



November 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>.

Work Group 1 Telecommunication

DERFs Reviewed:

- DERF 001958/ECL 000395 was withdrawn.
- DERF 001960/ECL 000397 was recommended to MC to approve as modified.
- DERF 001966/ECL 000403 was recommended to MC to pend.
- DERF 001969/ECL 000405 was recommended to MC to approve as modified.
- DERF 001970 was approved as modified.
- DERF 001971/ECL 000406 was recommended to MC to approve as modified.
- DERF 001972/ECL 000407 was recommended to MC to approve as modified.
- DERF 001973/ECL 000408 was recommended to MC to approve as modified.
- DERF 001974 was approved.
- DERF 001975/ECL 000409 recommended to MC to approve as modified.
- DERF 001976/Emergency ECL 000410 was recommended to MC to pend.
- DERF 001977/ECL 000411 was recommended to MC to approve as modified.
- DERF 001978/ECL 000412 was recommended to MC to approve.

Task Groups:

- The **Telecommunication FAQ Task Group** received approval to publish FAQ D-233 as an update to D.0 Editorial Section 10.27 about plan-sponsored drug discount programs and FAQ F-4 as an update to the F6 Editorial providing transition guidance for multi-claim transmissions, published Emergency FAQ D-234 around the use of Submission Clarification Codes (SCC) and commercial COVID vaccines and reviewed questions submitted by other task groups around the S1 transactions, subrogation, SCC combinations and Adjudicated Program Type values. The task group also discussed how to handle the sunseting of ECL values when the values are used by multiple standards.
 - The **Invalid SCC Combinations Sub-Task Group** drafted a DERF to update the Starter Dose description for SCC value 6 after validating the WG19 Emergency Preparedness Task Group had no concerns. They also confirmed with the WG14 LTPAC Billing Issues Task Group the use of Reject Code value 612 should be used for any invalid Submission Clarification Code combinations for values 16 and/or 22-35. The sub-task group will ask to disband.
 - The **Adjudicated Program Type Sub-Task Group** created a DERF for a new Adjudicated Program Type value for Medicaid Fee for Service and updates to other values. The DERF was approved after a modification at Work Group to remove the value 6 update and modified the proposed value limitation to value 1. The task group also created a DERF requesting three new values for integrated discount program scenarios. The DERF was approved after a modification at Work Group to remove the “Integrated Discount Program” value originally intended for use when the application of the benefit is

unknown. They also collaborated with WG9 Medicaid FAQ on the types of government funded programs and began a discussion around a potential new value for chronic disease programs at the state level.

- The **P and C/WC Monitoring, Billing and Education Task Group** did not meet this quarter.
- The **Coordination of Benefits (COB) Task Group** updated Benefit Stage transition guidance to include examples and reinstatement of Benefit Stage Indicator (C51-9X) value 51. The guidance is specific to COB situations only. The task group also worked on transition guidance for Other Payer Amount Paid (431-DV) and the use of Other Payer Name (D23-M5) in the Response Other Payers Segment, provided insight requested by WG9 Inflation Reduction Act (IRA) Copay Smoothing Task Group as to the source of truth for other health information for COB transactions and reviewed DERF 001972/ECL 000407 for a new Reject Code (511-FB) value.
- The **Information Reporting Problems Task Group** drafted Telecommunication Standard VD.0 to F6 transition guidance for Information Reporting transactions. They also provided input to the WG9 Inflation Reduction Act (IRA) Copay Smoothing Task Group regarding the source of truth for other health information for COB transactions.
- The **Definition of a Valid Prescriber Task Group** continued working on prescriber related updates to the Telecommunication Standard Version D.0 Editorial document and refining their Medicaid and Medicare prescriber matrices and flow diagrams. They reviewed guidance around Office of Inspector General (OIG) waivers and determined no updates are needed.
- The **Benefit Integration Task Group** continued their review of the Benefit Integration Implementation Guide, an examples document for benefit synchronization and related layout documents.
- The **Clinical and Safety Edits Task Group** withdrew DERF 001958/ECL 000395 that requested to sunset some Drug Utilization Review (DUR) values and began working on an FAQ around using DUR, Reject or Approved Message Code values to communicate plan limitations for the number of fills allowed before a claim is rejected without prior authorization.
- 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** began tracking legislation and regulation related to pharmacist scope of practice, drafted Section 6 on various transaction segments in the Telecommunication Standard Version D.0 S1 Implementation Guidance document and drafted an FAQ on billing pharmacy services for inclusion in the Telecommunication VD.0 Editorial. The FAQ was approved for publication.
- The **Eligibility Verification Enhancements Task Group** did not meet this quarter but would like to remind everyone of the CMS Medicare E1 response enhancements, including Medicare Advantage Plan Type and Qualified Medicare Beneficiary information, that went into effect October 16, 2023.
- The **Expanded Dollar Fields Task Group** updated their task group scope and drafted an FAQ about million-dollar claims that was transferred from WG1 Telecommunication FAQ Task Group. The drafted FAQ will be turned into a white paper or guidance document with additional detail.
- The **Post Adjudication Task Group** did not meet this quarter.
- The **Standardized Subrogation Task Group** created a task group FAQ document to capture discussion items including FAQ-1 defining Medicaid Subrogation. The task group also received approval to publish two FAQs in the Telecommunication VF6 Editorial providing guidance on the use of Cardholder ID (302-C2), Medicaid ID Number (115-N5) and Medicaid Agency Number (116-N6) in 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:

- Margaret Weiker, NCPDP, requested members research how their companies use the universal claim form (UCF) and if a new version is needed to accompany the adoption of the next named version of Telecommunication Standard under HIPAA.

Work Group 2 Product Identification

Ballot:

- **Ballot WG020014** for the Product Identifiers Standards Implementation Guide Version 1.9 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 WG02 webpage. The ballot will be sent to NCPDP Board of Trustees for approval after a 30-day appeal period.

DERFs Reviewed:

- DERF 001979 was approved.

Task Groups:

- The **Product Review and Billing Unit Exception Task Group** reviewed two QUIC forms and approved DERF 001979 requesting modifications to National Health Related Items Code (NHRIC) references in the Product Identifiers Standard Sections 3, 3.1, and 5. The task group's small working group is reviewing the Billing Unit Standard Implementation Guide for updates and identified the need to update FAQ 7.39 relating to quickly decaying radiopharmaceuticals and to add an FAQ for the genetic copy of measurements in reference to QUIC form 202204 HEMGENIX®. Additionally, the task group is reviewing and discussing various affected processes on AdvaMed's position letter on the National Reimbursement Code (NRC) to the industry.
- The **Naming Standards for Drugs, Biologics and Biosimilars Task Group** approved and submitted the letter to the Food and Drug Administration (FDA) seeking clarification about *Purple Book* data on unbranded biologics and the mutual substitutability of reference and interchangeable biosimilar products. The task group reached out to the National Association of Boards of Pharmacy (NABP) regarding regulations governing pharmacy-level substitution of biosimilars and resultant difficulties in electronic prescription processing for interchangeability and coordinated with NABP to join a task group call. The task group drafted comments to the FDA regarding their September 2023 draft guidance to the industry on Labeling for Biosimilar and Interchangeable Biosimilar Products. The comments were approved by the work group and will be submitted to the Standardization Committee for approval.
- The **Outsourcing Facility Task Group** is on hiatus waiting on the National Library of Medicine (NLM) to work with the FDA to obtain data necessary for inclusion of 503B products in DailyMed automatically.
- The **WG2 Dates Associated with Pharmaceutical Products Task Group** continued reviewing Compendia, FDA, Centers for Medicare & Medicaid Services (CMS) and newly created dates in the Dates Associated with Pharmaceutical Products white 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:
 - QUIC #202307 iLet® Insulin Infusion Kits
WG2 approved assignment of BU = EA per section 5.1.6 of the BUS with a package size of 75 for NDC 50050-0100-15, package size of 75 for NDC 50050-0101-15, package size of 50 for NDC 50050-0100-10 and a package size of 100 for 505520-0101-20.
 - QUIC #202308 Twiist Infusion Pump Starter and Refill Kits
WG2 approved assignment of BU = EA per section 5.5.1 of the BUS with a package size of 1 for the starter and refill kits.

Work Group 7 Manufacturer and Associated Trading Partner Transaction Standards

Task Groups:

- The **Manufacturer Rebates Standard Task Group** continued analysis of Telecommunication VF6 DERFs impacting the Manufacturer Rebate Standard data elements and structure and developed action items related to the analysis.
- The **Medical Rebate Standard Task Group** continued reviewing the Medical Rebate Standard V02.02. The task group identified the need for two new fields and updates to several existing fields for a future version.
- The **Specialty Pharmacy Data Exchange Task Group** made recommendations on values and structure for sub-status code values for a standardized global status file.

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 on the NCPDP website by WG9.
- The **Medicare Part D Coordination of Benefits Other Health Insurance (COB-OHI) Data Sharing Task Group** discussed open Medicare Advantage Prescription Drug (MAPD) Help Desk tickets with representatives from the Centers for Medicare and Medicaid Services (CMS) and the Medicare Beneficiary Database (MBD) and Benefits Coordination Recovery Center (BCRC) being out of sync. The task group also worked on updating the COB Industry Updates spreadsheet.
 - The **Government Funded Entitlement Programs Sub-Task Group** continued collaboration with CMS, the BCRC and the National Institute for Occupational Safety and Health (NIOSH) within the Centers for Disease Control and Prevention (CDC) to finalize a memo to raise industry awareness about the World Trade Center (WTC) Health Program. The memo is currently under review by the WTC Health Program Office of General Counsel (OGC). The sub-task group is also working to understand how coordination of benefits (COB) between Medicaid and Medicare should occur and if there are opportunities to improve the process to increase adherence. The sub-task group changed their call cadence to meet bi-weekly.
 - The **Workers' Compensation Medicare Set-Aside Arrangement (WCMSA) Sub-Task Group** proposed changes to the CMS WCMSA Reference Guide to encourage the beneficiary or administrator to contact the plan about WCMSA-related products. The sub-task group also discussed future Workers' Compensation-type OHI from BCRC to include drug data.

- The **Hospice Task Group** reviewed and responded to an FAQ about Patient Residence (384-4X). The FAQ was sent to the WG9 Medicare FAQ Task Group to be published in the Medicare Part D FAQ document on the NCPDP website. The task group also continued to review the processing guidelines document.
- The **Medicare Financial Information Reporting (FIR) Task Group** provided feedback on CMS guidance requested by the WG9 Inflation Reduction Act (IRA) Copay Smoothing Task Group. The task group worked with the Medicare Transaction Facilitator to update the Non-Participating PACE Plan report and began drafting a white paper on best practices for utilizing the report. RelayHealth also provided an update on F6 transition impacts for FIR.
- The **Medicare FAQ Task Group** reviewed a question from the Strategic National Implementation Process (SNIP) Committee related to Bank Identification Number (BIN) to Issuer Identification Number (IIN) on secondary claims. The task group reviewed a question from the WG9 Hospice Task Group on the use of Patient Residence (384-4X) value 11 (Hospice) on hospice claim submission and created an FAQ, which was approved for publication in the WG9 Medicare Part D FAQ document. The task group also drafted and submitted questions for CMS review on the use of Qualified Medicare Beneficiary (QMB) Dual Status and Benefit Stage Qualifier (BSQ)/Benefit Stage Indicator (BSI).
 - The **Insulin Pump Sub-Task Group** started defining potential codified solution(s) using drug utilization review (DUR) values and new reject code values. The sub-task group outlined the current process and the pros and cons of potential alternative options to present to CMS.
- The **Inflation Reduction Act (IRA) Copay Smoothing Task Group** reviewed the CMS memo *Maximum Monthly Cap on Cost-Sharing Payments Under Prescription Drug Plans Draft Part One Guidance on Select Topics, Implementation of Section 1860D-2 of the Social Security Act for 2025, and Solicitation of Comments* and submitted comments for CMS consideration. The task group also reviewed COB claim examples and rejections to determine where additional guidance from CMS may be necessary. The task group updated their name and scope statement to reflect the official name of the CMS program. The task group name and scope change were approved by WG9. The new task group name is the **Medicare Prescription Payment Plan Program Task Group**.
- The **Maximum Fair Price Front-End Flow Task Group** reviewed the front-end Omega model, which was proposed by CMS following the Stakeholder Action Group (SAG) in August 2023. The task group identified gaps within this model and made revisions. The task group reviewed and responded to questions from CMS regarding the front-end Maximum Fair Price (MFP) process. The task group collaborated with the WG9 Maximum Fair Price Back-End Processing Task Group to respond to the CMS Request for Information (RFI): *Request for Information: Medicare Transaction Facilitator (MTF) for the Medicare Drug Price Negotiation Program*. The task group updated their scope statement, which was approved by WG9.
- The **Maximum Fair Price Back-End Processing Task Group** revised the existing back-end flow and determined additional back-end flows are necessary to reflect alternative processes, including 340B. The task group began reviewing the required data fields necessary for manufacturers to process claim data. The task group updated their scope statement, which was approved by WG9.
- The **Medicare Part D Section 111 Issues and Questions Task Group** discussed best practices for reporting future-dated records and reviewed the Unsolicited Reporting File for Medicare Part D coverage and the CMS Final Rule on Medicare Part D Section 111 Civil Monetary Penalties (CMPs).

- The **Medicare Prescription Drug Event (PDE) Task Group** reviewed the open questions list and submitted two new questions for CMS consideration. The task group also discussed updates to the 2025 PDE File Layout.
- The **Medicaid Pharmacy Encounters Reporting Standard Task Group** continued their comparative analysis between the Medicaid Pharmacy Encounter Reporting Standard and the Telecommunication Standard VF6. The task group began identifying changes needed in the implementation guide as a result of the analysis.
- The **Medicaid FAQ Task Group** provided feedback on a DERF drafted by the WG1 Adjudicated Program Type Sub-Task Group and confirmed Managed Long-Term Service and Support (MLTSS) does not require its own program type value. The task group welcomed Ratna Chintapalli as new task group co-lead.
- 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.

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 task group needs to be thinking about how 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, will impact the eCare plan. The MCC eCare Plan project developed a patient interfacing application (FHIR[®] Application Programming Interface (API) of a MCC care plan for the patient to see and interact with their care plan and a clinical interfacing FHIR[®] API). These FHIR[®] APIs are being piloted at Oregon Health & Science University (OHSU) with EPIC.
- 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 NCPDP Precision Medication Stakeholder Action Group (SAG). They reviewed the Precision Medication Executive Summary: www.ncdp.org/NCPDP/media/pdf/Resources/Precision-Medicine-Executive-Summary-August-2023.pdf?ext=.pdf and compared the PGx use cases they developed with the table of barriers, solutions and support within pages 7-9 of the executive summary. The task group discussed the Office of the National Coordinator (ONC) blog: [Advancing Genomic Data-Sharing for Research and Patient Care: Sync for Genes Project Delivers Final Report and Toolkit](#). They continued working on a PGx workflow.
- The **WG14/WG10 Standardized Medication Profile Task Group** continued to work on two projects. The first project is writing a white paper or guidance document to assist API vendors on how to access medication lists and perform medication reconciliation. The second project is building a standard FHIR[®] resource for a standardized medication profile (SMP) based off the HL7[®]/NCPDP Standardized Medication Profile white paper.
- The **Identification of Social Determinants of Health Task Group** elected to go on hiatus until further work is needed.

- 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). Clarified the Task Group’s scope to focus on consents related to fulfillment of a prescription (e.g., the Florida Medicaid scenario (where prescriber and patient consent is needed to dispense a behavioral health medication for a minor)) and not to support patient consent preferences for release of medication information to others.
- 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 recaps for these task groups can be found in the WG10 download materials.

Work Group 11 ePrescribing & Related Transactions

Ballots:

- **Ballot WG00094** – Enhancements to the NCPDP SCRIPT and Specialized Standard Implementation Guides Version 2024011 is considered a valid ballot having received the required 60+% of Consensus Group votes and 75+% approval rating. Two affirmative votes with comment 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.

DERFs Reviewed:

- DERF 001954 was withdrawn.
- DERF 001980 was approved.
- DERF 001981 was approved.
- DERF 001982 was approved as modified.
- DERF 001983 was approved.
- DERF 001984 was approved.
- DERF 001985 was approved as modified.

Task Groups:

- The **ePrescribing Regulatory Task Group** did not meet this quarter.
- The **Formulary and Benefit Task Group** began working on the Formulary and Benefit Standard Version 3.0 to Version 60 transition guidance.
- The **Implementation of Structured Sig Task Group** brought forth DERF 001982 to update the annotation in the schema for DoseAdministration. The task group began reviewing a request to add additional DoseUnitOfMeasure values to the NCPDP NCIt Sub-Set maintained by the National Library of Medicine (NLM). The task group requested a new co-lead.
- The **Pharmacy Product Locator Task Group** did not meet this quarter, but they provided information on work being done outside of NCPDP through the Office of the National Coordinator (ONC) Health IT Advisory Committee Pharmacy Interoperability and Emerging Therapeutics Task Force e where NCPDP presented a response to the question “What can ONC do to address drug

inventory transparency?”. Through this meeting, NCPDP provided what is the purpose, the progress and the status of the Pharmacy Product Locator Task Group. The use cases for the task force align with the NCPDP use cases for the task group.

- The **Prior Authorization Workflow-to-Transactions Task Group** withdrew the previously pended DERF 001954 for a new data element of FirstQuestionID. The task group began looking at the number of repeats allowed when “Select Multiple” is chosen in the question set.
- The **RxChange Task Group** received approval to publish an updated question related to how prescribing systems should respond when the prescriber location does not support the RxChange workflow associated with the MessageRequestCode in the *SCRIPT Implementation Recommendations* document. A straw poll was taken to determine the support of increasing the element ChangeReasonText from the current length of 260 to 350. There were no concerns about updating the length. The task group began review of the current guidance in the NCPDP SCRIPT Standard Implementation Guide and will bring forth a DERF with additions and modifications in February.
- The **SCRIPT Implementation Recommendations Task Group** brought forth DERF 001980 to remove process flow diagrams from the NCPDP SCRIPT and Specialized Implementation Guides and DERF 001981 to remove Data2000WaiverID and NADEAN references from the schema and NCPDP SCRIPT and Specialized Implementation Guide. The task group received approval for the following additions/modifications to the *SCRIPT Implementation Recommendations* document.
 - Does the standard support a character set other than the basic ASCII 7-bit?
 - An update to the purpose section based on discussion with Topic 252: Request to have Patient Height and Weight mandatory.
 - Two new FAQs related to transfer of controlled substances.

The task group received approval to publish the updated Electronic Signature White Paper.

- The **RxRenewal Review Sub-Task Group** received approval for the following additions/modifications/removals to the *SCRIPT Implementation Recommendations* document.
 - What is the definition of PrescriberAgent?
 - Is the covering prescriber who works independently under their own prescribing authority and license, or is authorized to prescriber under the direct supervision, considered the prescriber on NCPDP transactions?
 - What is the difference between a fillable or non-fillable transaction?
 - ePrescribing Best Practices when the Prescriber will not have a continued relationship with the patient or will have a Temporary Interruption in an existing relationship.
 - Zero Refills Authorized on a Renewal Response.
 - CancelRx workflow related to non-electronic response for RxChange and RxRenewal.
 - Last Fill Date on a Refill Request.
 - Prescribed Medication information on a Refill Request.
 - RefillResponse as Newly Authorized Prescription.
 - Duplicate Response Expectations.

The following additions/modifications/removals to the *SCRIPT Implementation Recommendations* document were pended back to the task group for additional work:

- Can the PrescriberAgent elements be used to record information for a covering prescriber on a fillable or non-fillable transactions?
- RefillResponse with Drug Name Different

- 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). Clarified the Task Group's scope to focus on consents related to fulfillment of a prescription (e.g., the Florida Medicaid scenario (where prescriber and patient consent is needed to dispense a behavioral health medication for a minor)) and not to support patient consent preferences for release of medication information to others.
- The **WG14/WG11 LTPAC ePrescribing Task Group** received approval for DERF 001984 to increase the size of the Note element for RxFill Status types and DERF 001985 to allow the ReasonCode element in the RxFill Status types to repeat up to 10 times. They also worked on a short-term and long-term solution for discharge prescriptions.

Other Reportables:

- **WG1 Eligibility Verification Enhancements Task Group, WG1 Telecommunication Agility Next Generation Task Group, WG19 Real-Time Prescription Benefit Task Group and WG19 REMS Workflow to Transactions Task Group:** Recaps for these task groups can be found in the WG11 download materials.
- An update was provided on state and federal trends to adopt NCPDP standards.
- A RxNorm update was provided.

WG14 Long Term and Post Acute Care (LTPAC)

Task Groups:

- The **LTPAC Billing Issues Task Group** decided to start a new document for the Telecommunication Version F6 Guidance instead of updating the original guidance. The task group completed the guidance and is currently reviewing recommendations from NCPDP staff. The task group responded to two questions from WG9 IRA Copay Smoothing Task Group regarding how payment processing works with Long Term Care (LTC)/Skilled Nursing Facility (SNF) and facility billed copayments. Additionally, the task group reviewed the Invalid SCC Combinations spreadsheet requested by WG1 Invalid SCC Combinations Sub-Task Group regarding reject codes.
- The **Consultant Pharmacist Interoperability Task Group** is on hiatus until further notice.
- The **WG14/WG11 LTPAC ePrescribing Task Group** drafted DERF 001984 to increase the size of the Note element for RxFill Status types and DERF 001985 to allow the ReasonCode element in the RxFill Status types to repeat up to 10 times. They also worked on a short-term and long-term solution for discharge prescriptions. Both DERFs were approved in WG11.
- The **WG14/WG10 Standardized Medication Profile Task Group** continued to work on two projects. The first project is writing a white paper or guidance document to assist API vendors on how to access medication lists and perform medication reconciliation. The second project is building 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 of Stone Arch, LLC, WG14 co-chair, provided a LTPAC industry update.

Work Group 19 NCPDP Standards Coordination

Task Groups:

- The **Emergency Preparedness Task Group** agreed to transition all COVID related updates for the NCPDP Emergency Preparedness guidance document to the WG19 COVID Post PHE Task Group. The task group discussed the Maui wildfires and Hurricane Idalia state of emergencies as it relates to the guidance document. The task group started a preview of the 2023-2024 COVID-19 vaccine approvals, which were transitioned over to the WG19 COVID Post PHE Task Group.
- The **Real-Time Prescription Benefit Standard Task Group** decided to make any upcoming enhancements to the XML syntax and retire the EDI syntax and delay working on the JSON format until WG11 XML and JSON Task Group has completed updates for SCRIPT to leverage their work. Based on straw poll results, WG19 supported this approach. WG19 approved the task group's FAQ for the *Real-Time Prescription Benefit (RTPB) Standard Implementation Recommendations* document about how the RTPB Standard supports communication of indication-based formularies. The task group also decided to expand the number of diagnosis codes available on RTPB request from two to five to align with the Telecommunication Standard. The task group decided a multi-threaded medication request may need to be incorporated into the RTPB Standard. A DERF will be submitted in the future for these enhancements and the retirement of the EDI syntax.
 - The **Consumer and Provider RTPB Standards Monitoring Sub-Task Group** did not meet this quarter.
 - The **Related RTPB Law Review Sub-Task Group** reviewed bills US HR 4507 (Transparency in Coverage Act of 2023) and US HR 4822 (Health Care Price Transparency Act of 2023) and determined there were no impacts to the current RTPB Standard.
- The **Digital Therapeutics Task Group** reviewed the FDA "Regulatory Considerations for Prescription Drug-Use-Related Software" recent guidance document and shared with Digital Therapeutics Alliance (DTA), WG2 & WG20 for review. The guidance was reviewed, and it was decided no comments were needed from NCPDP. DTA put the payer review portion of their project on hold.
- The **NDC Scarcity Task Group** The task group discussed and summarized the results of the survey to determine the impact and required resources and time to implement the United States Food and Drug Administration's (FDA) planned expansion of the NDC to 12-digits numeric or the NCPDP suggested alternative of incorporation of alpha characters. The survey opened on July 10, 2023, and closed on August 11, 2023. Once the FDA decides on the NDC format, organizations can perform assessments and provide a better timeline to implement the change, and the task group can then provide education and guidance on the decision. As a result of the survey, the task group drafted a letter to the FDA regarding the proposed NDC format revisions to remind them of the Telecommunication Standard Version F6 implementation and advocate a decision be made while implementing F6 or immediately after F6 is implemented so programming can be done all at once. The task group also reviewed the GS1's comments to the FDA's Notice of Proposed Rulemaking (NPRM) on NDC expansion and formulated some questions for GS1 regarding their comments better understand their position and how they will handle the changes.
- The **COVID Post PHE Task Group** reviewed use cases for recent COVID-19 vaccine updates: www.fda.gov/news-events/press-announcements/fda-takes-action-updated-mrna-covid-19-vaccines-better-protect-against-currently-circulating and transition to commercially available product: <https://www.cdc.gov/vaccines/covid-19/vaccination-provider-support.html>. The task group also updated their scope which was approved by WG19. The task group created an

emergency FAQ regarding the use of SCC values to identify COVID-19 vaccine doses. The FAQ was approved and communicated in a NCPDP e-Blast as well as the NCPDP NOW email. The FAQ was published in Version D.0 Editorial document.

- The **REMS Workflow to Transaction Task Group** created DERF 001983 to update ReasonCode values, the ReasonCode20 value set contents and applicable response type (Denied vs Canceled). The DERF was reviewed by the WG11 SCRIPT Implementation Recommendations Task Group and approved by WG11. The task group also began exploring and describing a new REMSReversal transaction in the SCRIPT Standard. The task group began to outline content for a REMS white paper to socialize all the REMS transactions.

New Business:

- DERF 001969/ECL 000405 was highlighted to create awareness across multiple Work Group that may have interest.
- The **WG19 API Task Group** was formed to create a NCPDP API to be used with the JSON based Standards; update Connectivity Rule to align with changes made to proposed JSON based Standards; define backwards compatibility and provide guidance; develop guidance for how NCPDP JSON based Standards can be interoperable with HL7® and align with the United States Core Data for Interoperability (USCDI).
- The **WG19 Reject Code Standardization Task Group** was formed to identify changes to the format in which reject codes, associated descriptions, value limitations, guidance and other necessary detail is made available to enhance standardization of use of the appropriate reject code(s) to achieve the intended outcomes.
- An update was provided on state and federal trends to adopt NCPDP standards.

WG20 Coordination of Care and Innovation

Task Groups:

- The **Health Equity Task Group** developed their scope statement which was approved by the work group. To organize the task group discussions, the task group drafted a Health Equity Data Tracker and a Parking Lot. The tracker will capture a list of data concepts related to health equity and document where the concept was listed and whether it maps to a NCPDP data element used in our standards.
- The **Admit, Discharge and Transfer (ADT) Notification for Pharmacy Task Group** developed their scope statement which was approved by the work group. The task group discussed how ADT notifications work today, received an overview of ADT notifications via the DIRECT Standard® and began to identify use cases for ADT notifications to pharmacy.

Other Reportables:

- **WG10 Identification of Social Determinants of Health (SDoH) Task Group:** The recommendations from the *Collecting and Exchanging Social Determinants of Health Data in the Pharmacy* white paper were shared with the work group, and a request was made for members to bring SDoH use cases to the task group.
- **WG10 MTM and Pharmacist Clinical Services Task Group:** A request was made for members with experience and real-world use cases with the Pharmacist eCare Plan to join the task group as they begin to update the eCare Plan to ensure the needs of pharmacists from a clinical perspective are met.

New Business:

- There was a discussion about the purpose of WG20, the interaction of WG20 with other work groups and possible future topics and use cases.

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** revised their scope and reviewed a response from X12 regarding a request for interpretation (RFI) regarding race and ethnicity. The task group also completed a full review and made updates to the *X12N/005010X220A1 Benefit Enrollment and Maintenance (834) and the X12N/005010A221A1 Health Care Claim Payment/Advice (835) Questions and Answers* document.
- The **Document Revisions Task Group** conducted a survey to determine Claim Adjustment Reason Code (CARC) Mapping document adoption/usage and gather suggestions for potential updates. The task group also began reviewing the NCPDP *Claim Paid but No Financial Transaction Reporting on the X12/005010X221A1 Health Care Claim Payment/Advice (835)*, but the task group would like input on the need of this document.
- The **DSMO Task Group** received no DSMO requests for review.
- The **Benefit Coverage Identification Task Group** did not meet this quarter.
- The **Barcode Utilization Task Group** continued to work on updating the NCPDP GS1 DataMatrix white paper. They reviewed results from the 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:

- Industry updates for WEDI, NCPDP SNIP, CAQH CORE and X12 can be found in the WG45 download materials.

MC Maintenance and Control

DERFs/ECLs: 17 new and four pended DERFs/ECLs were reviewed (see WG1, WG2 and WG11).

- DERF 001954 was withdrawn.
- DERF 001958/ECL 000395 was withdrawn.
- DERF 001960/ECL 000397 was approved as modified.
- DERF 001966/ECL 000403 was pended.
- DERF 001969/ECL 000405 was approved as modified.
- DERF 001970 was approved with modifications.
- DERF 001971/ECL 000406 was approved as modified.
- DERF 001972/ECL 000407 was approved as modified.
- DERF 001973/ECL 000408 was approved as modified.
- DERF 001974 was pended.
- DERF 001975/ECL 000409 was approved as modified.
- DERF 001976/Emergency ECL 000410 was pended.
- DERF 001977/ECL 000411 was approved.
- DERF 001978/ECL 000412 was approved.
- DERF 001979 was approved.
- DERF 001980 was approved.
- DERF 001981 was approved.
- DERF 001982 was approved as modified.
- DERF 001983 was approved.
- DERF 001984 was approved.

- DERF 001985 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-1784-P/CMS-2023-14624) about Electronic Prescriptions for Controlled Substances and the 2024 Interoperability Standards Advisory (ISA) Reference Edition.
- The **Management of Non-NCPDP Code Sets Task Group** continued to discuss the business need and value of a pharmacy specific subset of route of administration values for NCPDP by evaluating sample claims data for reasons for route of administration related rejections. The instructions document with the steps for accessing the SNOMED Route of Administration subset on the National Library of Medicine's Value Set Authority Center website were published with the entry for Route of Administration (995-E2) in NCPDP's External Code List lookup tool.

New Business:

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