF 001678 was approved.
DERF 001679 was approved.
DERF 001680 was pended.
DERF 001681 was approved.
DERF 001682 was approved.

Old Business:
- Received updates on:
  - Board of Trustees
  - HIPAA

Task Groups:
- The Education/Legislation and Regulations Task Group drafted and submitted comments to the Office of the National Coordinator for Health Information Technology (ONC) on Strategy on Reducing Regulatory and Administrative Burden Relating to the Use of Health IT and EHRs.
- The API Task Group continues to focus on an update of the NCPDP Connectivity Operating Rules.
- The Emergency Preparedness Task Group did not meet this quarter.
- The X12 TR3 Comment Consolidation Task Group did not meet this quarter.
- The ECL Task Group reviewed and discussed the feedback from the presentation to the WG1 Telecommunication FAQ Task Group regarding the proposed categorization of Telecommunication Standard reject codes.
- The Gender Transition Task Group continued working on a white paper/guidance document on how to reconcile gender edits on the pharmacy side and how to correctly use the reject codes for gender on the payer and pharmacy sides. They reviewed California SB219 signed into law in October 2017 which allows for a gender of “non-binary” as a recognized gender on state-issued identification documents. They heard a presentation on how HL7 standards define and use gender. The task group also reviewed options for a new field to be added for Birth Sex and then possibly renaming the existing gender field to show “administrative gender”.
- The Patient Identification Task Group completed the Universal Patient Identifier Guidance Document. Work Group approval will be requested at May Work Group. Publication of the guidance document is on hold until all updated standards referenced have been balloted and published.
- The Harmonization Formation Task Group completed their first goal of identifying the benefit and value to incorporating harmonization practices within the standards development process. The task
group also began to identify the harmonization strengths and weaknesses of current NCPDP documents and processes and reviewed potential recommendations to determine if they are in line with the defined benefits and values of harmonization.

- The Digital Therapeutics Task Group met with members of the WG2 Product Review and Billing Unit Exception Task Group to discuss and recommend a billing unit for digital therapeutics. They reviewed NCPDP standards and identified those digital therapeutics will need to leverage in most cases. The task group also developed an educational presentation for WG2 that can also serve as a template for discussions with other Work Groups and Task Groups.

- The NDC Scarcity Task Group completed their assigned work of drafting and submitting NCPDP’s comments to Docket No. FDA–2018–N–2610 Future Format of the National Drug Code. This task group is requesting a hiatus until the FDA takes action related to the comments to the docket.

New Business:

- New Project Development Form 000050 (Identification of Social Determinants of Health for Pharmacy Standards) was approved with a recommendation to create a task group in WG10 or MC. Three members volunteered to serve as task group co-leads.

- New Project Development Form 000051 (Capacity for Payer-Generated Individualized Written Denial Notice Issued at Pharmacy Point of Sale) was approved with a recommendation to create a task group in WG1. Four members volunteered to serve as task group co-leads.

- The attendees received recaps of each Work Group’s activities.

- Task Group Leader Certificates of Appreciation were presented.

- NCPDP Most Valuable Participants were announced.