Work Group 1 Telecommunication

DERFs Reviewed:

- DERF 001949 was withdrawn.
- DERF 001957/ECL 000394 was recommended to MC to approve as modified.
- DERF 001958/ECL 000395 was recommended to MC to pend.
- DERF 001959/ECL 000396 was recommended to MC to approve.
- DERF 001960/ECL 000397 was recommended to MC to pend.
- DERF 001961/ECL 000398 was recommended to MC to approve.
- DERF 001962/ECL 000399 was recommended to MC to approve as modified.
- DERF 001963/ECL 000400 was recommended to MC to approve.
- DERF 001964/ECL 000401 was recommended to MC to approve as modified.
- DERF 001965/ECL 000402 was recommended to MC to approve as modified.
- DERF 001966/ECL 000403 was recommended to MC to pend.
- DERF 001967/ECL 000404 was recommended to MC to approve.

Task Groups:

- The Telecommunication FAQ Task Group reviewed a business case where a product is being dispensed in place of a product in short supply or not available from the manufacturer and a business case for claims over $999,999.99. The task group discussed the use of Patient Residence Code “10” and the reasons why the code is not applicable to pharmacy benefits and discussed the use of the “captured” status on service billing transactions. The task group reviewed and made no suggested modifications to previously pended DERF 1949 and a future DERF drafted by the Invalid SCC Combinations Sub-Task Group. The task group also reviewed the Medicare Prescriber Matrix and Decision Flow diagram and the Medicaid Prescriber Matrix and Decision Flow diagram updated/drafted by WG1 Definition of a Valid Prescriber Task Group.
  - The Invalid SCC Combinations Sub-Task Group completed their assessment of the various Submission Clarification Code (SCC) combinations by grouping the values by category. The sub-task group is working on guidance around which categories may be combined with other categories and which values within categories may be combined. A DERF is being drafted to update the Starter Dose description for SCC value 6.
  - The Adjudicated Program Type Sub-Task Group created a DER for six new Adjudicated Program Types and is considering modifications to existing values. The DERF was approved after a modification at Work Group to remove the Medicaid Fee-For-Service (FFS) value.

- The P and C/WC Monitoring, Billing and Education Task Group did not meet this quarter.
- The Coordination of Benefits (COB) Task Group continued drafting transition guidance from Telecommunication Standard Version D.0 to F6, began work on Other Payer Amount Paid (OPAP)
COB for F6 Examples Guide and added two FAQs to the COB FAQ document. Feedback is needed from COB payers on the use of the Benefit Stage Amount (394-MW).

- The **Information Reporting Problems Task Group** drafted a scope update which was approved at the Work Group meeting, reviewed DERF 001957/ECL 000394 requesting new values added to the Adjudicated Program Type Shared Code List and applied Standardization Committee feedback before publishing the *NCPDP Guidance for ADAPs and Qualified SPAPs Medicare Part D Coordination of Benefits Requirements and Responsibilities Version 4*.

- The **Definition of a Valid Prescriber Task Group** continued working on prescriber related updates to the Telecommunication Standard Version D.0 Editorial document. They created a Medicaid prescriber matrix and flow and updated the Medicare prescriber matrix and flow. They also answered questions from the WG1 Invalid SCC Combinations Sub-Task Group.

- The **Benefit Integration Task Group** continued review of an examples document for benefit synchronization and related layout documents.

- The **Clinical and Safety Edits Task Group** discussed feedback from WG11 SCRIPT Implementation Recommendations Task Group regarding Drug Utilization Review (DUR) values and submitted a DERF to remove two of the values. The DERF was pended and will be discussed at the next task group meeting.

- 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** finished drafting sections for purpose, scope history/timelines and billing options of the Telecommunication Standard Version D.0 S1 Implementation Guidance document. Additional sections will be drafted next quarter.

- The **Eligibility Verification Enhancements Task Group** reviewed the CMS Medicare E1 response enhancements that include Medicare Advantage Plan Type and Qualified Medicare Beneficiary information. Test cases have been published on the MediFacD website.

- The **Expanded Dollar Fields Task Group** began reviewing a question about million-dollar claims that was transferred from WG1 Telecommunication FAQ Task Group.

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

- The **Standardized Subrogation Task Group** drafted a scope update, made administrative updates to the Batch Standard Subrogation Implementation Guide and began developing transition guidance for Medicaid subrogation.

Other Reportables:

- **DSMO Change Request, WG19 Real-Time Prescription Benefit Standard Task Group, WG19 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 Scope and Goals** were reviewed and approved as modified.

**Work Group 2 Product Identification**

DERFs Reviewed:

- DERF 001950 was approved.

Task Groups:

- The **Product Review and Billing Unit Exception Task Group** reviewed three QUIC forms and approved pended DERF 001950 requesting an update to the Product Identifiers Standard Sections 5.4 and 7.5. This DERF proposed 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).
Changes to the publicly available Billing Unit Standard (BUS) facts sheet to include kit definition were approved. The task group is working on a DERF to update FAQ 7.39 of the Billing Unit 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 has begun reviewing the Billing Unit Standard Implementation Guide for updates. Additionally, the task group is reviewing and discussing the processes potentially impacted by AdvaMed’s position paper on replacing the NDC acronym with National Reimbursement Code (NRC) acronym on the labels for medical devices.

- The **Naming Standards for Drugs, Biologics and Biosimilars Task Group** and the work group approved the pended letter to the FDA seeking clarification about *Purple Book* data on unbranded biologics and on the mutual substitutability of reference and interchangeable biosimilar products. The task group will continue working with the National Library of Medicine (NLM) on the modeling of a potential data solution via RxNorm.

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

- The **WG2 Dates Associated with Pharmaceutical Products Task Group** is reviewing the dates used by the compendia, FDA and Centers for Medicare & Medicaid Services (CMS) included in the Dates Associated with Pharmaceutical Products white paper. The task group is also considering the inclusion of additional dates in the paper.

Other Reportables:

- **WG19 REMS Workflow to Transaction Task Group, WG19 NDC Scarcity Task Group and WG19 Digital Therapeutics Task Group**: Recaps are provided in the WG2 download materials.

- Tammy Powell of NLM provided an update on RxNorm and DailyMed.

New Business:

- **New QUIC Form Review and Final Adjudication**:
  - QUIC #202304 OLPRUVA™ for Oral Suspension
    - WG2 approved assignment of BU = EA per sections 5.3.3, 5.1.8 and 5.1.18 of the BUS with a package size of 180 for the 2gm (72542-200-09) and 3gm (72542-300-09) packages and 270 for 4gm (72542-400-18), 5gm (72542-500-18), 6gm (72542-600-18) and 6.67gm (72542-667-18) packages
  - QUIC #202305 SUFLAVE™
    - WG2 approved assignment of BU = EA per section 5.1.8 of the BUS with a package size of 2.
  - QUIC #202306 NT-501
    - WG2 approved assignment of BU = EA per sections 5.1.7 and 5.1.14 of the BUS with a package size of 1.

- The **WG2 Scope and Goals** were reviewed and approved as modified.

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

Task Groups:

- The **Manufacturer Rebates Standard Task Group** heard an update on the approval of Ballot WG070015 from the May Work Group meeting, began the analysis and evaluation of past DERFs for data elements used in the Manufacturer Rebate Standard and the Telecommunication Standard. The task group developed action items for the incorporation of the changes into the Manufacturer Rebate Standard.
• The Medical Rebate Standard Task Group met this quarter, but no recap report was submitted.
• The Specialty Pharmacy Data Exchange Task Group requested task group participation from manufacturers to discuss standardizing the global status file. The task group also reviewed status file fields to determine statuses and sub-statuses, discussed the global status file and determined there are sub-statuses to be considered and reviewed a DERF from the WG1 Adjudicated Program Type Sub-Task Group to determine if the new values are applicable to the Specialty Pharmacy Data Reporting Standard.

New Business:
• The WG07 Scope and Goals were reviewed and approved.

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 task group received approval to update their scope statement as modified.
• The Medicare Part D Coordination of Benefits Other Health Insurance (COB-OHI) Data Sharing Task Group discussed potentially reordering of payer order due to new payers needing a higher payer order than AIDS Drug Assistance Program (ADAP), reviewed CMS change request status updates and discussed the CMS memo Coordination of Benefits-Other Health Insurance (COB-OHI) Record Updates Due to New Hierarchy Rules and how the new hierarchy rules will limit changes for Medicare Part D.
  o 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. Additional changes were made to the memo by the task group. The memo is currently under review by the WTC Health Program Office of General Counsel (OGC). The sub-task group also started discussions about Medicaid and Medicare.
  o The Workers’ Compensation Medicare Set-Aside Arrangement (WCMSA) Sub-Task Group discussed what can be done to attempt to satisfy Chapter 14, Section 50.2.5 until COB-OHI file can be updated to include affected drug information and developed and proposed changes to the CMS WCMSA Reference Guide and WCMSA Self-Administration Toolkit to advise administrators of plan responsibilities. The sub-task group changed their call cadence to meet bi-weekly.
• The Hospice Task Group continued to review the processing guidelines document and provided an update on the pilot that went live in August 2022.
• The Medicare Financial Information Reporting (FIR) Task Group completed a CMS 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 published by CMS in July. The task group began drafting changes to the Medicare Part D Transaction Facilitator (MediFacD) website. The task group received approval to update their scope statement as modified.
• The Medicare FAQ Task Group reviewed three CMS memos, Medicare Drug Price Negotiation Program: Initial Memorandum, Implementation of Section 1191 – 1198 of the Social Security Act for Price Applicability Year 2025 and Solicitation of Comments, Refunds of Excess Cost Sharing
and Part D Manufacturer Discount Program – Draft Guidance 05122023. The task group received approval to publish two revised FAQs about pharmacy price concessions. The FAQs are published in the Medicare FAQ document.

- The Inflation Reduction Act (IRA) Copay Smoothing Sub-Task Group continued to review two potential scenarios which would allow a patient to pay zero copay at the point of service when they enroll in a copay smoothing program. The sub-task group drafted two DERFs for new approved message codes and reject codes. Both DERFs were approved in WG1, but the reject code DERF also had a modification for a third value. The sub-task group requested and received approval to become a full task group under WG9.
- The Insulin Pump Sub-Task Group partnered with the WG11 SCRIPT Implementation Recommendations (SIR) Task Group to publish two FAQs which address how prescribers can use the current and future versions of SCRIPT to communicate the specific delivery method for the prescribed insulin product (i.e., durable or disposable insulin pump/drug delivery system). The sub-task group continued discussions about the need for short and long-term solutions. The sub-task group also received approval from the parent task group to update their scope statement.

- The Medicare Part D Section 111 Issues and Questions Task Group reviewed updates to the CMS Group Health Plan (GHP) Section 111 User Guide, published in April 2023 and the Top 10 Section 111 GHP Reporting Errors, also released by CMS. The task group also discussed the best practices for reporting addresses.
- The Medicare Prescription Drug Event (PDE) Task Group reviewed the PDE outbound layout, reviewed and discussed three CMS memos and reviewed the open questions list. As a result of reviewing the open questions, ten questions were closed and seven were resubmitted to CMS.
- The Medicaid Pharmacy Encounters Reporting Standard Task Group focused on comparing the Medicaid Pharmacy Encounter Standard to the Telecommunication Standard vF6. The task group also added a new co-lead.
- The Medicaid FAQ Task Group provided feedback on a DERF drafted by the WG1 Adjudicated Program Type Sub-Task Group and requested the addition of a new value for Medicaid FFS and a future update to the existing value 01 “Medicaid Title XIX”. At Work Group, the Medicaid FFS value was removed from the DERF and will be included on a future DERF.
- 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:
- The WG9 Scope and Goals were reviewed, modified and approved as modified.
- The WG9 Maximum Fair Price Front-End Flow Task Group and WG9 Maximum Fair Price Back-End Processing Task Group were formed to create a process with the least impact to all entities involved that will provide an implementation method for reimbursement and reporting of the difference between the standard drug price and the Maximum Fair Price amount.

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). NCPDP/HL7® Pharmacist eCare Plan C-CDA template and Fast Healthcare Interoperability for FHIR® release 4 is published
by HL7® and NCPDP. The MCC eCare Plan Implementation Guide will go through a comment only ballot first and then is scheduled for ballot in September 2023. The task group completed additional work on a Beneficiary Level Reporting (BLR) White Paper. They addressed all outstanding points raised by the Standardization Committee, and the white paper was published in July. 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 worked on.

- The Pharmacogenomics Task Group continued to review pharmacogenomics (PGx) use cases related to pharmacy and laboratory PGx data exchanges. The task group continued to review action items from the March 2023 Precision Medication Stakeholder Action Group (SAG). They continued 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 API vendors accessing medication lists and performing medication reconciliation. As part of that process, they are following the HL7® Electronic Health Record (EHR) Work Group Reducing Clinical Burden (RCB) Medication Reconciliation Burden Reduction Focus Team, which meets the 1st Wednesday of every month at 5-6PM EST. The second project will be to build a standard FHIR® resource for a standardized medication profile (SMP) based off the HL7®/NCPDP Standardized Medication Profile white paper.


- 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). In May, HL7® published the updated Specialty Medication Enrollment FHIR® IG (STU2) that includes the patient consent content balloted in September 2022. The task group reviewed the FHIR® Resource Questionnaire as a potential option to be added to the Specialty Medication Enrollment Implementation Guide’s consent workflow. This would provide a way for the requester to supply questions in a discrete data format and would enable additional system options for the patient/provider to complete and return the answers.

- The mL White Paper Task Group did not meet this quarter. Key authors of the NCPDP Recommendations for Standardizing Dosing in Metric Units (mL) on Prescription Container Labels of Oral Liquid Medications V2.0 have been engaged to compare newly published materials on the topic to the recommendations in the white paper. Once feedback from the authors is received, a task group call will be scheduled to determine if updates to the white paper are needed.

Other Reportables:

- WG1 Pharmacy Services Billing Task Group and WG14 Consultant Pharmacist Interoperability Task Group: The recap for these task groups can be found in the WG10 download materials.

New Business:

- The WG10 Scope and Goals were reviewed, modified and approved as modified.
Work Group 11 ePrescribing & Related Transactions

DERFs Reviewed:
- DERF 001952 was withdrawn.
- DERF 001954 was pended.
- DERF 001962 was approved as modified.

Task Groups:
- The Dispensed Medication Reporting Task Group was disbanded.
- The ePrescribing Regulatory Task Group did not meet this quarter.
- The Formulary and Benefit Task Group completed the Formulary and Benefit Standard Version 3.0 to Version 60 crosswalk which will be used to create transition guidance.
- The Implementation of Structured Sig Task Group received approval to publish the updated Sig Grammar rules in the SCRIPT Implementation Recommendations document. The task group continued working on a webinar to help with implementing the structured and codified Sig.
- The Pharmacy Product Locator Task Group did not meet this quarter.
- The Prior Authorization Workflow-to-Transactions Task Group brought forth previously pended DERF 001954 for a new data element of FirstQuestionID. The DERF was pended again. The task group received approval for the FAQs associated with Determining the First Question and Question Set Flow for inclusion in the SCRIPT Implementation Recommendations document and approval to update the task group scope.
- The RxChange Group received approval to publish a new question related to the element of ChangeReasonText in the SCRIPT Implementation Recommendations document.
- The SCRIPT Implementation Recommendations Task Group received approval for the following additions/modifications to the SCRIPT Implementation Recommendations document.
  - An FAQ for Mononymous (singular) legal name.
  - A discrepancy in the SCRIPT Implementation Recommendations document related to patient weight.
  - Two new FAQs related to prescriptions for insulin when used in an insulin pump.
  - An FAQ related to the Narcotic Addiction DEA Number (NADEAN).
  - A new FAQ related to the use of the CancelRx message for veterinarian prescriptions.
- It was determined the Electronic Signature White Paper is still needed. A small group will be created to work on the necessary updates.
  - The RxRenewal Review Sub-Task Group reviewed the definition of fillable and non-fillable prescriptions/medication orders and worked on a definition for the element PrescriberAgent.
- The XML and JSON Task Group began the work necessary to move the XML schema to the JSON format which includes initial schema conversion, creation of a macro to correct issues found during the conversion and reviewing the compatibility with OpenAPI specifications.
- 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). In May, HL7® published the updated Specialty Medication Enrollment FHIR® IG (STU2) that includes the patient consent content balloted in September 2022. The task group reviewed the FHIR® Resource Questionnaire as a potential option to be added to the Specialty Medication Enrollment Implementation Guide’s consent workflow. This would provide a way for the requester to supply questions in a discrete data format and would enable additional system
options for the patient/provider to complete and return the answers.

- The **WG14/WG11 LTPAC ePrescribing Task Group** reviewed Topic 76: Question from the WG11 RxRenewal Sub-Task Group regarding the definition for `<PrescriberAgent>` and proposed a definition to the sub-task group. The task group will continue reviewing Topic 67: Ability to tag an order when the prescriber does not provide an NDC and Topic 75: Question on Resupply. The task group will be submitting a DERF for November which will increase the note element in FillStatus to 210 characters.

**Other Reportables:**

- **WG1 Eligibility Verification Enhancements Task Group, WG1 Telecommunication Agility Next Generation Task Group, WG19 Real-Time Prescription Benefit Task Group, WG19 REMS Workflow to Transactions Task Group and WG19 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.**

**New Business:**

- The **WG11 Scope and Goals** were reviewed and approved.

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

**Task Groups:**

- The **LTPAC Billing Issues Task Group** reviewed Submission Clarification Code (SCC) combinations as requested by the WG1 Invalid SCC Combination Sub-Task Group who will publish any necessary guidance. The task group is waiting for SNIP to review and approve changes made to the Dispense Frequency Combinations spreadsheet based upon their recommendations. The task group will continue to review and update the Editorial Document for Telecommunication Version F6. Additionally, an FAQ will be completed for the information not clearly identified in the F6 implementation guide regarding the dispensing fee.

- The **Consultant Pharmacist Interoperability Task Group** did not meet this quarter.

- The **WG14/WG11 Long Term and Post Acute Care ePrescribing Task Group** reviewed Topic 76: Question from the WG11 RxRenewal Sub-Task Group regarding the definition for `<PrescriberAgent>` and proposed a definition to the sub-task group. The task group will continue reviewing Topic 67: Ability to tag an order when the prescriber does not provide an NDC and Topic 75: Question on Resupply. The task group will be submitting a DERF for November which will increase the note element in FillStatus to 210 characters.

- 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 API vendors accessing medication lists and performing medication reconciliation. As part of that process, they are following the HL7® Electronic Health Record (EHR) Work Group Reducing Clinical Burden (RCB) Medication Reconciliation Burden Reduction Focus Team, which meets the 1st Wednesday of every month at 5-6PM EST. The second project will be to build a standard FHIR® resource for a standardized medication profile (SMP) based off the HL7®/NCPDP Standardized Medication Profile white paper.

**Other Reportables:**

- **WG1 Eligibility Verification Task Group, WG9 Medicare 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 Scope and Goals** were reviewed and approved.
Work Group 19 NCPDP Standards Coordination

Task Groups:

- **The Emergency Preparedness Task Group** agreed to update the NCPDP Emergency Preparedness Guidance document to align with the end of the Public Health Emergency (PHE) impacts. A small group was created to review the guidance document and identify what needs to be updated and determine whether the information should be deleted from the document or archived for future reference.

- **The Real-Time Prescription Benefit Standard (RTPB) Task Group** reviewed the intersection of four NCPDP standards (Formulary & Benefit, RTPB, SCRIPT (NewRx), Telecommunication (Claim)) and the use of Diagnosis Codes. The task group responded to the American Medical Association’s question about RTPB & Diagnosis Code. Discussed the API definition in CA and TX RTPB related bills that points to Section 170.215 of Title 45 of the Code of Federal Regulations which only mentions HL7® and FHIR®. They reviewed the WG1 Clinical and Safety Edits Task Group DERF to sunset value “PN” (Prescriber Consultation) for Reason for Service (439-E4) and ServiceReasonCode. Also, the task group provided comments to the MC Education, Legislation and Regulations Task Group on the Office of the National Coordinator for Health Information Technology’s (ONC) Health Data, Technology, and Interoperability: Certification Program Updates, Algorithm Transparency, and Information Sharing_Notice of Proposed Rule Making (NPRM).

  - The **Consumer and Provider RTPB Standards Monitoring Sub-Task Group** did not meet this quarter.
  - The **Related RTPB Law Review Sub-Task Group** reviewed and modified letters sent to the insurance commissioners in in California and Texas offering NCPDP as a resource as they evaluate next steps in the policy making process relative to RTPB including educating them on the RTPB Standard and NCPDP’s Member Source™ Application Programming Interface (API) solutions for the XML format of the standard. The task group also updated the RTPB Law Tracker as applicable.

- **The Digital Therapeutics Task Group** reviewed CMS-3421-NC Medicare Program; Transitional Coverage for Emerging Technologies and decided no comments were needed from NCPDP. The task group, along with the Digital Therapeutics Alliance (DTA), completed the Submission Check List and Rationale for Digital Therapeutic Products documents which were presented at the DTA Summit in June 2023. The task group leads met with DTA to develop a process to collaborate and share updates to the action items associated with the pain points identified in the January DTA Workshop.

- **The NDC Scarcity Task Group** had a small working group develop a survey to explore the impact of a change to the National Drug Code (NDC) format. The survey was sent out on July 10, 2023, and is scheduled to close on August 11, 2023. The task group also reviewed the GS1 NPRM comments to the FDA and is currently in the process of creating questions for GS1 regarding comments made on the NPRM to gain a better understanding of their position.

- **The Standards Message Structure Harmonization Task Group** did not meet this quarter and their request to disband the task group was approved at the August Work Group meetings.

- **The REMS Workflow to Transaction Task Group** continued to partner with HL7*/CodeX to harmonize among standards across stakeholders (Prescriber to REMS Admin & Pharmacy (HL7*/CodeX & SCRIPT), Pharmacy to REMS Admin & Prescriber (Telecom & SCRIPT) and REMS Admin to Prescriber & Pharmacy (HL7*/CodeX & Telecomm)). They continued their review of the ReasonCode values applicable to REMS transactions for opportunities to improve, clarify and
streamline values. They continued to revise their DERF for updates to ReasonCode values and ReasonCode20 value set contents and applicable response type (Denied vs. Canceled) to be submitted in November. Also, they completed review of the FDA Request for Comments (FDA-2023-N-5073) regarding timing and logistical considerations when there are changes to REMS programs (e.g., move from REMS Admin A to REMS Admin B) and submitted a response letter.

New Business:
- The **WG19 Scope and Goals** were reviewed and approved.

**WG20 Coordination of Care and Innovation**

Other Reportables:
- The conditionally approved WG20 Scope and Goals were reviewed and approved.
- Recaps for these task groups can be found in the WG20 download materials.
  - WG7 Specialty Pharmacy Data Exchange Task Group
  - WG9 Prescription Drug Monitoring Program (PDMP) Task Group
  - WG10 Identification of Social Determinants of Health (SDoH) Task Group
  - WG10 MTM and Pharmacist Clinical Services Task Group
  - WG10 Pharmacogenomics (PGX) Task Group
  - WG10/WG11 Patient Consent Task Group
  - WG11 Dispensed Medication Reporting Task Group
  - WG14 Consultant Pharmacist Interoperability Task Group
  - WG14/WG10 Standardized Medication Profile Task Group
  - WG19 Digital Therapeutics Task Group
  - WG19 REMS Workflow to Transaction Task Group
  - MC Education, Legislation and Regulations Task Group

New Business:
- The **WG20 Health Equity Task Group** was formed to explore the opportunity to standardize and support the exchange of health equity related data.
- The **WG20 Admit, Discharge and Transfer (ADT) Task Group** was formed to identify how NCPDP can support ADT notifications for pharmacies.

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

Task Groups:
- The **Pharmacy and/or Combination ID Card Task Group** did not meet this quarter.
- 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** continued reviewing the Claim Adjustment Reason Code (CARC) Mapping document descriptions and situations and evaluating the need for the Electronic, Paper and Group columns. The task group is making updates to ensure the document supports how CARCs should be used in pharmacy and not how they may be inappropriately used today.
- The **DSMO Task Group** received no DSMO requests for review.
- The **Benefit Coverage Identification Task Group** drafted interview questions regarding identified challenges experienced by providers, specialty pharmacies and organizations in being able to timely and accurately identify the appropriate benefit coverage (medical or pharmacy benefit) for specific medications being prescribed and potential out-of-pocket costs to the patient at the time of care.
- The **Barcode Utilization Task Group** continued to work on updating the NCPDP GS1 DataMatrix white paper. They also created a survey regarding barcode utilization in the pharmacy to ensure
relevant topics are addressed and provide statistics on barcode utilization and issues in the white paper.

- The **X12 TR3 Comment Coordination Task Group** did not meet this quarter.

Other Reportables:

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

New Business:

- The **WG45 Scope and Goals** were reviewed and approved.

**MC Maintenance and Control**

DERFs/ECLs: 12 new and four pended DERFs/ECLs were reviewed (see WG1, WG2 and WG11).

- DERF 001949 was withdrawn.
- DERF 001950 was approved.
- DERF 001952 was withdrawn.
- DERF 001954 was pended.
- DERF 001957/ECL 000394 was approved as modified.
- DERF 001958/ECL 000395 was pended.
- DERF 001959/ECL 000396 was approved.
- DERF 001960/ECL 000397 was pended.
- DERF 001961/ECL 000398 was approved.
- DERF 001962/ECL 000399 was approved as modified.
- DERF 001963/ECL 000400 was approved.
- DERF 001964/ECL 000401 was approved as modified.
- DERF 001965/ECL 000402 was approved as modified.
- DERF 001966/ECL 000403 was pended.
- DERF 001967/ECL 000404 was approved.
- DERF 001968 was approved as modified.

Task Groups:

- The **Education/Legislation and Regulations Task Group** reviewed and submitted NCPDP’s response to the Centers for Medicare & Medicaid Services (CMS) Notice of Proposed Rulemaking (NPRM) (CMS-2434-P), the National Committee on Vital Health and Statistics (NCVHS) Request for Information on ICD-11 and the Office of the National Coordinator for Health Information Technology (ONC) Health Data, Technology, and Interoperability (HTI-1) NPRM. The task group also initiated review of the CMS Electronic Prescriptions for Controlled Substances (EPCS) NPRM (CMS-2023-14624).
- The **MC Management of Non-NCPDP Code Sets Task Group** drafted their scope and goals which were approved by the work group. The task group initiated their work with the Route of Administration (ROA) code set in the National Library of Medicine (NLM) Value Set Authority Center (VSAC). To address questions on how to locate the list of ROA values, the task group documented instructions. The task group also began to discuss the business need and value of a pharmacy specific subset of ROA values for NCPDP.

New Business:

- The attendees received recaps of each Work Group’s activities.
- The **MC Scope and Goals** were reviewed and approved as modified.