May 2023 Joint Technical Work Group Recaps:

For results of Data Element Request Forms (DERFs) and External Code List (ECLs) reviewed see DERF Resolution at [https://member.ncpdp.org/work-groups.aspx?ID=wgmc](https://member.ncpdp.org/work-groups.aspx?ID=wgmc).

**Work Group 1 Telecommunication**

Ballots Adjudicated:

- **Ballot WG010089** – Enhancements to the Telecommunication Standard Implementation Guide Version FA is considered a valid ballot having received the required 60+% of Consensus Group votes and 75+% approval rating. One affirmative vote with comment was received. WG1 reviewed and categorized the comment as not persuasive. See Letter Ballot Comment spreadsheet for the ballot results and categorization of the comment with reason on the WG1 webpage. The ballot will be sent to NCPDP Board of Trustees for approval after a 30-day appeal period.

- **Ballot WG010090** – Enhancements to the Benefit Integration Standard Implementation Guide Version 18 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. See Letter Ballot Comment spreadsheet for the ballot results on the WG1 webpage. The ballot will be sent to NCPDP Board of Trustees for approval after a 30-day appeal period.

DERFs Reviewed:

- DERF 001933/ECL 000386 was recommended to MC to approve as modified.
- DERF 001949 was pended.

Task Groups:

- The **Telecommunication FAQ Task Group** formed two sub-task groups this quarter, Invalid SCC Combinations Sub-Task Group and Adjudicated Program Type Sub-Task Group. They requested WG9 Medicare Part D FAQ Task Group create a sub-task group to discuss options to identify the insulin pump type to better identify if the medication is covered by Medicare Part B or Part D. They reviewed the request for NCPDP-maintained subsets of various External Code List values be created to ease access to subsets of codes maintained by other organizations. The task group discussed a concern where a claim could be attributed to a pharmacy different from the pharmacy which originated the transmission and determined the concern is a business process/best practice issue among the pharmacy, switch service provider and the plan/processor. They reviewed the various options to indicate a patient’s out-of-pocket payment amount after a patient assistance program using a funded credit card is applied back to the commercial plan. They reviewed a proposed FAQ for Submission Clarification Code (SCC) 49 from WG1 Definition of a Valid Prescriber Task Group. The task group also socialized the documentation for the new section for benefit synchronization in the Benefit Integration Standard. Finally, the task group reviewed the business case for a new SCC for situations where a prescriber is not enrolled in a Medicaid program but may be allowed to prescribe due to an exception policy within that Medicaid program to facilitate patient care.
  - The **Invalid SCC Combinations Sub-Task Group** began assessing the various Submission Clarification Code (SCC) combinations and if the combinations should be rejected. Questions have been sent to various task groups for input.
The **Adjudicated Program Type Sub-Task Group** reviewed the Adjudicated Program Type Shared Code List impacts as related to transactions, segments, fields and situations and has started reviewing individual ECL values.

- The **P and C/WC Monitoring, Billing and Education Task Group** did not meet this quarter, but they have a new task group lead.
- The **Coordination of Benefits (COB) Task Group** discussed ways to report payments made from a copay assistance program to the plan, submitted updated patient pay components Version F6 transition guidance to the Strategic National Implementation Process (SNIP) Committee and began work on benefit stage transition guidance.
- The **Information Reporting Problems Task Group** completed updates and received work group approval to publish the *NCPDP Guidance for ADAPs and Qualified SPAPs Medicare Part D Coordination of Benefits Requirements and Responsibilities Version 4*, reviewed the Annual COB - OHI Full Replacement File 2023 Memo and continued updating *Medicare Part D Information Reporting Transaction Matching Best Practices* document for Telecommunication Standard VD.0.
- The **Definition of a Valid Prescriber Task Group** revised DERF 001933/ECL 00386 requesting removal of the value limitation on Submission Clarification Code value 49. They created and received approval for an FAQ to accompany DERF 001933/ECL 00386 to be published in the *Telecommunication Version D and Above Questions, Answers and Editorial Updates*. The task group also drafted a letter to be sent to CMS about the Preclusion List.
- The **Benefit Integration Task Group** continued review of an examples document for benefit synchronization and related layout documents. The task group also drafted updates to their scope to include synchronization. A summary of benefits of moving a standard to JavaScript Object Notation (JSON) was presented, and the work group voted to move the XML version of the Benefit Integration Standard to JSON.
- The **Clinical and Safety Edits Task Group** discussed the activity from February Work Group, and future work of the task group is dependent on feedback about Drug Utilization Review (DUR) codes from other task groups or new work as assigned.
- The **Telecommunication Agility Next Generation (TANG) Task Group** did not meet this quarter but will advocate for the DERFs that will revise data structures for the Telecommunication Standard in JSON.
- The **Pharmacy Services Billing Task Group** created a title and reviewed drafted sections of the Version D.0 S1 Implementation Guidance document. The task group also discussed incorporating recent regulatory updates related to pharmacist professional services in various states.
- The **Eligibility Verification Enhancements Task Group** did not meet this quarter. They will begin meeting again next quarter.
- The **Expanded Dollar Fields Task Group** did not meet this quarter.
- The **Post Adjudication Task Group** did not meet this quarter.
- The **Standardized Subrogation Task Group** did not meet this quarter. They will begin meeting again next quarter.

**Other Reportables:**
- **DSMO Change Request, MC RTPB Standard Task Group, MC REMS Workflow to Transaction Task Group** and **SNIP Committee**: Recaps for these topics, task groups and committee can be found in the WG1 download materials.

**New Business:**
- The **WG1 2022-2023 Accomplishments** presentation was given.

**Work Group 2 Product Identification**

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Work Group Recap 2 of 12 May 2023
Ballots Adjudicated:

- **Ballot WG020013** – Enhancements to the Product Identifier Standard Implementation Guide is considered a valid ballot having received the required 60+% of Consensus Group votes and 75+% approval rating. One affirmative vote with comment was received. WG2 reviewed and categorized the comment(s) as persuasive and editorial. See Letter Ballot Comment spreadsheet for the ballot results and categorization of the comment with reason on the WG02 webpage. The ballot will be sent to NCPDP Board of Trustees for approval after a 30-day appeal period.

DERFs Reviewed:

- DERF 001950 was pended.

Task Groups:

- The **Product Review and Billing Unit Exception Task Group** reviewed three QUIC forms and brought forth DERF 001950 requesting an update to the Product Identifiers Standard Sections 5.4 and 7.5. This DERF proposes moving the reformatting process from the FAQ into the body of the Product Identifier Standard as subsections under Section 5.4 Unique Device Identifier (UDI). The task group is working on a DERF to update FAQ 7.39 of the Billing Units Standard relating to quickly decaying radiopharmaceuticals and a DERF to add an FAQ for the genetic copy of measurements in reference to QUIC form 202204 HEMGENIX®. The task group will begin reviewing the Billing Unit Standard Implementation Guide for updates. Additionally, the task group will also be updating the publicly available NCPDP Billing Unit Standard Fact Sheet to include the kit definition.

- The **Naming Standards for Drugs, Biologics and Biosimilars Task Group** drafted a letter to the United States Food and Drug Administration (FDA) seeking clarification about Purple Book data on unbranded biologics and on the mutual substitutability of reference and interchangeable biosimilar products. Work Group 2 pended the letter back to the task group for additional modifications. The task group will continue working with the National Library of Medicine (NLM) on the modeling of a potential data solution via RxNorm. Additionally, the task group will create a second letter to the FDA seeking clarification on how indication-specific interchangeable biosimilar product data (e.g., for tumor necrosis factor [TNF] blockers such as adalimumab) will be incorporated into the Purple Book.

- The **Outsourcing Facility Task Group** is waiting on the NLM to work with the FDA to obtain data necessary for inclusion of 503B products in DailyMed automatically.

Other Reportables:

- **MC REMS Workflow to Transaction Task Group, MC NDC Scarcity Task Group and MC Digital Therapeutics Task Group**: Recaps are provided in the WG2 download materials.

- Chris Hui of NLM provided an update on RxNorm and DailyMed.
  - Patty Milazzo of Pharmacy Healthcare Solutions, LLC presented a letter in support of DailyMed. The letter was approved as modified.

New Business:

- **New QUIC Form Review**:
  - QUIC #202301 Xenoview Gas Blend for Hyperpolarization
    - WG2 approved assignment of BU = EA per 5.1.17 of the BUS with a package size of 1 for NDC (80534-6350-01). The task group will be updating the Billing Unit Standard Implementation Guide to include large package sizes and variable amount of patient ready doses.
  - QUIC #202302 OPVEE™
WG2 approved assignment of BU=EA per section 5.1.12 of the BUS with a package size of 2 for NDC (79095-003-02) and package size of 1 for each of the Inner packages NDC (75095-003-01).

- QUIC #202303 Bigfoot Unity® Program Kit
  - WG2 approved assignment of BU = EA per section 5.5.1 of the BUS with a package size of 1.

- The **WG2 Dates Associated with Pharmaceutical Products Task Group** was reactivated to review and update the Dates Associated with Pharmaceutical Products white paper.
- The **WG02 2022-2023 Accomplishments** presentation was given.

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

**Ballot Adjudicated:**

- **Ballot WG070015** – Enhancements to the Manufacturer Rebate Standard Implementation Guide Version 07.05 is considered a valid ballot having received the required 60+% of Consensus Group votes and 75+% approval rating. Two affirmative votes with comments were received. WG07 reviewed and categorized the comments as persuasive and editorial. See Letter Ballot Comment spreadsheet for the ballot results and categorization of comments with reasons on the WG07 webpage. The ballot will be sent to NCPDP Board of Trustees for approval after a 30-day appeal period.

**Task Groups:**

- The **Manufacturer Rebates Standard Task Group** reviewed questions submitted by WG9 related to the Medicare Part D Inflation Reduction Guidance. The task group reviewed and proposed ECL descriptions for the new data elements of Claim Prescription Number Sequence Source and Claim Resubmission Type Code. Ballot comments were submitted for these changes.
- The **Medical Rebate Standard Task Group** continued assessment of the current standard and reviewed recommendations for future changes. The task group will be finalizing a list of recommended/agreed upon changes and start preparing a DERF for a new version of the standard during the next quarter.
- The **Specialty Pharmacy Data Exchange Task Group** continued working on the Performance Metrics and conducted a survey of the membership which resulted in the task group beginning creation of a global status file. Input from manufacturers is needed to help create the global status file.

**New Business:**

- The **WG07 2022-2023 Accomplishments** presentation was given.

### Work Group 9 Government Programs

**Task Groups:**

- The **Prescription Drug Monitoring Programs Task Group** continued monitoring state prescription monitoring program (PMP) activity and updated the State PMP Tracking Document, which was approved for publication by WG9.
- The **Medicare Part D Coordination of Benefits Other Health Insurance (COB-OHI) Data Sharing Task Group** worked with the Centers for Medicare and Medicaid Services (CMS) on the Annual Full Replacement File requirements. The task group requested clarification on the definition of the 45 days for claims adjustment that can be used by auditors and for training purposes and is working on a memo with CMS on this topic. They looked at whether Part D plans should receive Medicaid OHI for Medicare Part D beneficiaries for nonintegrated dual members. The task group
received updates on various data and file issues and the subsequent clean-up of the respective records.

- The **Government Funded Entitlement Programs Sub-Task Group** collaborated with CMS, the Benefits Coordination and Recovery Center (BCRC) and the National Institute for Occupational Safety and Health (NIOSH) within the Centers for Disease Control and Prevention (CDC) to create a memo to raise industry awareness about the World Trade Center (WTC) Health Program. The memo was completed and is being reviewed by the WTC Health Program Office of General Counsel (OGC). The task group is partnering with the BCRC to identify a proof of concept at TRICARE to clean up duplicate records and conflicting information. Since Chapter 14 guidance is unclear regarding coordination of benefits with Medicaid, the task group is partnering with CMS and the Medicare-Medicaid Coordination Office to understand expectations from the federal and state level as well as partnering with Medicaid plans to provide real world examples.

- The **Workers’ Compensation Medicare Set-Aside Arrangement (WCMSA) Sub-Task Group** worked on updating Chapter 14, Section 50.12.1 to include new information regarding Medicare secondary payer (MSP) types and discussed how plans can most effectively get National Drug Code (NDC) information for WCMSA records. The sub-task group reviewed questions about the workers’ compensation OHI records document.

- The **Hospice Task Group** continued to review use case scenarios and provided an update on the pilot that went live in August 2022. The Hospice Election Status Transaction Payer Sheet was updated to remove reference to Medicare Beneficiary ID (MBI) referencing only cardholder ID and is available on the McKesson/RelayHealth MediFacD website. They added date of birth and gender reject codes to the Hospice Valid Reject List. The task group received approval to update their scope and goals.

- The **Medicare Financial Information Reporting (FIR) Task Group** completed a Health Plan Management System (HPMS) memo with recommended changes to handling of FIRs involving non-participating Program of All-Inclusive Care for the Elderly (PACE) plans and non-PACE plans that have bad BIN/Cardholder ID information. The memo was sent to CMS for approval and publication. A new Manual Retrigger Form for Multiple Plan Years is available for use and can be found on the Collaborative Workspace in the 4/26/2023 FIR call folder.


- The **Inflation Reduction Act (IRA) Copay Smoothing Sub-Task Group** reviewed a number of scenarios which would allow a patient to pay zero copay at the point of service when they enroll in a copay smoothing program. There are many challenges for implementation and this group is reviewing and capturing information to create a process.

- The **Insulin Pump Sub-Task Group** discussed short and long-term solutions needed on both the prescription intake side (SCRIPT) as well as the adjudication side.

- The **Medicare Part D Section 111 Issues and Questions Task Group** reviewed updates to the CMS Non-Group Health Plan (NGHP) and Group Health Plan (GHP) Section 111 User Guide. The proposed rule was expected to be finalized in February 2023 but has been extended for one year.
to allow more time to analyze the financial impact the proposed penalties will have on reporting entities. They reported on a CMS webinar for required reporting entities to share best reporting practices for Section 111 GHP reporting to help reduce the number of rejected records being reported. They also reported on a CMS article on the top errors for Section 111 reporting from July 22 to Dec 22.

- The **Medicare Prescription Drug Event (PDE) Task Group** reviewed several existing and new questions with the members. They reviewed the CMS memo, “Part D Inflation Rebate Guidance,” Section 40.2.5.

- The **Medicaid Pharmacy Encounters Reporting Standard Task Group** submitted a formal letter to Kate McEvoy, Executive Director of the National Association of Medicaid Directors (NAMD) promoting the adoption and implementation of the new Medicaid Pharmacy Encounter Reporting Standard. They worked with NCPDP marketing to discuss and share ideas on promotional opportunities to further educate the industry and state Medicaid agencies about the new standard.

- The **Medicaid Frequently Asked Questions Task Group** reviewed Section 210 of the Consolidated Appropriations Act of 2021 (PROMOTING ACCESS TO LIFE-SAVING THERAPIES FOR MEDICAID ENROLLEES BY ENSURING COVERAGE OF ROUTINE PATIENT COSTS FOR ITEMS AND SERVICES FURNISHED IN CONNECTION WITH PARTICIPATION IN QUALIFYING CLINICAL TRIALS). The task group decided against a DERF to enumerate a new SCC value for clinical trial participation.

- The **340B Task Group** did not meet this quarter.

- The **Medicare Standardized Fraud, Waste and Abuse Training Attestation Task Group** did not meet this quarter.

**New Business:**

- A **WG9 2022-2023 Accomplishments** presentation was given.

**Work Group 10 Professional Pharmacy Services**

**Task Groups:**

- The **MTM and Pharmacist Clinical Services Task Group** is still waiting for the HL7® Patient Care Work Group (PCWG) to ballot the Multiple Chronic Condition (MCC) Dynamic Electronic Care (eCare) Planning and Management Fast Health Interoperability Resource (FHIR®) Implementation Guide profile for patients and clinical team (MCC eCare Plan efforts). The MCC eCare Plan Implementation Guide will go through a NCPDP comment only ballot first and then is scheduled for HL7® ballot in September 2023. The task group worked on addressing feedback from the Standardization Committee on the Beneficiary Level Reporting (BLR) White Paper document. NCPDP/HL7® Pharmacist eCare Plan C-CDA template and Fast Healthcare Interoperability for FHIR® release 4 was published by HL7® and NCPDP. The task group needs to be thinking about US Core (The US Core Implementation Guide is based on FHIR® Version R4 and defines the minimum set of constraints on the FHIR® resources to create the US Core Profile FHIR® v4.0.1) and FHIR® release 5, which is currently being developed.

- The **Pharmacogenomics Task Group** continued to review pharmacogenomics (PGx) use cases related to pharmacy and laboratory PGx data exchanges. A Precision Medication Stakeholder Action Group (SAG) was held in person at the NCPDP corporate office in Scottsdale, AZ, March 8, 2023. They reviewed the article “A 12-gene pharmacogenetic panel to prevent adverse drug reactions: an open-label, multicentre, controlled, cluster-randomised crossover implementation study” and the article “Clinical use of pre-emptive pharmacogenetic programmes.” They started working on a PGx workflow.
• The **WG14/WG10 Standardized Medication Profile Task Group** continues to work on two projects. The first project is to write a white paper or guidance document to assist application programming interface (API) vendors in accessing medication lists and performing medication reconciliation. The second project will be building a standard FHIR® resource for a standardized medication profile (SMP) based off the NCPDP/HL7® Standardization Medication Profile Guidance white paper.

• The **Identification of Social Determinants of Health Task Group** continued to work on the white paper to address recommendations for social determinants of health in the pharmacy within NCPDP standards. They worked on comments from the NCPDP standards review team. They are working to ensure the paper focuses on an external audience versus an informational document for Council reference.

• The **WG10/WG11 Patient Consent Task Group** worked toward supporting the two-priority task group business cases within the NCPDP/HL7® Specialty Medication Enrollment FHIR® Implementation Guide (Unsolicited Consent transmission (priority), Consent Request/Response from the dispenser to the prescriber/clinic (priority) and Consent Notification during the encounter). Public ballot reconciliation calls for the September 2022 HL7® Ballot of consent additions to the Specialty Medication Enrollment FHIR IG (STU2) were completed in December 2022, and they worked on applying the resolutions to the implementation guide. They are also working with the HL7® parent workgroup, Pharmacy, as well as the US Realm group to complete sign-off from the FHIR® Management Group (FMG). The task group received approval to update their scope and goals.

Other Reportables:
• **WG1 Pharmacy Services Billing Task Group and WG14 Consultant Pharmacist Interoperability Task Group**: Recaps for these task groups can be found in the WG10 download materials.

New Business:
• A **WG10 2022-2023 Accomplishments** presentation was given.

**Work Group 11 ePrescribing & Related Transactions**

**Ballots Adjudicated:**
• **Ballot WG110092** – Enhancements to the SCRIPT, Specialized and XML Standard Implementation Guides Version 2023071 is considered a valid ballot having received 60+% of the Consensus Group votes and 75+% approval rating. Five affirmative votes with comments were received. WG11 reviewed and categorized the comments as persuasive and editorial. See Letter Ballot Comment spreadsheet for the ballot results and categorization of comments with reasons on the WG11 webpage. The ballot will be sent to NCPDP Board of Trustees for approval after a 30-day appeal period.

• **Ballot WG110093** – Enhancements to the Formulary and Benefit Operating Rules is considered a valid ballot having received 60+% of the Consensus Group votes and 75+% approval rating. One affirmative vote with comment was received. WG11 reviewed and categorized the comment as persuasive and editorial. See Letter Ballot Comment spreadsheet for the ballot results and categorization of the comment with reason on the WG11 webpage. The ballot will be sent to NCPDP Board of Trustees for approval after a 30-day appeal period.

**DERFs Reviewed:**
• DERF 001951/ECL 000392 was recommended to MC to approve as modified.
• DERF 001952 was pended.
• DERF 001953/ECL 000393 was recommended to MC to approve as modified.
- DERF 001954 was pended.
- DERF 001955 was approved.
- DERF 001956 was approved as modified.

Task Groups:
- The **Dispensed Medication Reporting Task Group** did not meet this quarter.
- The **ePrescribing Regulatory Task Group** did not meet this quarter.
- The **Formulary and Benefit Task Group** has a small group breaking down the Formulary and Benefit Standard Version 3.0 to Version 60 into its components to make recommendations supporting forward and backward compatibility.
- The **Implementation of Structured Sig Task Group** reviewed the Sig related topics in the SCRIPT Implementation Recommendations document and the SCRIPT Standard Implementation Guide for possible modification. The task group will begin working on a webinar to help with implementing the structured and codified Sig to be presented later this summer.
- The **Pharmacy Product Locator Task Group** did not meet this quarter.
- The **Prior Authorization Workflow-to-Transactions Task Group** brought forth two DERFs:
  - DERF 001951/ECL 00392 requesting new ReasonCode Values for the PAInitiationResponse and PAResponse messages with a response of “Closed”.
  - DERF 001954 for a new data element of FirstQuestionID.
- The **RxChange Group** completed a full review of the SCRIPT Implementation Recommendations document related to RxChange messages and received approval for updated guidance.
- The **SCRIPT Implementation Recommendations Task Group** brought forth three DERFs:
  - DERF 001952 requesting and update to the definition of OtherMedicationDateQualifier and two new ECL values.
  - DERF 001955 request to remove Section 5.15.9 from the SCRIPT Standard Implementation Guide.
  - DERF 001956 requests a new data element of Credentials be added to the NameType. They received approval for two modifications to the SCRIPT Implementation Recommendations document. Three additional requests to be added to the SCRIPT Implementation Recommendations document were pended back to the task group.
  - The **RxRenewal Review Sub-Task Group** is reviewing and revising the guidance and best practices for the RxRenewalRequest and RxRenewalResponse in applicable SCRIPT Implementation Guides, Data Dictionary and ECL to reduce ambiguity and add clarity.
- The **XML Task Group** brought forth a recommendation to move the SCRIPT and Specialized Standards schema from XML to JSON. The work group approved the recommendation. They received approval to rename the task group to the WG11 XML and JSON Task Group and to change the scope to, “This task group reviews and provides guidance on the XML and JSON formats for the WG11 SCRIPT and Specialized standards, including the XML Standard.”
- The **WG10/WG11 Patient Consent Task Group** worked toward supporting the two-priority task group business cases within the **NCPDP/HL7® Specialty Medication Enrollment FHIR® Implementation Guide** (Unsolicited Consent transmission (priority), Consent Request/Response from the dispenser to the prescriber/clinic (priority) and Consent Notification during the encounter). Public ballot reconciliation calls for the September 2022 HL7® Ballot of consent additions to the Specialty Medication Enrollment FHIR IG (STU2) were completed in December 2022, and they worked on applying the resolutions to the implementation guide. They are also working with the HL7® parent workgroup, Pharmacy, as well as the US Realm group to complete sign-off from the FHIR® Management Group (FMG). The task group received approval to update their scope and goals.
• The **WG14/WG11 LTPAC ePrescribing Task Group** requested one new FAQ for inclusion in the *SCRIPT Implementation Recommendations* document that was pended back to the task group. The task group also received approval from WG14 Long Term Post Acute Care to change the task group scope.

Other Reportables:

• **MC Real-Time Prescription Benefit Task Group, MC REMS Workflow to Transactions Task Group and MC Standard Message Structure Task Group:** Recaps for these task groups can be found in the WG11 download materials.

• SCRIPT Version 2017071 NSC-11 certified members were recognized.

• Chris Hui of the National Library of Medicine (NLM) provided an RxNorm and NLM update.
  o Patty Milazzo of Pharmacy Healthcare Solutions, LLC reviewed a letter in support of DailyMed which was approved as modified in WG2 Product Identification.

New Business:

• The **WG11 2022-2023 Accomplishments** presentation was given.

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

Task Groups:

• The **LTPAC Billing Issues Task Group** submitted D.0 to F6 Transition Guidance for LTPAC to the SNIP Committee to be reviewed for feedback. The task group will continue to review comments and update guidance. The task will continue reviewing and updating Version D Editorial Document for language related to LTPAC Short Cycle and Submission Clarification Codes (SCC) to replace with LTPAC Dispense Frequency where applicable in Telecommunication Standard Version F6. Additionally, the task group will review the Dispense Frequency Combinations Spreadsheet and work with the WG1 Invalid SCC Combinations Sub-Task Group to review the SCC combinations when an SCC is used to override Refill Too Soon.

• The **Consultant Pharmacist Interoperability Task Group** the HL7®/NCPDP Informative Document: Pharmacist Consultation Note, Release 1 has been jointly published by HL7® and NCPDP. This is an update to the previously published NCPDP Consultant Pharmacist Consult Note Version 1.0 guidance. This updated guidance incorporates HL7® FHIR® resources and expands the target audience beyond LTC consultant pharmacists.

• The **Long Term and Post Acute Care ePrescribing Task Group** received approval to change the scope and goals. Topic 67: *Ability to tag an order when the prescriber does not provide an NDC* was pended back to the task group in WG11.

• The **WG14/WG10 Standardized Medication Profile Task Group** continues to work on two projects. The first project will be to write a white paper or guidance document to assist application programming interface (API) vendors in accessing medication lists and perform medication reconciliation. The second project will be building a standard FHIR® resource for a standardized medication profile (SMP) based off the HL7®/NCPDP Standardized Medication Profile Guidance white paper.

Other Reportables:

• **WG1 Eligibility Verification Task Group, WG9 Medicare Part D FAQ Task Group, WG9 Hospice Task Group and WG1 Clinical and Safety Edits Task Group:** Recaps are provided in the WG14 download materials.

• Gary Schoettmer provided a LTPAC industry update.

New Business:

• The **WG14 2022-2023 Accomplishments** presentation was given.
**WG20 Coordination of Care and Innovation**

New Business:
- The 2023 WG20 Scope and Goals were reviewed and provisionally approved as modified.
- The Work Group received a presentation about the existing task groups in other work groups which may be of interest to Work Group 20.

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

Task Groups:
- The **Pharmacy and/or Combination ID Card Task Group** discussed Arkansas House Bill 1273 and determined no action is needed by the task group. The bill is covered under section 4 of the Pharmacy and/or Combination ID Card Implementation Guide and aligns with requirements of other states.
- The **834/835 FAQ Task Group** did not meet this quarter. They will meet again when X12 responds to their request for interpretation.
- The **Document Revisions Task Group** began reviewing the Claim Adjustment Reason Code (CARC) Mapping document based on feedback from the February 2023 Work Group. They are reviewing descriptions and situations and evaluating the need for the Electronic, Paper and Group columns.
- The **DSMO Task Group** received no DSMO requests for review.
- The **Benefit Coverage Identification Task Group** kicked off a collaboration with CAQH CORE and will continue to receive updates from the CAQH CORE/NCPDP subgroup on their work.

Other Reportables:
- Leslie Carr of NCPDP provided industry updates for WEDI, NCPDP SNIP, CAQH CORE and X12.

New Business:
- The **WG45 2022-2023 Accomplishments** presentation was given.

**MC Maintenance and Control**

Ballots Adjudicated:
- **Ballot WGMC0012** – Enhancements to the Real-Time Prescription Benefit Standard Implementation Guide Version 14 is considered a valid ballot having received the required 60+% of Consensus Group votes and 75% approval rating. One affirmative vote with comment was received. WGMC reviewed and categorized the comment as persuasive and editorial. See Letter Ballot Comment spreadsheet for the ballot results and categorization of comment with reason on the WGMC webpage. The ballot will be sent to NCPDP Board of Trustees for approval after a 30-day appeal period.

DERFs/ECLs: Eight new and one pended DERFs/ECLs were reviewed (see WG1, WG2 and WG11).
- DERF 001933/ECL 000386 was approved as modified.
- DERF 001949 was pended.
- DERF 001950 was pended.
- DERF 001951/ECL 000392 was approved as modified.
- DERF 001952 was pended.
- DERF 001953/ECL 000393 was approved as modified.
- DERF 001954 was pended.
- DERF 001955 was approved.
• DERF 001956 was approved as modified.

Task Groups:

• The Education/Legislation and Regulations Task Group reviewed and submitted an NCPDP response to the Centers for Medicare & Medicaid Services (CMS) Notice of Proposed Rulemaking (NPRM) (CMS-0053-P) about standards for “health care attachments” transactions and to Office of the National Coordinator for Health Information Technology (ONC) Draft United States Core Data for Interoperability (USCDI v4). The task group began to review the ONC Health Data, Technology, and Interoperability (HTI-1) NPRM.

• The Emergency Preparedness Task Group reviewed various fact sheets outlining the impact of the upcoming end of the Public Health Emergency (PHE) on different lines of business. The task group reported the Paxlovid Patient Assessment pNDC will likely not be sunset until the Telecommunication Service Billing (S1) transaction is implemented in the industry. The pNDC is tied to the Emergency Use Authorization which is not tied to the PHE.

• The X12 TR3 Comment Consolidation Task Group did not meet this quarter.

• The Real Time Prescription Benefit Standard (RTPB) Task Group discussed the standard supporting the use case of multi-threaded medication request transactions and an indicator about receiving alternatives on the response. The task group agreed to move the RTPB Standard to the JSON format based on the recommendation of the MC Standards Message Structure Harmonization Task Group. The work group voted to approve the move to JSON for the RTPB Standard.
  - The Consumer and Provider RTPB Standards Monitoring Sub-Task Group reviewed new state legislative activity for Illinois (House Bill 1348 & Senate Bill 1618), Texas (House Bill 1754 & Senate Bill 622), New York (Assembly 02200) and Virginia (Senate Bill 1261). The sub-task group identified no concerns with the HL7® FHIR® CARIN Consumer Real-Time Pharmacy Benefit Check supporting the requirements in the bills.
  - The Related RTPB Law Review Sub-Task Group reviewed and evaluated legislation passed or proposed for California, Illinois, Massachusetts, Minnesota, New York, Oregon, Texas and Virginia. The sub-task group identified no concerns with the RTPB Standard’s ability to support the requirements in the bills.

• The Digital Therapeutics (DTx) Task Group discussed action items assigned to the task group as a result of the Digital Therapeutics Alliance DTx Integration and Workflow Report. The task group updated their scope statement. The work group approved the change in scope.

• The NDC Scarcity Task Group reviewed GS1’s comments to the United States Food and Drug Administration (FDA) NPRM on revising the National Drug Code (NDC) format and developed questions for GS1. A small working group developed a survey to determine the impact of the two options of expanding the NDC to 12 digits or incorporating alpha characters into the existing five-digit labeler codes. The work group approved the survey as modified.

• The REMS Workflow to Transactions Task Group continued to partner with HL7®/CodeX™ to harmonize between standards across stakeholders and to review ReasonCode values applicable to REMS transactions. The task group initiated a review of an FDA request for comments regarding the timing and logistical considerations when there are changes to REMS programs.

• The NCPDP Standards Message Structure Harmonization Task Group presented a webinar on March 15, 2023, regarding their efforts and recommendations. The recommendations were reviewed, and any questions were answered in the WG1 Benefit Integration, MC Real Time Prescription Benefit Standard and WG11 XML Task Groups and during MC.
• The **Barcode Utilization Task Group** continued to work on updates to the NCPDP GS1 DataMatrix White Paper. The task group also drafted a survey regarding barcode utilization in the pharmacy. The work group approved the survey.

**Other Reportables:**
- Received updates for:
  - SNIP Committee
  - HIPAA
  - DSMO Change Request System (CRS) Requests No. 1201, 1202 and 1208

**New Business:**
- The attendees received recaps of each Work Group’s activities.
- The **MC 2022-2023 Accomplishments** presentation was given.
- The 2023-2024 Work Group Co-Chairs were announced.
- The **MC Management of Non-NCPDP Code Sets Task Group** was formed to develop pharmacy specific subsets of values in code lists external to NCPDP.