



May 2019 Work Group Recaps:

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

Work Group 1 Telecommunication

Ballots Adjudicated:

- **Ballot WG010081** - Enhancements to the Telecommunication Standard Implementation Guide Version F5 is considered a valid ballot having received the required 60+% of Consensus Group votes and 75%+ approval rating. See Letter Ballot Comment spreadsheet for the ballot results and categorization of comments on the WG1 webpage. The ballot will be sent to NCPDP Board of Trustees for approval after a 30-day appeal period.
- **Ballot WG010082** - Enhancements to the Post Adjudication Standard Implementation Guide Version 50, the Prior Authorization Transfer Standard Implementation Guide Version 24 and the Uniform Healthcare Payer Data Standard Implementation Guide Version 27 is considered a valid ballot having received the required 60+% of Consensus Group votes and 75%+ approval rating. See Letter Ballot Comment spreadsheet for the ballot results and categorization of comments on the WG1 webpage. The ballot will be sent to NCPDP Board of Trustees for approval after a 30-day appeal period.
- **Ballot WG010083** - Enhancements to the Benefit Integration Standard Implementation Guide Version 15 is considered a valid ballot having received the required 60+% of Consensus Group votes and 75%+ approval rating. See Letter Ballot Comment spreadsheet for the ballot results and categorization of comments on the WG1 webpage. The ballot will be sent to NCPDP Board of Trustees for approval after a 30-day appeal period.

DERFs/ECLs Reviewed:

- DERF 001636 was withdrawn.
- DERF 001683 was approved with modifications.
- DERF 001684/ECL 000291 was recommended for MC to approve.
- DERF 001685/Emergency ECL 000292 was recommended for MC to approve.
- DERF 001686 was approved.
- DERF 001687/ECL 000293 was recommended for MC to pend to the WG1 Telecommunication FAQ Task Group.
- DERF 001688 was approved with modifications.
- DERF 001689 was pended to the WG9 Medicare Part D FAQ Task Group.
- DERF 001690/ECL 000294 was recommended for MC to pend to the WG9 Medicare Part D FAQ Task Group.
- DERF 001691 was approved.
- DERF 001692/Emergency ECL 000295 was withdrawn.
- DERF 001693/ECL 000296 was recommended for MC to approve.
- DERF 001694 was pended to the WG1 Clinical and Safety Edits Task Group.
- DERF 001695 was approved.
- DERF 001696/ECL 000297 was recommended for MC to approve.
- DERF 001697 was pended.

- DERF 001698/ECL 000298 was recommended for MC to pend.
- DERF 001699/Emergency ECL 000299 was recommended for MC to approve.
- DERF 001700/Emergency ECL 000300 was recommended for MC to approve.
- DERF 001701/Emergency ECL 000301 was recommended for MC to approve.
- DERF 001714/ECL 000304 was recommended for MC to pend.

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.
 - 01/2019 – We have an NPRM!! - <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 were due on April 1, 2019. The NCPDP SNIP Committee formulated NCPDP's comments.
 - 04/2019 – No decision regarding the situational rule or version has been made by the HHS CMS National Standards Group.

Task Groups:

- The **Telecommunication FAQ Task Group** reviewed five questions, two DERFs and heard two presentations. The Preferred Product Cost Share Incentive question and answer was approved for publication in the *Telecommunication Version D and Above Questions, Answers and Editorial Updates* document.
 - The **FAQ Controlled Substance Guidance Update Sub-Task Group** created one DERF. The group continues to update the *Recommended Use of Quantity Prescribed (460-ET) in NCPDP Telecommunication Standard Version D.0* white paper. The group will discuss the pro-rated copay and date of service validation business cases and will create a DERF to update reject code 650 and to create a similar reject code for long term care.
- The **Coordination of Benefits Task Group** reviewed and answered five questions and created one DERF. The group will review current tax guidance in Telecommunication Standard vF2 and will begin developing transition guidance and educational materials. Three outstanding questions will be addressed in the next quarter.
- The **Information Reporting Problems Task Group** continues to work with CMS on resolution/guidance for negative PLRO in non-EGWP scenarios. The task group continues to review and revise the *Overview of the Medicare Part D Prescription Drug Coordination of Benefits (COB) Process* white paper. The task group will update the NCPDP Best Practices Guide: *Managing TrOOP Eligible Other Health Insurance Information* to include the CMS SPAP ADAP BIN PCN list.
- The **Post Adjudication Task Group** did not meet this quarter.
- The **Definition of a Valid Prescriber Task Group** created two DERFs, answered one new question and revised a question's answer to the *Telecommunication Version D and Above Questions, Answers and Editorial Updates*. The group also invited the Assistant Physician Organization to participate in a task group call to review the National Uniform Claim Committee (NUCC) request for a new taxonomy and ask that the provider organization submit the request. To date, no response has been received from the organization. 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 and will complete two FAQs.

- The **Eligibility Verification Enhancements Task Group** reviewed the business case where the Medicare Beneficiary Identifier (MBI) is not available to the pharmacy to submit an E1 transaction where the current claim rejects for “no patient found”. The group decided to request a pilot using the Last Known 4RX Segment from the current version and to continue using the Version D.0 response. A payer sheet, workflow and business case will be developed and submitted to CMS Medicare Part D for approval. After obtaining their approval, the proposal will be submitted to the CMS National Standards Group for approval.
- 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 task group will remove its hiatus status and start meeting to begin developing guidance.
- The **Compound Task Group** did not meet this quarter. The task group will remove its hiatus status and start meeting to begin developing guidance.
- The **Expanded Dollar Fields Task Group** created guidance to the *NCPDP Universal Claim Forms Frequently Asked Questions* document and to the *Telecommunication Version D and Above Questions, Answers and Editorial Updates* document. The task group will go on hiatus.
- The **Clinical and Safety Edits Task Group** modified their scope and goals and modified the member opioid/benzodiazepine lock-in scenario in the *Telecommunication Version D and Above Questions, Answers and Editorial Updates* document. The group will continue to categorize the DUR codes, create DERFs and revisit business cases for Patient Prescriber Agreements (PPA).

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).
- **WG16 Workers’ Compensation Monitoring, Billing and Education TG, MC RTPB Standard TG, MC Patient ID TG, WG11 X12 270/271 Version 7030 Review TG and WG11 REMS Workflow to Transactions TG:** Received a written update on the work of these task groups.

New Business:

- **Project Development Form 000051:** Payer-Generated Individualized Written Denial Notice Issued at Pharmacy Point of Sale. A new task group was formed in WG1. Patricia Pimentel of CVS Health, Andrea Kent of Conduent, Nancy Bridgman of Remedi SeniorCare, and Kari Becker of Omnicare volunteered to co-lead the task group.
- The **WG1 2018 Accomplishments** presentation is available in the May 2019 Supporting Documentation download.

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, social determinants of health 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. There was also discussion on the issues surrounding FDA’s application of suffixes to multi-component biosimilars.

Task Groups:

- The **Structured Product Labeling Activities Task Group** did not meet this quarter. The task group is 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 two new QUIC forms (see final adjudication determination by the WG in this report):
 - QUIC #201913 sTMS SAVI Device
 - QUIC #201914 sTMS SAVI MicroSIM RX Card
 - Provided an update on pending QUIC Form #201807 for Enbrel® and the change in the volumetric package size listed on the packaging. Amgen received a response from the FDA and NCPDP is awaiting notification from Amgen regarding their next steps.
 - Reviewed one product via email to determine the billing unit and package size.
 - For January, February and March 2019, 2,921 and 3 changed billing unit indexing files were generated by FDA based on the files received by the compendia. The compendia group has reconciled the 27 NDCs with discrepancies.
- The **SPL REMS Requirements Task Group** did not meet this quarter. The task group is on hiatus.
- The **Naming Standards for Drugs, Biologics and Biosimilars Task Group** submitted a comment letter to the FDA in response to FDA Docket No. *FDA-2013-D-1543 Nonproprietary Naming of Biological Products: Update*.
- 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 Task Group, MC NDC Scarcity Task Group, and MC Digital Therapeutics Task Group:** Received updates on the work of these task groups.

New Business:

- New QUIC Form Review and Final Adjudication:
 - QUIC #201913 sTMS SAVI Device
BU=EA and PS=1 per section 5.5.1 of the Billing Unit Standard.
 - QUIC #201914 sTMS SAVI MicroSIM RX Card
BU=EA and PS=1 per section 5.5.1 of the Billing Unit Standard.
 - There was discussion that section 5.5.1 of the BUS was most applicable to this product as the Billing Unit Standard does not clearly address these types of products. It was proposed that an FAQ be created by the task group to address these products.
- The Work Group received a presentation on Aimmune’s peanut allergy therapy and its proposed packaging in anticipation of a future QUIC Form.
- The Work Group received a presentation on 503B Outsourcing Facilities and the lack of marketing categories for products that come from those facilities.
- The Work Group formed the **Outsourcing Facility Task Group**.
- The **WG2 Accomplishments** presentation was given.
- The 2019-2020 WG2 Co-Chairs were announced.

Work Group 7 Manufacturer and Associated Trading Partner Transaction Standards

Ballots Adjudicated:

- **Ballot WG070013** – Enhancements to the Manufacturer Rebate Flat File Standard WG070013 is considered a Valid Ballot having received the required 60%+ of Consensus Group votes and 75+% approval rating. See Letter Ballot Comment spreadsheet for the ballot results. The ballot will be sent to NCPDP Board of Trustees for approval after a 30-day appeal period.

Task Groups:

- The **Medical Rebate Standard Task Group** finalized the questions for a telephone survey of Payers/PBMs and Pharmaceutical Manufacturers and a target list for each category. The initial purpose of the survey was 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 survey was expanded to include questions related to pharmacy claim data, value-based contracts, data elements to meet new Safe Harbor rules, adoption of the Manufacturer Rebate Standard v07.02 or greater and NCPDP participation. The survey will begin this quarter.
- The **Medicaid Drug Rebate Program Task Group** finalized the white paper, *Medicaid Drug Rebate Program - Challenges Across the Industry*. WG7 approved the white paper which will be submitted to the Standardization Committee for review/approval. 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. Upon approval the white paper will be published on the NCPDP website under Education/White Papers.
- The **Manufacturer Rebate Standard Task Group** discussed the Office of Inspector General's proposed rule: *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 how this rule will impact the Manufacturer Rebate Standard. The task group will continue discussion during the next quarter as more information will be available once the final rule is released.

Other Reportables:

- **WG9 340B Task Group** and **WG18 Specialty Pharmacy Data Exchange Task Group**: Received updates on the work of the task groups.
- Received an update on the Drug Supply Chain Security Act (DSCSA).

New Business:

- A **WG7 Accomplishments** presentation was given.
- The 2019-2020 WG7 Co-Chairs were announced.

Work Group 9 Government Programs

Ballots Adjudicated:

- **Ballot WG090012** – Enhancements to the Prescription Drug Monitoring Programs Reporting Standard is considered a Valid Ballot having received the required 60%+ of Consensus Group votes and 75+% approval rating. See Letter Ballot Comment spreadsheet for the ballot results and categorization of comments on the WG9 webpage. The ballot will be sent to NCPDP Board of Trustees for approval after a 30-day appeal period.

DERFs Reviewed:

- DERF 001702 was approved.

Task Groups:

- The **Prescription Drug Monitoring Program (PDMP) Task Group** will modify the current white paper, *NCPDP's Standards-based Facilitator(s) Model for PDMP, An Interoperable Framework for Patient Safety*, based on the recommendations from the March 12, 2019 PDMP Stakeholder Action Group. The task group began developing Phase 1 which will include data flows and requirements for the Facilitator(s) primarily using the batch (C1) transaction to receive PDMP data from dispensers. The Facilitator in turn will patient match, de-duplicate and edit data for the state PDMPs. A state may also choose to use the Facilitator(s) as their PDMP. The use of the B1 real-time reporting and risk response for a pharmacy would come in a later phase. No changes for the prescriber have been discussed. This will allow a ramp-up time for the industry. The task group also reviewed the [State PMP Tracking Document](#) and updated PMP information for the following states: California, Maryland, Michigan, Montana, Nebraska, New Hampshire, Oregon, Rhode Island and Virginia.
- The **340B Task Group** completed the enhancements to the *340B Information Exchange Reference Guide* and presented to the work group for approval. WG9 voted to approve version 2.0 of the reference guide. The guide will be reviewed by the Standardization Committee and upon approval will be posted on the NCPDP website under Resources/Guidance Documents.
- The **Government Programs Encounter Reporting Standards Task Group** completed a second draft of the survey regarding the standardized file format and reject codes for encounter rejections. Based on feedback from the Standardization Committee, the task group enhanced/modified the first draft. The final version is now two surveys – one targeted to State Medicaid Pharmacy Directors and one targeted to Processors/MCOs. The surveys are in the process of being finalized within the survey tool and will be submitted to the Standardization Committee for approval.
- The **Medicaid Subrogation FAQ Task Group** was disbanded.
- The **Medicaid Frequently Asked Questions Task Group** continued review and research on 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. Next quarter a DERF will be drafted and presented in August to create a new reject code (e.g., "Provide Required State Medicaid Notice"). The task group reviewed and concurred with a proposed updated response to FAQ 6.4.5 in the Telecommunication Version D Editorial Document as recommended by WG1's Definition of a Valid Prescriber Task Group. WG1 approved the updated response and request for republication in the Version D.0 Editorial Document. WG9 approved the request to add the question/response to the Medicaid Frequently Asked Questions document and publish. The task group submitted DERF 001702 requesting approval of the new State Medicaid Provider File Standard Implementation Guide to streamline the communication of provider enrollment data from State Medicaid agencies to the applicable stakeholders. WG9 approved the DERF.
- The **Medicaid Formulary Standard File Layout Sub-Task Group** reviewed the gap analysis, Formulary & Benefit (F&B) vs Medicaid Formulary Standard File Layout requirements, as presented to the WG9 Medicaid FAQ Task Group. The recommendation for this file is a pipe delimited text file (similar to F&B standard). Next quarter the sub-task group will review proposed DERFs for Pharmacy Type, Step Medication and Messaging to Pharmacy and PBM by health plan (Medicaid) and consider other needs for Medicaid, i.e., Start/End Dates, Prior Authorization Processor Indicator.

- The **Hospice Task Group** is reviewing the need for a standardized Hospice Collection Notice and guidance in the case where the Medicare Part D plan does not have information to know the member is in hospice, therefore, drugs in the four classes and other applicable drugs are not rejected which causes retrospective review and collection for drugs paid under Part D that should have paid under Part A.
- 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 outstanding questions previously submitted to CMS. Nine questions were reviewed, seven of those questions were resubmitted to CMS and three questions were closed. The task group leaders created an addendum to the standard email to the CMS PDE mailbox to request acknowledgement of receipt and understanding of the issue being presented in the communication. Next quarter the task group will continue to review the remaining outstanding questions and address any new questions.
- The **Medicare Financial Information Reporting (FIR) Task Group** reviewed one new question regarding how to request a proxy delete when your plan is a Non-Plan-of-Record for a specific period and a Plan-of-Record for another period. The question was presented to WG9 for review and approval. WG9 approved the question and response which will be added to the Medicare Financial Information Reporting FAQ document and published.
- The **OIG Report OEI 05-12-00540 Task Group** was disbanded.
- The **Medicare Part D FAQ Task Group** reviewed the OIG Safe Harbor NPRM and submitted comments on behalf of NCPDP. DERFs 001697, 001698 001699, 001700, 001701 were submitted and reviewed in WG1. The task group reviewed two new questions which were presented to WG9 for review and approval. WG9 approved the questions and responses which will be added to the Medicare Part D FAQ document and published.
- The **Medicare Card Project Task Group** reviewed business cases for returning the Medicare Beneficiary Identifier (MBI) in point-of-service claim responses and submitted to CMS for consideration. In the interim, WG1 Eligibility Verification Enhancements Task Group is reviewing the scenarios to determine if Telecommunication Standard vD.0 solutions are available.
- The **Coordination of Benefits Contractor (COBC)/Benefits Coordination & Recovery Center (BCRC) Task Group** worked with CMS to finalize the State Pharmaceutical Assistance Programs (SPAPs) and AIDS Drug Assistance Programs (ADAPs) BIN/PCN List. The CMS memo announcing the new source of information for Part D plans to use when coordinating with SPAPs and ADAPs was released on March 28, 2019 and the file was published on April 2, 2019. The task group met weekly to continue to work through the COB-OHI clean-up and priority list. The task group submitted a series of questions to CMS related to Patient Assistant Program (PAP) records including general questions about how these programs work.
- 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:

- A **WG9 Accomplishments** presentation was given.
- The 2019-2020 WG9 Co-Chairs were announced.

Work Group 10 Professional Pharmacy Services

Old Business:

- A **USP Allergy Update** was provided to the Work Group by 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) ballot period for May 2019 has concluded. Both ballots met quorum and passed. There was one negative comment on the CDA Pharmacist Care Plan which has already been resolved. The task group will convene to reconcile the remaining comments and follow the development of the next version.
- The **Electronic Referral Task Group** provided an update on their work updating sections of the Specialized Standard Implementation guide to include requests for any type of service (not just MTM) between clinicians and pharmacies.
- 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. The results of the survey were surprising and showed that most pharmacy chains do not have a formal policy in place to require use of mL when the prescriber has used household measurements. The final authorship of the paper has been completed and task group calls will be scheduled to review and finalize the paper for publication.
- The **Universal Medication Schedule White Paper Task Group** is on hiatus pending collaboration with industry SMEs to review the paper.

Other Reportables:

- **WG14 Consultant Pharmacist Interoperability Task Group, Joint WG10/WG14 Standardized Medication Profile Task Group and WG18 Specialty Requirements for ePrescribing Task Group:** Received updates on the work of the task groups.

New Business:

- The task group received a presentation from Aimmune on their peanut allergy therapy product.
- **Project Development Form 000050:** The **Social Determinants of Health Identification Task Group** was formed as a result of approved Project Development Form 000050 – Social Determinants of Health.
- A **WG10 Accomplishments** presentation was given.
- The 2019-2020 WG10 Co-Chairs were announced.

Work Group 11 ePrescribing & Related Transactions

Ballots Adjudicated:

- **Ballot WG110081** 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. See Letter Ballot Comment spreadsheet for the ballot results and categorization of comments on the WG11 webpage. The ballot will be sent to the NCPDP Board of Trustees for approval after a 30-day appeal period.

DERFs/ECLs Reviewed:

- DERF 001671 was withdrawn by the submitter.
- DERF 001673 was withdrawn by the submitter.
- DERF 001674/ECL 000288 was withdrawn by submitter.
- DERF 001677 was withdrawn by the submitter.
- DERF 001680 was approved as modified.
- DERF 001703 was pending to the WG11 Formulary and Benefit Task Group.
- DERF 001704 was pending to the WG11 Formulary and Benefit Task Group.
- DERF 001705 was pending to the WG11 Formulary and Benefit Task Group.
- DERF 001706 was pending to the WG11 Formulary and Benefit Task Group.

- DERF 001707 was approved with modifications.
- DERF 001708/ECL 00302 approved with modifications.
- DERF 001709 was pended to the WG11 XML Task Group to work on backwards compatibility.
- DERF 001710 was approved with no further modifications.
- DERF 001711 was pended. to the WG11 SCRIPT Implementation Recommendations Task Group for additional work.

Old Business:

- The following update on the next version of the SCRIPT Standard regulation was provided:
 - The NCPDP Test Tool has been updated to validate against the NCPDP SCRIPT Standard Version.
- An Electronic Prescriptions for Controlled Substances (EPCS) update was provided.

Task Groups:

- The **Dispensed Medication Reporting Task Group** did not meet this quarter.
- 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 001680, 001703, 001704, 001705 and 001706 for enhancements and modifications to the Formulary and Benefit Standard.
- The **Implementation of Structured Sig Task Group** did not meet this quarter.
- The **Prior Authorization Workflow to Transactions Task Group** brought forth DERF 001707 for modification to the *SCRIPT Standard Implementation Guide* and continued work on the delegated electronic prior authorization.
- The **REMS Workflow to Transactions Task Group** worked with the Formulary and Benefit Task Group on DERF 001704 to add REMS elements to the Formulary and Benefit Standard over the next quarter.
- The **WG11/WG14 RxFill Task Group** submitted a new FAQ to be included in the SCRIPT Implementation Recommendations document. The task group finalized the definition of RxFill, proposed renaming of the RxFill transaction to EventNotification and continues their review of the RxFill Message Use Case document.
- The **SCRIPT Implementation Recommendations Task Group** received approval for seven new or modified FAQs and/or guidance for inclusion in the SCRIPT Implementation Recommendations document. They also created a process for reviewing errors reported in the SCRIPT Standard Version 2017071 Schema.
- The **Allergy and Adverse Event Sub-Task Group** brought forth seven new FAQs for inclusion in the SCRIPT Implementation Recommendations document.
- The **X12 270/271 version 7030 Review Task Group** did not meet this quarter.
- The **XML Task Group** brought forth DERF 001709 and reviewed and provided recommendations on all submitted DERFs.

Other Reportables:

- **WG14 Long Term and Post-Acute Care ePrescribing Task Group, WG18 Specialty Requirements for ePrescribing Task Group and MC Gender Transition Task Group:** Received updates on work of the task groups.

New Business:

- Received an update on the **MC Real-Time Prescription Benefit Task Group** DERF.
- A **WG11 Accomplishments** presentation was given.
- The 2019-2020 WG11 Co-Chairs were announced.

WG14 Long Term and Post Acute Care (LTPAC)

Task Groups:

- The **LTPAC Current Billing Issues Task Group** submitted two DERFs. DERF 001687 requested the addition of a new Submission Clarification Code to communicate that an NDC change has occurred in a post consumption billing scenario. DERF 001688 requested to sunset the CMS Part D Defined Qualified Facility (997-G2) field. An email was sent to CMS requesting guidance to be issued requiring Part D sponsors to recognize and process claims accordingly when Submission Clarification Code (420-DK) value '57 – Discharge Medication' is submitted for beneficiaries in need of discharge transition supplies. A question was also submitted to CMS for clarification as to whether Short Cycle Dispensing is applicable to brand oral solid OTCs listed with an NDA and processed under enhanced Part D plans such as MAPDs. CMS responded that since OTCs are not 'Part D Covered Drugs', Short Cycle Dispensing is not applicable. The Work Group approved renaming the task group to **LTPAC Billing Issues Task Group**.
- The **Consultant Pharmacist Interoperability Task Group** did not meet this quarter but will begin work on efforts to organize a pilot that incorporates the task group's recommendations and apply FHIR Resources to the Consult Note C-CDA.
- The **Long Term and Post-Acute Care ePrescribing Task Group** submitted two DERFs. DERF 001710 requested updates to Census in the SCRIPT Implementation Guide. DERF 001708 was for guidance surrounding therapeutic interchange usage within SCRIPT. The task group formed the **Recertification Sub-Task Group** to work on guidance for use of the recertification message. The task group also provided updates to the CancelRx Best Practices and shared additional LTPAC suggestions with the CancelRx Sub-Task Group.
- The **WG14/WG10 Standardized Medication Profile Task Group** continues to analyze data fields available in current SCRIPT/Specialized Standards, specifically looking to fill gaps through use of existing fields in commonly used transactions.
- The **WG11/WG14 RxFill Task Group** submitted a new FAQ to be included in the SCRIPT Implementation Recommendations document. The task group finalized the definition of RxFill, proposed renaming of the RxFill transaction to EventNotification and continues their review of the RxFill Message Use Case document.

Other Reportables:

- **WG1 Clinical and Safety Edits Task Group, WG1 Eligibility Verification Task Group, WG9 Medicare Part D FAQ Task Group, WG9 Medicare Part D FAQ Task Group, WG9 Hospice Task Group and WG11 270/271 Version 730 Review Task Group:** Received updates on the work of the task groups.

Work Group 16 Property and Casualty/Workers' Compensation

Task Groups:

- The **Workers' Compensation Monitoring, Billing and Education Task Group** provided legislative and regulatory updates for the following states: California, Kentucky, Mississippi, Montana, New York, and Ohio.
- 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 **WG16 Accomplishments** presentation was given.
- The 2019-2020 WG16 Co-Chairs were announced.

Work Group 18 Specialty Pharmacy

Ballots Adjudicated:

- **Ballot WG180002** for enhancements to the Specialty Pharmacy Data Reporting Standard Implementation Guide 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. Following a 30-day appeal period, the ballot will be sent to the NCPDP Board of Trustees for approval.

Task Groups:

- The **Specialty Pharmacy Data Exchange Sub-Task Group** prioritized use cases and eliminated the 'Triage/Referral Files' and 'Referral Status' use cases. The task group also began to build the 'Inventory' use case.
- The **Specialty Requirements for ePrescribing Task Group** reviewed the flow for Specialty Use Case #1. The task group also discussed the mapping of enrollment form elements and whether FHIR or XML will be used as the syntax for the new Specialty transaction.
- The **Stakeholder Outreach and Education Task Group** finalized enhancements to the Specialty page of the NCPDP website and an educational flyer outlining reasons for stakeholders to join NCPDP and WG18. The task group also reviewed educational topics from the Specialty survey.
- The **Benefit Coverage Identification Task Group** started working on a white paper to help identify the benefit source for specialty medication areas. The task group also had a special presentation on the Formulary & Benefit Standard files.

Other Reportables:

- **WG1 Expanded Dollar Fields Task Group, WG11 Formulary & Benefit Task Group, WG11 Prior Authorization Workflow-to-Transaction Task Group, WG11 REMS Workflow-to-Transaction Task Group, and MC Real Time Prescription Benefit Standard Task Group:** Received an update on the work of the task groups.
- The work group received an update on NCPDP presentations at the Asembia Summit on April 29, 2019.

New Business:

- A **WG18 Accomplishments** presentation was given.
- The 2019-2020 WG18 Co-Chairs were announced.

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 the *NCPDP Direct/Indirect Remuneration (DIR) Reporting Recommendations* document for the Work Group to approve. The document was previously approved at the February 2019 Work Group meeting in San Antonio but a subsequent review by the NCPDP X12 Liaison yielded more revisions that needed to be made. The revisions included changes to the PLB segment numbering within the examples and editorial changes. The document was reviewed and approved by the Work Group.
- The **Document Revision Task Group** reported that the NCPDP CARC Mapping document approved at the February meeting was approved through the Inter SDO process and published on the NCPDP website. The task group reviewed and approved revisions to the *Payer Audit Reporting Transaction* document to include a PLB level and PLB with claim level examples. The task group has requested a new X12 CARC code 'Pharmacy Payment Adjustment Due to an Audit' which will be reviewed by the X12 Code Committee in June. The task group continues work 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 task group received approval on changes to their goal.

- 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:

- A **WG45 Accomplishments** presentation was given.
- The 2019-2020 WG45 Co-Chairs were announced.

MC Maintenance and Control

DERFs/ECLs Reviewed: 32 new and 6 pended DERFs/ECLs were reviewed (see WG1, WG9 and WG11).

- DERF 001636 was withdrawn by the submitter.
- DERF 001671 was withdrawn by the submitter.
- DERF 001673 was withdrawn by the submitter.
- DERF 001674/ECL 000288 was withdrawn by the submitter.
- DERF 001677 was withdrawn by the submitter.
- DERF 001680 was approved.
- DERF 001683 was approved with no further modifications.
- DERF 001684/ECL 000291 was approved.
- DERF 001685/Emergency ECL 000292 was approved.
- DERF 001686 was approved.
- DERF 001687/ECL 000293 was pended.
- DERF 001688 was approved with no further modifications.
- DERF 001689 was pended.
- DERF 001690/ECL 000294 was pended.
- DERF 001691 was approved.
- DERF 001692/Emergency ECL 000295 was withdrawn by the submitter.
- DERF 001693/ECL 000296 was approved.
- DERF 001694 was pended.
- DERF 001695 was approved.
- DERF 001696/ECL 000297 was approved.
- DERF 001697 was pended.
- DERF 001698/ECL 000298 was pended.
- DERF 001699/Emergency ECL 000299 was approved.
- DERF 001700/Emergency ECL 000300 was approved.
- DERF 001701/Emergency ECL 000301 was approved.
- DERF 001702 was approved.
- DERF 001703 was pended.
- DERF 001704 was pended.
- DERF 001705 was pended.
- DERF 001706 was pended.

- DERF 001707 was approved with no further modifications.
- DERF 001708/ECL 000302 was approved with no further modifications.
- DERF 001709 was pended.
- DERF 001710 was approved.
- DERF 001711 was pended.
- DERF 001712 was pended.
- DERF 001713/ECL 000303 was approved with modifications.
- DERF 001714/ECL 000304 was pended.

Old Business:

- Updates were provided on HIPAA, Strategic National Implementation Process (SNIP) Committee, and Project Development Forms 000050 (Identification of Social Determinants of Health for Pharmacy Standards) and 000051 (Capacity for Payer-Generated Individualized Written Denial Notice Issued at Pharmacy Point of Sale).

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) and Centers for Medicare & Medicaid Services (CMS) on *ONC 21st Century Cures Act: Interoperability, Information Blocking, and the ONC Health IT Certification Program* and to CMS on CMS-9115-P on “*Medicare and Medicaid Programs; Patient Protection and Affordable Care Act; Interoperability and Patient Access for Medicare Advantage Organization and Medicaid Managed Care Plans, State Medicaid Agencies, CHIP Agencies and CHIP Managed Care Entities, Issuers of Qualified Health Plans in the Federally-facilitated Exchanges and Health Care Providers*”. The task group is working on comments to the ONC on *ONC New Test Procedures*.
- The **Real Time Prescription Benefit Standard Task Group** completed the review of the EDI related content of the Implementation Guide and the modifications to the Data Dictionary and ECL required to support the RTPB Standard. The task group also began to review the XML crosswalk, schema and related content of the Implementation Guide. DERF 001712 for a new RTPB Standard was submitted.
- The **API Task Group** continues to focus on an update of the *NCPDP Connectivity Operating Rules*. The task group also worked on reviewing and commenting on the CMS and ONC NPRMs in conjunction with the Education/Legislation and Regulations Task Group.
- The **Emergency Preparedness Task Group** completed the annual review of the NCPDP Emergency Preparedness document and made several changes and updates.
- The **X12 TR3 Comment Consolidation Task Group** did not meet this quarter.
- The **ECL Task Group** completed the business requirements for the reject code category enhancement to the web enabled ECL and it was forwarded to NCPDP’s external vendor. The task group began to review reject code values that do not have an associated “field number possibly in error” to add a field number where appropriate.
- The **Gender Transition Task Group** submitted DERF 001713 for a new gender code ECL value in response to California SB219 which allows for a gender of “non-binary” as a recognized gender on state-issued identification documents. The task group also reviewed definitions for Administrative gender (or gender marker), gender identity, and sex assigned at birth.
- The **Patient Identification Task Group** did not meet this quarter.
- The **Harmonization Formation Task Group** continued 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** prioritized SCRIPT (ePrescribing) and Telecommunication (claims billing transactions) as the Standards most critical to digital therapeutics in the pharmacy workflow and the first to be examined. Participation and feedback were requested from the WG1 Telecommunication FAQ and the WG11 SCRIPT Implementation Recommendations Task Groups to assist with the gap analysis of the two transactions. An initial review was done of SCRIPT's NewRx transaction. The task group also reviewed the common data elements on enrollment forms used in digital therapeutics.
- The **NDC Scarcity Task Group** did not meet this quarter.

New Business:

- The attendees received recaps of each Work Group's activities.
- The work group approved the creation of a new task group, Safe Harbor Chargeback Guidance, and assigned it to WG1.
- A **MC Accomplishments** presentation was given.
- The 2019-2020 Work Group Co-Chairs were announced.