

February 2017 Work Group Recaps:

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

Work Group 1 Telecommunication

Ballot Adjudication:

- **Ballot WG010072R** for the Telecommunication Standard Implementation Guide, Batch Implementation Guide, Post Adjudication Standard Implementation Guide, Audit Transaction Standard Implementation Guide, Prior Authorization Transfer Standard Implementation Guide and Uniform Healthcare Payer Data Standard Implementation Guide is considered a valid ballot having received the required 60+% of Consensus Group votes and 75%+ approval rating. One new comment was received and the recommendation will be passed to the appropriate task group. Following a 30-day appeal period, the ballot will be sent to the NCPDP Board of Trustees for approval.

DERFs/ECLs Reviewed:

- DERF 001406 was approved with modifications.
- DERF 001436 was approved with modifications.
- DERF 001440 was approved with modifications.
- DERF 001442 was denied.
- DERF 001445 was approved with modifications.
- DERF 001463 was approved with modifications.
- DERF 001464 was approved with modifications.
- DERF 001465/ECL 000214 was recommended for MC to approve with modifications.
- DERF 001466 was approved.
- DERF 001467/ECL 000215 was withdrawn.
- DERF 001468 was approved.
- DERF 001469/Emergency ECL 000216 was recommended for MC to approve with modifications.
- DERF 001470 was approved with modifications.
- DERF 001471 was approved with modifications.
- DERF 001472 was approved with modifications.
- DERF 001473 was approved with modifications.
- DERF 001474/ECL 000217 was recommended for MC to approve.
- DERF 001475 was approved with modifications.
- DERF 001476 was approved with modifications.
- DERF 001477 was approved with modifications.
- DERF 001478 was approved with modifications.
- DERF 001479 was approved with modifications.
- DERF 001480 was approved.
- DERF 001481 was approved.
- DERF 001482/ECL 000218 was recommended for MC to approve.
- DERF 001483/ECL 000219 was recommended for MC to approve.
- DERF 001484/ECL 000220 was recommended for MC to approve with modifications.
- DERF 001485/Emergency ECL 000221 was recommended for MC to approve with modifications.

Old Business:

- Use of Quantity Prescribed (460-ET) in the Telecommunication Standard claim billing - Note this field would be required for Part D Schedule II Controlled Substance claims; however the use of this field is not limited to Part D claims only.

- Telecom D.0 and all versions from that point have been updated (November 2012).
- 03/2014 NCPDP received a response from HHS to the 03/2013 letter. The change will go through NPRM and Final Rule process.
 - We have asked the industry to have input on the implementation timeframe before the NPRM is published.
 - We have asked for a timeframe of NPRM publication.
- 06/2014 Update: OESS has responded that an NPRM including Quantity Prescribed and SCRIPT electronic prior authorization is going through the review process.
- WG1 Telecommunication FAQ Task Group brought forward a recommendation timeframe for Quantity Prescribed regulation implementation for OESS.
- 07/21/2015 Update from NSG: Our new target for this regulation is early 2016.
- 01/21/2016 Update from NSG: This policy item is undergoing the rulemaking process, and at this time we are unable to give you a specific timeframe.
- 04/11/2016 Update from NSG: The request is still in the rule making stage, so at this point I can't provide a formal comment on its status.
- 07/25/2016 Update from NSG: Additional questions were received and documentation from 2010, 2012 and 2013 was provided to answer the questions.
- 10/14/2016 Update from NSG: We are in the Rulemaking stage of this policy item. We should have an NPRM out by Mid-2017.
- 02/2017: Still tracking to a mid-2017 date.

Task Groups:

- The **Telecommunication FAQ Task Group** finalized four questions with recommendations and/or DERFs. The group also submitted a DERF to change the length of the BIN and its name. Two questions remain under discussion. The group also reviewed and modified the pended DERF to allow mixed-case alpha characters in email fields.
- The **Coordination of Benefits Task Group** reviewed two FAQs and created six DERFs. The group will be completing nine FAQs, updating examples, developing transition guidance and developing a COB webinar.
- The **Information Reporting Problems Task Group** is reviewing and updating the Medicare Part D COB White Paper. The group reviewed the screen mock-ups of the new HPMS module for the SPAP/ADAP module, the SSNRI memo for N transaction impact, the revised PCUG appendices and the facilitator's valid/invalid reject code list. Work continues on the N to B Matching Best Practices document.
- The **Post Adjudication Task Group** did not meet this quarter.
- The **Definition of a Valid Prescriber Task Group** reviewed and recommended revisions to the Medicare Individual Provider Enrollment File Layout, transferred a FAQ to the WG9 Medicare FAQ TG, and created three DERFs. The group will continue working on FAQs and collaborating with CMS on prescriber enrollment layouts, edits, and rules.
- The **Part D Supplemental Payment Reporting Task Group** finalized the Nx reject code list. The list is published on the MedifacD website. The group reviewed the documentation for the Nx status update process and the modified Nx Cumulative Reject Report to include the new fields requested and the MBI.
- The **Eligibility Verification Enhancements Task Group** reviewed and modified one DERF which was pended from the November WG meeting. The group also created an FAQ related to Plan Name. The group will be reviewing the next version of the X12 270/271 transactions.
- The **Benefit Integration Task Group** did not meet this quarter.
- The **Standardized Subrogation Task Group** did not meet this quarter.

- The **Usage of Submission Clarification Codes (SCC) Task Group** performed analysis on the usage of SCC 2, reviewed references to existing SCC codes and developed D.0 guidance to add to the Editorial Guide. The task group will create a transition mapping for SNIP. The group plans to submit a DERF to retire SCC 99. The task group will continue to monitor WG14 activity on removing short cycle SCCs.
- The **Compound Task Group** addressed an FAQ, resolved the problem of reporting compound ingredients without NDC numbers and began the development of guidance for the new compound fields. The group submitted a DERF to add the definition of a compound prescription claim to the Telecommunication Implementation Guide. The TG will continue to develop guidance for the new compound fields.
- The **Attachments Task Group** asked in August and November if payers/PBMs have data elements that are needed to adjudicate a claim but can't bill in real-time or have programs/services on the horizon, those requirements need to be brought to the task group. No requirements were brought to the task group. A motion to disband the TG was made, seconded and approved.
- The **Copay Assistance Task Group** revised their task group name and scope. WG1 approved the changes. The new name of the task group is Upstream Reporting of Copay Assistance. The group will begin creating a white paper.

New Business:

- A presentation, *Nonproprietary Naming of Biological Products*, was given.

Work Group 2 Product Identification

DERFs Reviewed:

- DERF 001486 was approved.

Task Groups:

- The **Structure Product Labeling Activities Task Group** had no new activity to report this quarter. Topics were suggested for the FDA as they will have representation at the May Work Group meeting.
- The **Product Review and Billing Unit Exception Task Group** is reviewing the exceptions within the Implementation Guide and issues resulting from changes to existing products or release of new products. The task group:
 - Reviewed and responded to the questions and FAQ requests that were included in the comments on Ballot WG020008.
 - Reviewed eleven products to determine the billing unit and package size.
 - For October and November 2016, 1,827 new and zero changed billing unit indexing files were generated by FDA based on the files received by the compendia. The Billing Unit Discrepancies working group comprised of compendia representatives has reconciled the 10 NDCs with discrepancies.
- The **SPL REMS Requirements Task Group** had no new activity to report this quarter. The members were reminded the FDA is now in the process of accepting REMS from sponsors in the SPL format.
- The **Dates Associated with Pharmaceutical Products Task Group** did not meet.
- The **Naming Standards for Drugs, Biologics and Biosimilars Task Group** provided information on the FDA's Final Guidance for Industry: Nonproprietary Naming of Biological Products and its potential financial impact on the industry. A letter was drafted for comment to the Office of Management and Budget (OMB) on the industry impact.
- The **Application of the Billing Unit Standard Clarification Task Group** did not meet.

- The **Product Service Identifier Expansion Task Group** was disbanded.
- An update on the **WG2/WG11 Harmonization of Prescribing and Dispensing Units Task Group** was provided. See WG11 meeting minutes.

Work Group 7 Manufacturer and Associated Trading Partner Transaction Standards

Pended DERF:

- DERF 001446 was pended.

Task Groups:

- The **Medical Rebate Standard Task Group** did not meet this quarter.
- The **Medicaid Drug Rebate Program Task Group** continued their work to update the white paper titled, "Use of the NCPDP Manufacturer Rebate Standard to Support Payment Processes Between Medicaid and Supplemental Programs and Pharmaceutical Companies" which was published in 2010.
- The **Manufacturer Rebate Standard Task Group** continued to review and revise DERF 001446 requesting new fields be added to the Manufacturer Rebate Standard. The DERF was pended to the task group for completion of the Implementation Guide. The task group is seeking comment on the fields included in the DERF and participation of business and technical resources with interest in field changes to the claims detail file.
 - **Specialty Pharmacy Data Exchange Sub-Task Group** continued work on a draft file format for the Dispense Report Use Case in an effort to standardize the data submitted by Specialty Pharmacy to drug manufacturers and others to support programs and agreements between the parties. The Task Group has identified the necessary data elements and agreed on a flat file format. During the next quarter, the task group will continue work on the development of an implementation guide.
- The **Formulary Management Survey Task Group** did not meet this quarter.

New Business

- Update from the **WG9 OIG Report OEI-05-12-00540 Task Group** – In November 2016, the Task Group published a white paper titled, "[Recommendations for Use of the NCPDP Telecommunication Standard to Prevent Use of Copayment Coupons by Medicare Part D Beneficiaries and Applicability to other Federal Programs.](#)" The white paper recommends the use of new fields, Adjudicated Program Type and Other Payer Adjudicated Program Type, as the best available long-term solution for prevention of improper copayment coupon use for drugs paid for by Medicare Part D.
- NCPDP 340B Stakeholder Action Group Update – On October 11, 2016, the Stakeholder Action Group met to begin preliminary conversations to determine what might be done to eliminate or reduce the incidences of duplicate reimbursements that continue to be a problem for pharmaceutical manufacturers since the inception of this program. In a subsequent meeting with NCPDP leadership, John Coster, Director of the CMS Medicaid Division of Pharmacy challenged NCPDP to create solutions on issues that currently plague the system. To better establish which problems we are trying to solve and in what priority, NCPDP agreed to create a flow chart that identifies the various processes and related pain points. A second stakeholder meeting will be scheduled in the future.

Work Group 9 Government Programs

Task Groups:

- The **Prescription Drug Monitoring Program (PDMP) Task Group** decided to create one standard for government “clinical” dispensed prescription reporting requirements (PDMP, HIE, Medicaid etc.) rather than separately working on the Controlled Substance Standard, the Uniform Healthcare Payer Data Standard, the Post Adjudicated Standard, Batch Standard and proprietary formats. The development of a Clinical Reporting Transaction Standard would require input from Work Groups 1, 10 and 11 in addition to WG9 (still a request by government entities). The task group requested WG9’s approval to request MC Maintenance and Control determine which work group should manage the task group. WG9 requested the task group submit a Project Development Form Request for the May Work Group meeting which would include a request to determine the appropriate task group placement. In the interim, the task group will continue to work on the Clinical Reporting Transaction Implementation Guide.
- The **340B Task Group** did not meet this quarter.
- The **Government Programs Encounter Reporting Standards Task Group** is working to develop a new Encounter Reporting Standard. The task group continues to work through a field-by-field review of the Post Adjudication Standard and the field use within existing State Medicaid encounter file layouts and/or similar field use from the Telecommunication Batch Standard. The review includes discussing field use that is not consistent with NCPDP standards, evaluating the need for new fields based on State-modified fields, determining if fields should be listed in the proposed Encounters Reporting Standard and classifying field use within the proposed standard as optional, situational, or mandatory.
- The **Medicaid Subrogation FAQ Task Group** did not meet as no new questions were received.
- The **Medicaid Best Practices Using NCPDP Standards to Implement Reimbursement Methodology Task Group** developed a white paper entitled [“The Proper Use of the NCPDP™ Telecommunication Standard Version D.0 as it applies to the Implementation of Medicaid Reimbursement Methodologies Based on Actual Acquisition Cost \(AAC\) Plus a Professional Dispensing Fee.”](#) This white paper provides Medicaid agencies and fiscal agents guidance in implementing new acquisition cost based reimbursement rules for covered outpatient drugs. The paper presents common issues experienced to-date in implementing cost based reimbursement with professional dispensing fees. It highlights how to best utilize the NCPDP Telecommunication Standard Version D.0 and leverages best practices for various scenarios such as preferred brands for multisource generic situations and the proper use of the Dispense As Written (DAW)/Product Selection Code (408-D8) field values to inform pharmacies of formulary requirements. The paper was disseminated to the Medicaid Directors through the assistance of NAMD. The task group is currently working on FAQs which will be added to a future version of the white paper.
- The **Medicaid Frequently Asked Questions Task Group** reviewed the state Medicaid ORP (Ordering, Referring, Providing) requirements and how to more efficiently streamline the validation process from state to state. The initial work is to create standard reject codes, one for prescribers and one for providers (i.e., pharmacies), specific to Medicaid enrollment status. The task group is also discussing standardizing state file formats to include the availability of identifying attributes (e.g., NPI) and definition of attributes (e.g., status), frequency of file deliveries from states and public access to the file.
- The **Medicare/Medicaid Claim Billing Issues Task Group** did not meet this quarter.
- The **Hospice Task Group** disseminated a survey to gather input from hospices, Part D plans and pharmacies impacted by Hospice processing to assess policy implementation and form usage and to identify operational challenges in order to further improve coordination between hospices and Part D sponsors. The survey was released on December 8, 2016 and closed on

December 19, 2016. Out of 491 responses received, 90% represented Hospice Providers, 4% represented Medicare Part D Plans and 3% represented Pharmacy Providers. During the next quarter the task group will review the survey results and continue to work with CMS to improve coordination between entities.

- The **Medicare Standardized Fraud, Waste and Abuse Training Attestation Task Group** did not meet this quarter.
- The **Medicare Prescription Drug Event (PDE) Task Group** completed and closed four questions this quarter. The task group reviewed and categorized the outstanding questions submitted to CMS for the purpose of requesting Computer Based Training to help provide further clarity. The task group also formed a sub-task group, PDE Withholds, Disputes/Appeals Best Practices, to establish best practices (to the extent possible) pertaining to PDE Withholds (WTHLD_PDE Issues Report), Disputes, Appeals and to level set interpretation of associated documentation. The sub-task group meets on alternate weeks of the parent PDE Task Group.
- The **Medicare Financial Information Reporting Task Group** continued to discuss the manual process for Part D plans to provide documentation needed for the plan of record and non-plan of record when retroactive enrollment changes result in the elimination of a beneficiary's enrollment in a Part D plan. The task group is seeking input from WG9. Although (per CMS Guidance) the sponsor with the audited-off enrollment may seek recoupment of its payments, is the dollar amount related to this scenario significant enough to warrant the effort of creating a manual process? Claims not being reimbursed today can go in administrative costs. If the work group believes the process is too costly and onerous, the task group will make a formal recommendation to CMS to state these expenses should be accounted for within administrative costs and therefore plans cannot seek funds from other plans.
- The **Supplemental Payer Part D Reconciliation Standardization Task Group** did not meet this quarter.
- The **OIG Report OEI 05-12-00540 Task Group** did not meet this quarter.
- The **Medicare Part D FAQ Task Group** reviewed a question related to the process Medicare Advantage processors should use to communicate the identification of a Part B claim has been paid for a QMB beneficiary. DERF 001485/Emergency ECL 000221 was submitted requesting a new Benefit Stage Qualifier (393-MV) value to identify Medicare claims paid under the Medicare Part C benefit, specifically when the patient is known to be a dual eligible. The DERF/Emergency ECL was approved by WG1 Telecommunication and MC Maintenance and Control. The question and response will be published in the Medicare Part D FAQ document. The task group also reviewed the status of a correction to an update in the November Plan Communications User Guide (PCUG) Appendices. Revisions were made to Appendix F: Updated descriptions for "COB Effective Date" and "Effective Date of Other Drug Coverage."
- The **Social Security Number Removal Initiative (SSNRI) Task Group** is discussing CMS guidance and how plans, providers, and processors are preparing for the SSNRI initiative and identifying questions for CMS. During the next quarter the task group will review the CMS Open Forum transcripts (November and January) and develop a spreadsheet to track questions and responses.

New Business:

- Partial Fills of Schedule II Controlled Substances - WG9 reviewed the DEA's interpretation of the Controlled Substance Act as amended by the Comprehensive Addiction and Recovery Act.
- WG9 approved the request for a new task group:
 - **Coordination of Benefits Contractor (COBC)/Benefits Coordination & Recovery Center (BCRC) Task Group** to be a central point of contact in the industry for communication

and problem-solving around challenges faced with Medicare Part D COB Other Health Information (OHI) data as well as a resource for submitting questions to CMS regarding clarification of the Benefits Coordination Recovery Center (BCRC) OHI record processes or recommendations for OHI process improvements.

Work Group 10 Professional Pharmacy Services

Old Business:

- An update was provided on the current status of the United States Pharmacopeia (USP) Allergy Project

Task Group Reports:

- The **MTM Communications Task Group** continues to develop new functionality using the CCDA Release 2 Clinical Notes. The *Pharmacist Care Plan: Guidance on the Use of the HL7 CDA Consolidated Templates for Clinical Notes R2.1 Care Plan* was published and has been shared with HL7 work groups co-sponsoring the development of the Pharmacist Care Plan C-CDA. As part of an ONC grant, Lantana is completing the technical portion of the Pharmacist Care Plan C-CDA based on the requirements identified in the NCPDP recommendation document. Community Care of North Carolina (CCNC), through use of an Innovation Grant, is implementing the Pharmacist Care plan to capture the clinical data with six vendors and with about 350 pharmacies. A hands-on training session was held for CCNC and the participating vendors on January 30 – February 1. The vendors programmed case scenarios using the Pharmacist Care Plan specifications and built out their user interfaces. The Pharmacist Care Plan will be balloted by HL7 in August. The task group is finalizing a marketing document to call attention to the various NCPDP standards and recommendation documents supporting pharmacist’s clinical services.
- The **mL White Paper Task Group** did not meet but calls are being scheduled. Outreach was done with CDC regarding their ability to continue participation in the white paper development.
- An update was provided on the activities of the **WG11 Specialty Requirements for ePrescribing Task Group**.
- An update was provided on the C-CDA development work being pursued by the **WG14 Consultant Pharmacist Interoperability Task Group**.

Work Group 11 ePrescribing & Related Transactions

DERFs Reviewed:

- DERF 001455 was approved as modified.
- DERF 001459 was withdrawn by the submitter.
- DERF 001487 was approved.
- DERF 001488 was approved.
- DERF 001489 was approved.
- DERF 001490 was approved.
- DERF 001491 was approved
- DERF 001492 was approved with one in opposition.
- DERF 001493 was approved as modified.
- DERF 001494 was approved as modified.
- DERF 001495 was approved as modified with six in opposition.
- DERF 001496 was approved.
- DERF 001497 was approved as modified with six in opposition.
- DERF 001498 was approved as modified.

- DERF 001499 was approved.

Task Groups:

- The **Formulary and Benefit Task Group** has submitted DERFs 001491 and 001492.
- **WG14 LTPAC ePrescribing Task Group** began looking into a notification type message.
- **XML Task Group** reviewed all submitted DERFs and brought forward recommendations for them.
- **NCPDP/HL7 Pharmacist Functional Profile Task Group** did not meet this quarter. It was reported the MU EHR FP R2 based on [ONC Health IT Certification 2015 certification criteria](#), was balloted during the last HL7 ballot cycle. The HL7 EHR WG is in the process of adjudicating the 100 or less negative comments (mostly typographic) of the over 900 mostly affirmative comments. After the comments have been reconciled, the task group will need to evaluate the effect of this functional profile on the e-prescribing, immunization, eCare Plan, allergies and PDMP criteria for pharmacy and develop version 12 of the Pharmacy/Pharmacist Functional Profile.
- **WG11 Electronic Prescribing Best Practices Task Group** brought forward DERFs 001455, 001495, 001496, 001497, 001498 and 001499. They also provided recommendations for the SCRIPT Implementation Recommendations document, the MA requirements for controlled Substances, and New Rx request by patient.
- **REMS and ePrescribing Task Group** did not meet this quarter. They will begin meeting once the FDA releases detailed description of REMS activities by phase to review and provide comments.
- The **Electronic Prior Authorization Workflow to Transactions Task Group** has been working on a long-term care use case for a clinical pharmacist to submit an electronic prior authorization.
- The **Meaningful Use and NIST Test Methods for ePrescribing Task** did not meet this quarter.
- **Implementation of Structured Sig Task Group** focused on more complicated Sigs that are frequently used. They brought forward DERFs 001493 and 001494.
- **Specialty Requirements for ePrescribing Task Group** did not meet this quarter.
- **Harmonization of Prescribing and Dispensing Units Task Group** is determining a standard approach to harmonize product package size units used within prescribing, dispensing, adjudication, clinical and rebate systems to promote patient safety, improve the patient experience, prevent financial and audit risks, and provide recommendations that promote concordance between dispensing and billable units. The task group received approval for updates to the Electronic Prescribing Recommendations document as well as a sunset date of September 1, 2019 for quantity unit of measure codes previously agreed to be sunsetted.
- **EPCS Renewal Request Task Group** did not meet this quarter. They reported the request is currently going through the drafting and review process.
- **SCRIPT Managed Updates Schedule Task Group** is reviewing the proposal to update the NCPDP SCRIPT Standard on a more predictable basis as well as the NCPDP External Code List (ECL) implementation proposal. The task group completed their review of the External Code List and will bring forth DERFs. They also are looking at a more predictable process to request a new version of the SCRIPT Standard to be named in regulations. A straw poll was taken and it was evenly split between three and five years.
- **Biologics and Biosimilar Access and Traceability Task Group** began looking at use cases for the sending and receiving of this information using the NCPDP SCRIPT RxFill and medication history transactions.
 - The **X12 270/271 version 7030 Review Task Group** was created. The goal of the task group is to review the X12 270/271 modifications made to the standard and provide comments if necessary.

WG14 Long Term and Post Acute Care (LTPAC)

Task Group Reports:

- The **LTPAC Current Billing Issues Task Group** submitted a DERF to update ECL values and the Version D Editorial Guide to replace the term “mentally retarded” with “intellectually disabled”. The task group responded to inquiries about the appropriate SCC value and DAW value to use for two Long Term Care unique scenarios.
- The **ePrescribing Task Group** is focusing its efforts on current SCRIPT 10.6 standard addressing needs for long-term and post-acute care settings. This included a review of changes to the standard for future versions and identifying where the SCRIPT standard needed LTPAC industry DERF’s. The task group continues to be focused on capturing gaps and challenges that could potentially be addressed in future versions of the standard.
- The **Consultant Pharmacy Interoperability Task Group** completed the review and mapping of data requirements to the available C-CDA Consult Note templates. The task group initiated the creation of a recommendations document for the C-CDA Consult Note.
- The **Best Available Evidence (BAE) Automation Task Group** did not meet this quarter. Shelly Winston of CMS reported the automation of BAE through HPMS Complaints Tracking Module (CTM) effective March 2017.
- Received updates from the **WG1 Eligibility Verification Task Group, WG9 Hospice Task Group, WG9 Medicare Part D FAQ Task Group and MC Real Time Prescription Benefit Inquiry (RTPBI) Task Group.**

Work Group 16 Property & Casualty/Workers Compensation

Old Business:

- DERF 001377 Colorado Compound Codes submitted by WG16 was included in Ballot WG010072R which is considered a valid ballot having received the required 60+% of Consensus Group votes and 75%+ approval rating.

Task Group Reports:

- The **Legislative/Regulatory Monitoring and Education Task Group** provided an update on a new process and tool to be used for tracking state regulatory and legislative initiatives affecting Workers’ Compensation programs.
- The **Billing and State Reporting Task Group** provided an update regarding states moving to adopt regulations for e-billing, standard paper billing and EDI reporting.
- The **Future Development Needs for WC/PC Task Group** will begin meeting once next versions of both NCPDP and relevant X12 TR3s are finalized to identify WC needs and develop strategies to meet those needs.

Work Group 45 External Standards Assessment, Harmonization and Implementation Guidance

Old Business:

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

Task Groups:

- The **Document Revision Task Group** did not meet as the requested CARCs did not impact the pharmacy industry. One CARC was approved by the Code Committee and approved by the work group to be added to the mapping document as an N for pharmacy. It will be published on the web site and submitted for inclusion in the next *X12 Code Value Usage in Health Care Claim Payments and Subsequent Claims* document.

- The **Pharmacy and/or Combination ID Card Task Group** did not meet.
- The **X12 7030 834/835 TR3 Review Task Group** prepared and submitted comments on the X12 7030 835. The next comment period for the X12 7030 837s opened on February 1. The comment period for the X12 270/271 is to open March 1 and will be jointly reviewed by Work Groups 1 and 11.
- The **834/835 FAQ Task Group** did not meet.
- The **DSMO Task Group** received no DSMO requests for review. Nancy Bridgman was named as lead of the task group.
- The **DIR Task Group** has identified a new Task Group lead. Meetings will resume February 15 with intent of having a definitive definition of what constitutes Direct and Indirect Remuneration by the May meeting.
- An update on the **MC UDI Task Group** was provided.

MC Maintenance and Control

DERFs/ECLs Reviewed:

- 45 new and pended DERFs/ECLs were reviewed (see WG1, WG2, WG7 and WG11).

DERFs/ECLs Reviewed:

- DERF 001406 was approved with no additional modification.
- DERF 001436 was approved with no additional modification.
- DERF 001440 was approved with no additional modification.
- DERF 001442 was denied with 73 in opposition.
- DERF 001445 was approved with no additional modification.
- DERF 001446 was pended.
- DERF 001455 was approved with no additional modification.
- DERF 001459 was withdrawn by the submitter.
- DERF 001463 was approved with no additional modification.
- DERF 001464 was approved with no additional modification.
- DERF 001465/ECL 000214 was approved with no additional modification.
- DERF 001466 was approved with 11 in opposition.
- DERF 001467/ECL 000215 was withdrawn by the submitter.
- DERF 001468 was approved.
- DERF 001469/ECL 000216 was approved with no additional modification.
- DERF 001470 was approved with no additional modification.
- DERF 001471 was approved with no additional modification.
- DERF 001472 was approved with no additional modification.
- DERF 001473 was approved with no additional modification.
- DERF 001474/ECL 000217 was approved.
- DERF 001475 was approved with no additional modification with 19 in opposition.
- DERF 001476 was approved with no additional modification.
- DERF 001477 was approved with no additional modification.
- DERF 001478 was approved with no additional modification.
- DERF 001479 was approved with no additional modification.
- DERF 001480 was approved.
- DERF 001481 was approved.
- DERF 001482/ECL 000218 was approved.
- DERF 001483/ECL 000219 was approved.
- DERF 001484/ECL 000220 was approved with no additional modification.

- DERF 001485/Emergency ECL 00021 was approved with no additional modification.
- DERF 001486 was approved.
- DERF 001487 was approved.
- DERF 001488 was approved.
- DERF 001489 was approved.
- DERF 001490 was approved.
- DERF 001491 was approved
- DERF 001492 was approved with one in opposition.
- DERF 001493 was approved with no additional modification.
- DERF 001494 was approved with no additional modification.
- DERF 001495 was approved with no additional modification.
- DERF 001496 was approved.
- DERF 001497 was approved with no additional modification.
- DERF 001498 was approved with no additional modification.
- DERF 001499 was approved.

Old Business:

- Received updates on:
 - Board of Trustees

Task Groups:

- The **Education/Legislation and Regulations Task Group** did not meet this quarter.
- The **Unique Device Identifier (UDI) Task Group** reviewed the results of the survey used to gather information on the current use of product/service identifier values.
- The **Real Time Benefit Check Task Group** received approval of their use cases and data requirements documents.
- The **API Task Group** reviewed the survey on the status of API usage. They developed a work plan for moving forward with development of diagrams, examples and educational material.
- The **Emergency Preparedness Task Group** did not meet this quarter.
- The **X12 TR3 Comment Consolidation Task Group** did not formally meet this quarter. They will begin meeting to review the 007030X323 Health Care Claim: Professional (837P) TR3 and preparing comments.

New Business:

- The attendees received recaps of each Work Group's activities.
 - Task Group leads received a Certificate of Appreciation
- NCPDP Most Valuable Participants (MVP) were announced and presented to recipients in attendance by Lee Ann Stember.
- Created the **Specialty Task Group** which will be responsible for coordinating the other established specialty related task groups (WG7 and WG11) and provide communications and website development to position NCPDP as relevant in regards to specialty pharmacy.
- Created the **ECL Task Group** which will clean up ECL values, enhance the ECL document format, provide guidance on ECL values and harmonize the ECL companion fields across different NCPDP Standards.
- New Project Development Form 000042 was approved with the recommendation the Standardization Co-Chairs and NCPDP Board of Trustees provide guidance on the direction of this New Project Development Form.
- New Project Development Form 000043 was approved with the recommendation to assign to a new task group in WG11. This new task group will need to work with the WG9 PDMP TG.

