November 2020 Virtual Interim Work Group Recaps:

Work Group 1 Telecommunication

DERFs/ECLs Reviewed:

- DERF 001753/ECL 000321 was withdrawn.
- DERF 001796/ECL 000334 was recommended for MC to approve as modified.
- DERF 001797/ECL 000335 was recommended for MC to approve.
- DERF 001798/ECL 000336 was recommended for MC to pend to WG1 Telecommunication FAQ Task Group for additional work.
- DERF 001799/Emergency ECL 000337 was recommended for MC to approve as modified.
- DERF 001800/ECL 000338 was recommended for MC to pend to the submitter for additional work.

Task Groups:

- The **Telecommunication FAQ Task Group** reviewed and approved adding one question to the *Telecommunication Version D and Above Questions, Answers and Editorial Updates* document. One proposed question was pended back to the MC Definition and Use of Quantity and Days Supply Task Group for additional analysis.
  - The **FAQ Controlled Substances Guidance Update Sub-Task Group** discussed C-II drug claims, quantity prescribed equaling quantity dispensed and fill numbers greater than 0.
  - The **FAQ Insulin Pen Packaging Claim Adjudication Guidance Sub-Task Group** drafted a problem statement and goals for the sub-task group.
- The **P and C/WC Monitoring, Billing and Education Task Group** presented legislative and regulatory developments for the last quarter.
- The **Coordination of Benefits Task Group** reviewed and answered two questions and worked on the *Dual Eligible Part B Claims Processing Barriers and Recommendations* document updates.
- The **Information Reporting Problems Task Group** updated the N2 to N1 Matching Logic documents located on the RelayHealth Nx Transaction webpage under Related Documents and continued review of the COB White Paper.
- The **Post Adjudication Task Group** did not meet this quarter.
- The **Definition of a Valid Prescriber Task Group** has been working on updates to the prescriber identifiers and cleaning up open 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 and is looking at the schema in relation to synchronization.
- The **Standardized Subrogation Task Group** did not meet this quarter.
- The **Usage of Submission Clarification Codes (SCC) Task Group** voted to disband.
- The **Compound Task Group** did not meet this quarter and voted to disband.
- The **Expand Dollar Fields Task Group** did not meet this quarter.
- The **Clinical and Safety Edits Task Group** created guidance for safe disposal of medication and continues to categorize the DUR Codes. A question was reviewed and approved to be added to the *Telecommunication Version D and Above Questions, Answers and Editorial Updates* document.
• The **Point of Sale Rebate Review Task Group** did not meet this quarter. They requested to go on hiatus.

• The **Telecommunication Agility Next Generation (TANG) Task Group** presented a recommendation to adopt extensibility and migrate to a syntax more commonly used in modern systems (e.g., XML, JSON). A poll of the membership present indicated an agreement to adopt extensibility and migrate from the EDI syntax, however discussion on the exact syntax was deferred back to the TG for broader discussion and harmonization.

• The **Pharmacy Product Locator Task Group** is finalizing a survey to quantify the need for a pharmacy product locator tool.

• The **Pharmacy Services Billing Task Group** has evaluated stakeholders for a pharmacy services billing transaction. They also presented their purpose and goals for approval.

**Other Reportables:**

• **WG11 REMS Workflow-to-Transaction Task Group, WG11 X12 270/271 Version 7030 Review Task Group** and **MC Real Time Prescription Benefit Standard Task Group**: Recaps for these task groups were provided in the WG1 download materials.

• **DSMO Change Requests**: An update on the status of the DSMO Change Request 1201 (New Version of the Batch Standard), 1202 (New Standard - Subrogation Implementation Guide for Batch Standard) and 1208 (New Version of the Telecommunication Standard) was provided in the WG1 download materials.

**New Business:**

• Reviewed the following DERFs based on the DERF Harmonization recommendation
  
  o **DERF 001780** was referred to WG1 Telecommunication FAQ Task Group.
  
  o **DERF 001782** was referred to WG1 Telecommunication FAQ Task Group.

**Work Group 2 Product Identification**

**Ballot Adjudication:**

• **Ballot WG020011** - Billing Unit Standard v4.0 is considered a valid ballot having received the required 60+% of Consensus Group votes and 75%+ approval rating. No comments to the ballot were received. The ballot will be sent to NCPDP Board of Trustees for approval after a 30-day appeal period.

**Old Business:**

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

**Task Groups:**

• 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:
  
  o Reviewed and submitted to WG2 for adjudication two new QUIC forms (see final adjudication determination by the Work Group in this report):
    
    ▪ **QUIC #202005** JELMYTO®
    
    ▪ **QUIC #202006** Xywav™
  
  o Reviewed three products via email and two during task group calls for verification of either the package size and billing unit or the product identifier to list within the drug data compendia files.
  
  o Initiated discussion on development of FAQ’s for the **Product Identifiers Standard** and the **Emergency Preparedness Guidance** document on the following topics:
    
    ▪ COVID-19 product moves from free goods to a cost-based product
    
    ▪ Assist COVID-19 test manufacturers with obtaining an identifier
Drafted a letter to FDA re: recommendations for Emergency Use Approved Coronavirus tests transitioning to commercial use approval. The letter was approved by the Work Group.

For July through August 2020, 1,644 new Structured Product Label (SPL) Billing Unit Index files were generated with no changed SPL Billing Unit Index files based on the files received by the FDA from the compendia. The compendia group has reconciled all nine NDCs with discrepancies.

- **The Naming Standards for Drugs, Biologics and Biosimilars Task Group** reviewed the results of their survey to determine the impact of the FDA’s biologics naming practice. Since there were only ten respondents, the task group decided it was too small of a sample size to reach any reliable conclusion. The task group also was advised of FDA’s latest biologics naming approach applied to the first treatment for Ebola virus infection, Inmazeb™, a mixture of three monoclonal antibodies. The fixed combination’s suffix-modified “proper” name includes the modifier “-ebgn” after odesivimab in the 3-component combination.

- **The Outsourcing Facility Task Group** is developing a response to the FDA’s reply to the task group’s March 2020 letter requesting the addition of a new Structured Product Labeling Marketing Category for Outsourcing Facility Medications. In their reply, the FDA stated the request was unclear.

Other Reportables:

- **WG11 REMS Workflow to Transaction Task Group, MC NDC Scarcity Task Group and MC Digital Therapeutics Task Group**: Recaps for these task groups were provided in the WG2 download materials.

New Business:

- New QUIC Form Review and Final Adjudication:
  - QUIC #202005 JELMYTO
    - BU=EA (kit) and Quantity of 1 for a single vial per section 5.5.1 of the Billing Unit Standard.
  - QUIC #202006 Xywav
    - BU = ML with a package size 180 per section 5.2.1 of the Billing Unit Standard.

- Mark Hendrickson and Mark Roberts of Leavitt Partners gave a presentation on the mission and efforts of the Alliance to Modernize Prescribing Information.

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

Task Groups:

- **The Manufacturer Rebate Standard Task Group** reviewed the results of the industry survey which was intended to socialize the latest manufacturer rebate standard, gain a better understanding of industry needs for medical data claims, gain a better understanding of data needs for value based contracts and encourage involvement in NCPDP Work Groups. Further analysis of the responses and next steps will be discussed within the task group.

- **The Manufacturer Rebate Standard Medicaid Reporting Sub-Task Group** was disbanded.

- **The Medical Rebate Standard Task Group** did not meet.

**Work Group 9 Government Programs**

DERFs/ECLs Reviewed:

- DERF 001774/ECL 000331 was recommended for MC to approve with modifications.

Task Groups:

- **The Prescription Drug Monitoring Program (PDMP) Task Group** monitored PMP information for California, Connecticut, Illinois, Kentucky, Louisiana, Maine, Montana, Nebraska, Oklahoma and Utah and updated the [State PMP Tracking Document](#) which was approved by WG9.
• The **340B Task Group** reviewed and modified pended DERF 001774/ECL 000331 which requests a modification to the definition of 340B (value 20 of Submission Clarification Code and value AA of Submission Type Code). WG9 recommended MC Maintenance and Control approve the DERF as modified by the task group.

• The **Government Programs Encounter Reporting Standards Task Group** continued to work on the development of one common standard that can be used by all states to report Medicaid pharmacy encounter data. The task group completed the categorization of each data element in the file layout and designated the mandatory/situational usage of each. Next quarter the task group plans to complete the associated implementation guide. The task group is also in communication with CMS to help resolve concerns regarding the guidance provided to states for mapping the Telecommunication Standard data elements to their T-MSIS Pharmacy data submissions.

• The **Medicaid Frequently Asked Questions Task Group** did not meet this quarter.

• The **Hospice Task Group** is working on a pilot project which extracts data from a hospice’s EHR and routes information to the correct Part D plan in real-time, thereby minimizing delays in the prior authorization process. Hospices, their software vendors and Part D plans are encouraged to participate in the pilot project.

• 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 Question 82. Lower out of pocket cost for insulin ($35 patient Pay AFTER gap discount), Question 87. PDE File Updates to Expand Dollar Field Values, Question 89. Model Insulin Discount Eligible Cost, Question 90. PDE Reject 784 Issues and Question 91. Are EGWPs allowed to exceed lesser of logic in Coverage Gap. Five questions were submitted to CMS.

• The **Medicare Financial Information Reporting (FIR) Task Group** reviewed the proposed combination of Financial Information Reporting (FIR) and Information Reporting (Nx) Transaction updates. The task group also reviewed modifications to the Proxy Delete Request Form to include three data elements: MBI/TranID, Contract ID and Contract Year. Requestor information will also be removed from tab one of the form. The target date for these changes is first quarter 2021. The Transaction Facilitator will notify the Medicare Part D plans when updates are completed.

• The **Medicare Part D FAQ Task Group** reviewed the Medicare Program: Electronic Prescribing of Controlled Substances; Request for Information (RFI). RFI comments were submitted to WG11 ePrescribing Regulatory Issues Task Group for inclusion in the NCPDP response. The task group also reviewed proposed rule CMS-1734-P: CY 2021 Payment Policies Under the Physician Fee Schedule and Other Changes. The task group did not submit comments in response to the proposed rule. The task group reviewed Reject Code 569 Notice of Appeal Rights responses from CMS and added those scenarios to the task group’s Notice of Appeal Rights chart which was approved by WG9 with modifications. The Medicare Part D FAQ Document will be updated and published.

• The **Coordination of Benefits Contractor (COBC)/Benefits Coordination & Recovery Center (BCRC) Task Group** reviewed the following: 1) Matching Coordination of Benefits (COB)-Other Health Insurance (OHI) to Medicare Part D eligibility, 2) Pharmaceutical Assistance Programs issues/questions, 3) Incorrect Section 111 primary reporting on COB records, 4) Supplemental benefit reported as primary coverage, 5) Non-network drug records, COB-OHI history, 6) Reject for effective date of other drug coverage, 7) BCRC clean-up of invalid BINs, 8) COB-OHI records with blank insurer name and 9) Prevention of incorrect primary COB-OHI records. During the next quarter, the task group will continue to work through the COB-OHI industry issues list.
  • The **COB OHI Reporting Limits to 36 Months Sub Task Group** was formed in September to discuss scenarios and provide recommendations to the industry concerning how to handle...
OHI when the information provided to plans via COB-OHI file is limited to 36 months of history for beneficiaries. In addition, CMS will add guidance to Chapter 14 of the Prescription Drug Benefit Manual when updated.

- The **Medicare Part D Multi-Payer Reconciliation Task Group** was disbanded.

**Work Group 10 Professional Services**

**Task Groups:**

- The **Electronic Referral Task Group** was disbanded.

- The **Identification of Social Determinants of Health Task Group** did not meet but will be working on a paper outlining the progress of this effort including the gap analysis and next steps to bring the work to the HL7® Pharmacy Work Group.

- The **MTM and Pharmacist Clinical Services Task Group** reported the HL7® Technical Steering Committee will review the NCPDP/HL7® Pharmacist eCare Plan C-CDA template and Fast Healthcare Interoperability Resources (FHIR®) Implementation guides before working jointly with NCPDP to submit to ANSI. For the CMR Summary FHIR® wrapper, the project is on hold until HL7® completes the MCC eCare Plan Efforts development for a FHIR® version of an eCare Plan Summary. For the Beneficiary Level Report (BLR), the task group is working on a guidance document.

- The **ml White Paper Task Group** is finalizing the ml White Paper now named, “**NCPDP Recommendations for Standardizing Dosing in Metric Units (ml) on Prescription Container Labels of Oral Liquid Medications, Version 2.0**.” The paper will be submitted for journal publication this next quarter.

- The **Universal Medication Schedule White Paper Task Group** continues to be on hiatus while NCPDP staff and Task Group leadership and members continue to engage Mike Wolf, the principal investigator and advocate for UMS, in establishing strategies for revision of the white paper. The joint **WG14/WG10 Standardized Medication Profile Task Group** completed NCPDP and HL7® standards gap analysis and agreed HL7® FHIR® would be the best standard for the standardized medication profile. The task group is working on a paper to submit to the HL7® Pharmacy Work Group.

**Other Reportables:**

- **WG18 Specialty Requirements for ePrescribing Task Group, WG14 Consultant Pharmacist Interoperability Task Group and WG1 Pharmacy Services Billing Task Group:** Recaps for these task groups were provided in the WG10 download materials.

**New Business:**

- Project Development Form 000055 was approved by the Board and assigned to WG10 with the recommendation that a new task group be formed. A new task group was approved and will be called the Pharmacogenomics Task Group. The task group will be led by Shelly Spiro and Ken Whittemore.

- An update was provided on the work being done by the USP HIT Expert Committee.

**Work Group 11 ePrescribing & Related Transactions**

**Ballot Adjudication**

- **Ballot WG110085-** enhancement to the SCRIPT and Specialized Standards is considered a valid ballot having received the required 60% of Consensus Group votes. There were two affirmative comments. One was categorized as persuasive and editorial and the other as not persuasive. The ballot will be sent to NCPDP Board of Trustees for approval after a 30-day appeal period.

**DERFs Reviewed:**

- DERF 001755 was approved as modified.

- DERF 001779 was approved as modified.
- DERF 001780 was approved as modified.
- DERF 001782 was pended to the Formulary and Benefit Task Group for additional work.
- DERF 001801 was approved.
- DERF 001802 was approved as modified.
- DERF 001803 was approved
- DERF 001804 was approved.
- DERF 001805 was approved as modified.

Old Business:
- The Work Group reviewed changes to the SCRIPT Standard since Version 2017071 and voted to not request a new version of the SCRIPT Standard be named under MMA.
- An Electronic Prescriptions for Controlled Substances (EPCS) update was provided.
- A National Library of Medicine (NLM) update was provided.

Task Groups:
- The Dispensed Medication Reporting Task Group did not meet during the last quarter.
- The ePrescribing Regulatory Task Group reviewed and provided comments from NCPDP for the Medicare Program EPCS Request for Information (RFI) and the Medicare Program CY 2021 Physician Fee Schedule (NPRM): EPCS for a Covered Part D Drug Under a Prescription Drug Plan or an MA-PD Plan.
- The Formulary and Benefit Task Group submitted DERF 001782. The work group voted to request the Formulary and Benefit Standard Version 53 be named in regulation. They are working on recommendations for the Formulary and Benefit Implementation Recommendations document for VS3.
- The Implementation of Structured Sig Task Group received approval for updates to the SIG specific section for inclusion in the SCRIPT Implementation Recommendations document. They continue to work with the WG11 XML Task Group on some naming and structure issues with the structured sig format.
- The Pharmacy to Pharmacy Prescription Transfer Task Group received approval for their new scope.
- The Prior Authorization Workflow to Transactions Task Group received approval for two FAQs for inclusion in the SCRIPT Implementation Recommendations document. During the next quarter, the task group will be working on what is not a duplicate transaction.
- The REMS Workflow to Transactions Task Group did not meet during the last quarter.
- The WG11/WG14 RxFill Task Group continues to work on future guidance and modifications to the RxFill message.
- The SCRIPT Implementation Recommendations Task Group brought forth DERFs 001776, 001779, 001780, 001802, 001803 and 001805 and received approval for a new FAQ for inclusion in and removal of a section from the SCRIPT Implementation Recommendations document.
  - The RxChange Guidance Review Sub-Task Group continued reviewing current guidance and will update, as necessary.
- The X12 270/271 version 7030 Review Task Group did not meet the during the last quarter.
- The XML Task Group brought forth DERF 001804. The task group reviewed and provided recommendations on all submitted DERFs impacting the schema. They continued working with the WG11 Implementation of Structured and Codified Sig Task Group on modifications to the sig structure.
- The SCRIPT Managed Updated Task Group was disbanded.

New Business:
- Reviewed DERF 001797/ECL 000335 based on DERF Harmonization. It was determined no action is necessary since the NCPDP Formulary and Benefit Standard has this concept already.
WG14 Long Term and Post Acute Care (LTPAC)

Task Groups:

- The **LTPAC Billing Issues Task Group** did not meet this quarter.
- The **Consultant Pharmacist Interoperability Task Group** did not meet this quarter but has plans for a pilot that incorporates the task group’s recommendations and applies FHIR® resources to the Consult Note C-CDA. They also plan on updating the guidance to incorporate FHIR® resources.
- The **Long Term and Post-Acute Care ePrescribing Task Group** submitted DERF 001801 which was approved in WG11 ePrescribing and Related Transactions. They received approval to add an FAQ for inclusion in the *SCRIPT Implementation Recommendations* document. The task group will continue working on guidance and modifications to the SCRIPT Standard to meet LTPAC needs.
  - The **Multi Communication Sub-Task Group** completed workflows 4 – 7 addressing current NCPDP solutions and workflows and where gaps in those workflows exist. They will continue working on additional workflows and writing recommendations.
- The **WG10 LTPAC Electronic Communication Synchronization Opportunity Review Task Group** was disbanded.
- The **WG14/WG10 Standardized Medication Profile Task Group** completed their gap analysis of the NCPDP and HL7® standards and reviewed the analysis. They determined HL7® FHIR® would be the best standard for the standardized medication profile. They will continue working on outlining the progress on this effort, including the gap analysis, and next steps to bring the work to the HL7® Pharmacy Work Group.
- The **WG11/WG14 RxFill Task Group** continued working on a DERF for enhancements to the RxFill message.

Other Reportables:
- Received a LTPAC industry update

Work Group 18 Specialty Pharmacy

DERF Reviewed:
- DERF 001806 was approved as modified.

Old Business:
- Received an update on DERF 001790 X12 852 Product Activity Report Specification Implementation Guidance document.

Task Groups:

- The **Specialty Pharmacy Data Exchange Task Group** continued to work on identifying data elements for the ‘Performance Metrics’ use case. There is a pharmacy willing to pilot the Specialty Pharmacy Data Reporting Standard and a manufacturer partner is needed.
- The **Specialty Requirements for ePrescribing Task Group** submitted DERF 001806 requesting approval of the implementation guide for the new HL7® FHIR® Specialty Medication Prescribing transaction. Task Group members attended the HL7 Connectathon in September to get feedback on the Specialty Implementation Guide as part of the HL7 balloting process.
- The **Stakeholder Outreach and Education Task Group** monitors educational opportunities related to specialty business. The task group decided to go on hiatus until specific opportunities arise requiring promotion.
- The **Benefit Coverage Identification Task Group** edited the NCPDP *Specialty Pharmacy Benefit Coverage Identification White Paper* to address feedback received from the Standardization
Committee. The task group also discussed promotion of the white paper which was published in September.

- The **Patient Consent Task Group** decided to explore leveraging the FHIR® Specialty Enrollment Transaction under development versus creating a new transaction for communicating patient consent. Following presentations and discussion of the FHIR® Specialty Enrollment Transaction, the task group also began to explore the use of Clinical Decision Support (CDS) Hooks protocol as a solution.

- The **Facilitating Access to Specialty Products Task Group** met with representatives from the pharmaceutical industry to help understand the process and key players regarding decisions for HUB services and limited distribution products. The task group continues to work on a guidance document to provide recommendations to support information regarding patient access/hub services and specialty product distribution.

Other Reportables:

- **WG1 Expanded Dollar Fields Task Group**, **WG10 Identification of Social Determinants of Health 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**: Recaps for these task groups were provided in the WG18 download materials.

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

Old Business:

- Industry updates were provided for WEDI, NCPDP SNIP, CAQH CORE and X12.

Task Groups:

- The **834/835 FAQ Task Group** did not meet this quarter.
- The **Document Revisions Task Group** did not meet this quarter but updated the CARC Mapping document with three new CARC codes that do not pertain to pharmacy.
- The **Pharmacy and/or Combination ID Card Task Group** did not meet this quarter.
- The **DSMO Task Group** received no DSMO requests for review.

New Business:

Scope, Goals and Name Change were discussed.

**MC Maintenance and Control – DERF Harmonization**

New Business:

- DERF 001796/ECL 000334 was referred to MC Maintenance and Control.
- DERF 001797/ECL 000335 was referred to MC Maintenance and Control and WG11 ePrescribing & Related Transactions.
- DERF 001780 was referred to MC Maintenance and Control and WG1 Telecommunication.
- DERF 001782 was referred to MC Maintenance and Control and WG1 Telecommunication.
- The following DERFs were highlighted to create awareness.
  - 001804
  - 001806
  - 001807
  - 001808
  - 001774
MC Maintenance and Control

Ballot Adjudication:

- **Ballot WGMC0009** - Enhancements to the Real-Time Prescription Benefit Standard Implementation Guide Version 11 is considered a valid ballot having received the required 60+% of Consensus Group votes and 75%+ approval rating. No comments to the ballot were received. The ballot will be sent to NCPDP Board of Trustees for approval after a 30-day appeal period.

DERFs/ECLs: 13 new and 6 pended DERFs/ECLs were reviewed (see WG1, WG9, WG11 and WG18).

- DERF 001753/ECL 000321 was withdrawn.
- DERF 001755 was approved as modified.
- DERF 001774/ECL 000331 was denied.
- DERF 001779 was approved as modified.
- DERF 001780 was pended.
- DERF 001782 was pended.
- DERF 001796/ECL 000334 was approved as modified.
- DERF 001797/ECL 000335 was approved.
- DERF 001798/ECL 000336 was pended.
- DERF 001799/Emergency ECL 000337 was approved as modified.
- DERF 001800/ECL 000338 was pended.
- DERF 001801 was approved.
- DERF 001802 was approved as modified.
- DERF 001803 was approved.
- DERF 001804 was approved.
- DERF 001805 was approved as modified.
- DERF 001806 was approved as modified.
- DERF 001807 was pended.
- DERF 001808 was approved as modified.

Old Business:

- Received updates on:
  - Board of Trustees
- Updates for the following were provided in the MC download materials:
  - HIPAA
  - SNIP Committee
  - DSMO Change Request System (CRS) Requests No. 1201, 1202 and 1208

Task Groups:

- The **Education/Legislation and Regulations Task Group** developed comments to ONC on **2020 Draft Interoperability Standards Advisory** for the November 9th deadline.
- The **Emergency Preparedness Task Group** did not meet this quarter.
- The **X12 TR3 Comment Consolidation Task Group** did not meet this quarter.
- The **Real Time Prescription Benefit Standard Task Group** reviewed and approved the timeline for naming and implementation of the Real Time Prescription Benefit Standard as proposed by the MC F&B and RTPB Task Group. The task group reviewed a DERF from the WG11 XML Task Group to change the structure for the communication of universal patient identifiers in the XML format. The task group identified necessary data and initiated updates to the implementation guide to support cash discount program use cases. The task group also received a milestone update from John Hopkins from their NCPDP Foundation sponsored pilot of the RTPB Standard.
- The Consumer-Facing RTPB and Price Transparency Sub-Task Group identified and discussed the use cases for consumer-initiated inquiries.

- The Gender Transition Task Group completed and submitted DERF 001808 to request a new data element for “Sex Assigned at Birth.” The DERF was approved by Work Group.

- The Digital Therapeutics Task Group edited the Background and Guidance for Using the NCPDP Standards for a Digital Therapeutic Product to address feedback from the Standardization Committee. The task group completed a gap analysis of the Formulary and Benefit Standard files and confirmed no additional data elements are needed to support the initial use case of the task group. The task group also modified its scope statement. The Work Group approved the modified scope.

- The NDC Scarcity Task Group is on hiatus and did not meet this quarter.

- The Patient Identification Task Group edited the Universal Patient Identifier Guidance Document v1.1 to address feedback from the Standardization Committee. The updated guidance document was published on the NCPDP website in October. The task group met with the WG11 XML Task Group to discuss the long-term solution for communicating universal patient identifiers in the XML format. The task group determined both X12 and HL7 support communication of multiple patient identifiers and identification of the source of the identifier, so no further advocacy is required by the task group.

- The Definition and Use of Quantity and Day Supply Task Group submitted DERF 001807 to request modification of the definition of Days Supply (405-D5) and DaysSupply. The Work Group approved the DERF. The task group also submitted a FAQ for estimating Days Supply (405-D5) for inclusion in the Telecommunication Standard Version D.0 Editorial Guide. They also continued the evaluation of quantity related data elements for the purpose of determining whether the name and definition of the data element reflects how it is being used and identifying any opportunities for sunsetting or consolidating quantity related fields.

- The F&B and RTPB Task Group discussed and proposed timeline recommendations for requests to CMS to name the next version of the Formulary and Benefit Standard and the Real-Time Prescription Benefit Standard for adoption and implementation. The task group requested disbandment as their assigned work is complete.

- The 2D Barcode Implementation Task Group reviewed and began to update the NCPDP GS1 DataMatrix White Paper.

New Business:

- Mark Hendrickson and Mark Roberts of Leavitt Partners gave a presentation on the mission and efforts of the Alliance to Modernize Prescribing Information.

- As part of DERF harmonization, the work group reviewed the concepts in DERFs 001780, 001782, 001796/ECL 000334 and 001797/ECL 000335 and referred them to the MC Real Time Prescription Benefit Task Group for further review.