

November 2017 Work Group Recaps:

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

Work Group 1 Telecommunication

DERFs/ECLs Reviewed:

- DERF 001500 was withdrawn.
- DERF 001524/ECL 000232 was withdrawn (refer to DERF 001559).
- DERF 001525/ECL 000233 was withdrawn (refer to DERF 001559).
- DERF 001526/ECL 000234 was withdrawn (refer to DERF 001559).
- DERF 001558 was approved.
- DERF 001559/ECL 000248 was recommended for MC to pend.
- DERF 001560/ECL 000249 was recommended for MC to approve.
- DERF 001561 was approved.
- DERF 001562/ECL 000250 was recommended for MC to approve as modified.
- DERF 001578/Emergency ECL 000254 was recommended for MC to approve as modified.

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.
 - 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 processes.
 - NCPDP has asked the industry to provide input on the implementation timeframe before the NPRM is published.
 - NCPDP has 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: The new target date for this regulation is early 2016.
 - 01/21/2016 Update from NSG: This policy item is undergoing the rulemaking process, and at this time a specific timeframe cannot be provided.
 - 04/11/2016 Update from NSG: The request is still in the rule making stage, so at this point CMS cannot 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: This policy is in the rulemaking stage, there should be an NPRM out by Mid-2017.
 - 02/2017: Still tracking to a mid-2017 date.
 - 05/2017: Summer 2017.
 - 08/2017: Still tracking to a late summer 2017 NPRM.
 - 11/2017: Possibly sometime in 2018.

Task Groups:

- The **Telecommunication FAQ Task Group** reviewed five questions and a proposed modification to the Version D.0 Editorial document by the WG14 LTPAC Billing Issues TG. The work group approved the LTPAC Billing Issues TG modification and the IIN guidance for publication.
 - The **Morphine Equivalent Dosing (MED) Sub-Task Group** submitted an Emergency ECL DERF for an October 15, 2018 effective date which includes new reject codes, reason for service codes and result of service codes. The effective date was changed to January 2019. The group also presented draft guidance for opioid limitations. The guidance includes usage of new and existing reject codes, reject code combinations as well as override mechanisms and the use of prior authorization numbers. The guidance will be reviewed by the task group in the next quarter.
 - The **FAQ Controlled Substance Guidance Update Sub-Task Group** evaluated the fields needed to properly identify short / partial filling of controlled medications that are allowed by the DEA (for LTC and Terminally Ill patients) and the CARA legislation (for opioids). The group will be creating a guidance document and coordinating with other applicable task groups to ensure the recommendations work together.
- The **Coordination of Benefits Task Group** updated the COB related transmission examples for version F2 of the Telecommunication Standard and addressed two questions. The question addressing the usage of the “0” and “1” values in the Other Coverage Code field was returned to the task group for additional work.
- The **Information Reporting Problems Task Group** continued the review and revisions to the current Part D COB white paper. The group also began the review of the SPAP/ADAP Data Exchange white paper to update any references to manual processes that have been replaced with the automated HPMS process. The Matching Logic for N Transactions Best Practices was approved and posted on the NCPDP website. The *NCPDP Best Practices Guide Managing Medicare TrOOP Eligible Other Health Insurance Information for Prescription Drug Plans* document was approved by CMS.
- The **Post Adjudication Task Group** did not meet this quarter.
- The **Definition of a Valid Prescriber Task Group** created a letter to CMS outlining concerns with the Medicare Part D prescriber enrollment and Medicaid Manage Care provider enrollment requirements. The group also addressed questions.
- The **Part D Supplemental Payment Reporting Task Group** discussed the delay of the NX reports with Medicare Beneficiary Identifier (MBI) fields.
- The **Eligibility Verification Enhancements Task Group** recommended the appropriate reject code and text message to use for a non-approved provider taxonomy code received on an E1 transaction. The group also reviewed and provided recommendations on the Facilitator’s Part A, B and D payer sheets to support the MBI (Medicare Beneficiary Identifier). Pharmacy concerns related to the E1 transactions and the MBI transition were sent to the WG9 SSNRI Task Group.
- The **Benefit Integration Task Group** continued working on the Benefit Synchronization transaction.
- The **Standardized Subrogation Task Group** did not meet this quarter.
- The **Usage of Submission Clarification Codes (SCC) Task Group** did not meet this quarter.
- The **Compound Task Group** did not meet this quarter.
- The **Upstream Reporting of Copay Assistance Task Group** is creating a paper to document the results of the task group research; not to provide recommendations or solutions. The research is exploring options for providing a record of payment made by supplemental payers in order for primary/prior payers to maintain accurate accumulator values.

New Business:

- **DSMO Change Requests Reviewed:**
 - 1201 – HIPAA Telecommunication Standard and Batch Standard Update Request was approved.
 - 1202 – HIPAA Subrogation Implementation Guide Request was approved.

Work Group 2 Product Identification

Old Business:

- Tom Bizzaro of First Data Bank (FDB) provided comments on health policy focusing on the status of the Affordable Care Act (ACA), healthcare related components of the tax bill, and state election results.
- Tammy Powell of the National Library of Medicine (NLM) provided an update on RxNorm and DailyMed.

Task Groups:

- The **Structure Product Labeling Activities Task Group** had no new activity to report this quarter.
- 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 submitted to WG2 for adjudication four new QUIC forms (see final adjudication determination by the WG in this report):
 - QUIC #201705 Novartis New Product (KYMRIAH)
 - QUIC #201706 ITCA 650
 - QUIC #201707 Insulin Pen
 - QUIC #201708 Dermira Single Use Towelette
 - Reviewed eight products to determine the billing unit and package size.
 - For July, August, and September 2017, 1,854 new and zero changed billing unit indexing files were generated by FDA based on the files received by the compendia. The compendia group has reconciled the 7 NDCs with discrepancies.
 - Formalized the process of engaging a manufacturer upon the receipt of a QUIC form if the submitter is not the manufacturer. Created template for body of email to be sent to manufacturer. The WG approved the email template.
- The **SPL REMS Requirements Task Group** did not meet this quarter. The co-lead reported the FDA published draft guidance on [Providing Regulatory Submissions in Electronic Format – Content of the Risk Evaluation and Mitigation Strategies \(REMS\) Document Using Structured Product Labeling \(SPL\)](#). In addition, the first voluntary submission and approval of a REMS document using SPL recently occurred for Suboxone and Subutex. The posting of SPL-structured REMS for Suboxone and Subutex brings to fruition a recommendation initially made by NCPDP WG2 in November 2010.
- The **Dates Associated with Pharmaceutical Products Task Group** continues to work on the content of a white paper which describes the definitions of the data elements in the different market segments and the life cycle of a product.
- The **Naming Standards for Drugs, Biologics and Biosimilars Task Group** did not meet this quarter. The co-leads noted that there are many questions that remain unanswered about the FDA's January 2017 Guidance "Nonproprietary Naming of Biological Products" following FDA presentations on the topic at the National Library of Medicine (NLM) RxNorm Jamboree and Drug Information Association (DIA) Biosimilars Conference.

- The **Application of the Billing Unit Standard Clarification Task Group** completed review and categorization of products which were subjects of QUIC forms. The task group is consolidating categories related to the exceptions in preparation for drafting a guidance document.
- The **WG2/WG11 Harmonization of Prescribing and Dispensing Units Task Group** had no new activity to report this quarter.
- Received an update from the **WG11 REMS Workflow to Transactions Task Group**.
- Received an update from the **MC 2D Barcode Implementation Task Group**.

New Business:

- New QUIC Form Review:
 - QUIC #201705 Novartis New Product (KYMRIAH)
BU = EA with a quantity of 1 per section 5.1.7 of the Billing Unit Standard.
 - QUIC #201706 ITCA 650
BU = EA (but not a kit) with a quantity of 1 per section 5.1.14 of the Billing Unit Standard.
 - QUIC #201707 Insulin Pen
BU= ML with a quantity 1.5 mL for the 1 pen package and 3.0 mL for the 2 pen package per section 5.2.2 of the Billing Unit Standard.
 - QUIC #201708 Dermira Single Use Towelette
BU = EA with a total quantity of 30 per section 5.1.6 of the Billing Unit Standard.
- Dennis Wiggins, CFO, DisposeRx, gave a presentation about the product, DisposeRx.
- Paul Loebach, Director, Drug Registration and Listing Staff, Food and Drug Administration (FDA), gave a presentation about the FDA's annual recertification of its drug listing.

Work Group 7 Manufacturer and Associated Trading Partner Transaction Standards

Ballots Adjudicated:

- **Ballot WG070011** for enhancements to the Manufacturer Rebate Utilization, Plan, Formulary, Market Basket, and Reconciliation Flat File Standard Implementation Guide is considered a valid ballot having received the required 60%+ of Consensus Group votes. Two affirmative with comment and one negative with reason comment were received. WG7 reviewed and categorized the comments. See Letter Ballot Comment spreadsheet for the ballot results. Following a 30-day appeal period, the ballot will be sent to the NCPDP Board of Trustees for approval.
- **Ballot WG070012** for the initial release of the Specialty Pharmacy Data Reporting Standard Implementation Guide is considered a valid ballot having received the required 60%+ of Consensus Group votes. One affirmative with comment, thirty-eight negative with reason comments and one object with reason comment were received. WG7 reviewed and categorized the comments. See Letter Ballot Comment spreadsheet for the ballot results. Following a 30-day appeal period, the ballot will be sent to the NCPDP Board of Trustees for approval.

Task Groups:

- The **Medical Rebate Standard Task Group** continues their work to determine whether the unique fields in the Medical Rebate Standard should be incorporated into the Manufacturer Rebate Standard in order to have one standard to accommodate both business needs. The task group needs input from producers/submitters to determine why the Medical Rebate Standard is not being used.
- The **Medicaid Drug Rebate Program Task Group** did not meet this quarter.

- The **Manufacturer Rebate Standard Task Group** continued the discussion of value-based rebates and identification of use cases. The task group also reviewed the comments on Ballot WG070011 (see above).
 - **Specialty Pharmacy Data Exchange Sub-Task Group** met to review the comments submitted on Ballot WG070012 (see above).
- The **Formulary Management Survey Task Group** was disbanded as the work has been completed.

New Business:

- Regulatory Product Tracing Report - Although manufacturers are to begin including a product identifier on prescription drug packages and cases on November 27, 2017, the FDA is delaying enforcement of those requirements until November 2018 to provide manufacturers additional time and avoid supply disruptions. The Maintenance and Control 2D Barcode Implementation Task Group was formed to work with manufacturers to determine how and when the product packaging is being changed to comply with the Drug Supply Chain Security Act (DSCSA). The task group developed the [NCPDP GS1 DataMatrix White Paper](#) which discusses the issues associated with removal of the GS1 UPC-A and provides recommendations in supporting the requirements for manufacturers to affix or imprint the new product identifier to each package and homogenous case of a product.

Work Group 9 Government Programs

Task Groups:

- The **Prescription Drug Monitoring Program (PDMP) Task Group** reviewed Controlled Substance Reporting (CI-CII) requirements as a standalone standard to supplement the B1 real-time reporting to the PDMP Facilitator as outlined in the white paper, [NCPDP's Recommendations for an Integrated, Interoperable Solution to Ensure Patient Safe Use of Controlled Substances](#). New fields from the Telecommunication Standard vF2 and fields required by states currently or in the future were added to the document. The task group requested input from WG9 regarding the name of the new standard. Next quarter the task group will develop language for the implementation guide. The task group also reviewed the [State PMP Tracking Document](#) and updated PMP information for the following states: Arkansas, Delaware, Indiana, Maine, Missouri, Mississippi, North Carolina, Ohio, Oregon, Rhode Island and Texas. The tracking document was also modified to add a tab for "change history".
- The **340B Task Group** continued to review the spreadsheet of current industry methods of capturing the data on 340B activity (Oregon Batch File, Use of Submission Clarification Code of 20, Use of Basis of Cost value 08, 340B Information Reporting and Use of Unique BIN/PCN) and the opportunities and drawbacks of each method by stakeholder perspective. The stakeholders identified in the spreadsheet are 340B Covered Entity, Contract Pharmacy, 340B Administrator, State Medicaid Agency/ADAP, MCO or PBM Processor and Manufacturer. Next step is how to get the task group discussion to the industry. One of the suggestions was to move forward with an update to the current [340B Information Exchange Reference Guide](#). Discussions will occur over the next quarter which may result in a white paper that outlines the uses and limitations and recommendations for best practices around 340B.
- The **Government Programs Encounter Reporting Standards Task Group** is currently reviewing a sub-set of fields that were set aside for more focused discussions including Eligibility, Accumulator, COB, Pricing, Compound and potential new fields (approximately 80 fields still need to be reviewed). The task group requested feedback on the extent of COB data use from California, Texas and New York.

- 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** reported the following:
 - An overview of the white paper, [*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*](#) was presented during the 2017 Medicaid Enterprise Systems Conference in August.
 - The white paper was distributed to NACDS Policy Council meeting in October 2017 and member chain pharmacies were encouraged to notify the task group should they experience what they believe to be an issue with how the standard is utilized when implementing cost based reimbursement.
 - There are a few states operating without approved State Plan Amendments (SPA) and a few states that have yet to submit a SPA.
- The **Medicaid Frequently Asked Questions Task Group** reviewed the State of Kansas Medicaid guidance on the use of Submission Clarification Code 10 and 47 to override 90-day fill requirements on maintenance medications and the appropriate reject code for the State of Illinois Medicaid policy that rejects claims for a member exceeding four prescriptions per 30 days. The task group submitted a letter to CMS requesting repeal (or delay) of the Medicaid Managed Care Provider Enrollment for Medicaid Managed Care plan prescribers and pharmacies until a more streamlined provider validation process can be established. The task group will continue reviewing state Medicaid ORP requirements and how to efficiently streamline the validation process from state to state, specifically the standardization of enrollment file formats.
- The **Hospice Task Group** continued to work on a webinar series to facilitate educational opportunities for Hospice providers and Medicare Part D Plans/Processors and will schedule a date for presentation. Future work of the task group includes automation of the reconciliation process between Hospice providers and Payers/Processors in collaboration with CMS.
- The **Medicare Standardized Fraud, Waste and Abuse Training Attestation Task Group** reviewed a request to modify the wording of the Standardized Fraud, Waste and Abuse Training Attestation form. The modification was approved by WG9 during the November Work Group meeting. The revised form will be added to the Pharmacy Profile in dataQ®.
- The **Medicare Prescription Drug Event (PDE) Task Group** reviewed and discussed three questions this quarter (Plan to Plan Editing, Modification to the Reopening Request Spreadsheet and PDE Adjustment for Timestamp). Two new questions were received. One question was finalized and submitted to CMS for response.
- The **Medicare Financial Information Reporting Task Group** reviewed and commented on the Financial Information Reporting (FIR) Daily Cumulative FIR Aging Report Guide to include MBI, requested a change to retrigger dates and reviewed the process for updating email contacts.
- The **Supplemental Payer Part D Reconciliation Standardization Task Group** did not meet this quarter.
- The **OIG Report OEI 05-12-00540 Task Group** is on hiatus.
- The **Medicare Part D FAQ Task Group** reviewed and discussed six questions this quarter (Commercial Payer Subrogation, Partial Fills of Schedule II Controlled Substances, Source of QMB Indicator, Combining Routine and PRN Orders, Indian Health Service Billing Transaction Identification, Medicare Transition Logic). Three questions remain under review and three questions were presented to WG9 for approval. WG9 pended Question 70. Commercial Payer

Subrogation to the task group. WG9 approved Question 133. Partial Fills of Schedule II Controlled Substances and Question 140. Medicare Transition Logic.

- The **Social Security Number Removal Initiative (SSNRI) Task Group** submitted a letter to CMS requesting a “black-out” period for Daily Transaction Reply Reports prior to April 1, 2018 which is the start date of the Medicare Beneficiary Identifier (MBI) transition period. The task group reviewed the use of Health Insurance Claim Number (HICN) in NCPDP standards, identified revisions necessary to replace HICN with MBI and submitted DERF 001561 which was reviewed and approved in WG1 Telecommunication. The task group requested the name of the task group be changed to Medicare Card Project to align with CMS’ change from Social Security Number Removal Initiative to Medicare Card Project. WG9 approved the change.
- The **Coordination of Benefits Contractor (COBC)/Benefits Coordination & Recovery Center (BCRC) Task Group** discussed COBC full replacement file and the method by which COBC data is updated for members that are not present in the file, but have COBC data in the plan sponsor system. Provided input to CMS regarding future fields needed for the COBC data. Provided recommendations to the SSNRI task group to replace HICN in the COBC file rather than add an additional field. Worked on a draft letter to CMS regarding recommendations for enhancements to the COBC. Requested CMS extend COBC data from 27 months to the full 36 months. Reviewed a question related to the situation where a drug was covered by an Independent Charity Pharmaceutical Assistance Program (PAP) and the beneficiary was not out-of-pocket and the process used to issue payment back to the PAP program. The response was reviewed and approved by WG9.

New Business:

- Project Development Form 000046 – Industry Credentialing. WG9 formed the **Standardized Pharmacy Credentialing Task Group**.
- DSMO Change Request 1202 - Subrogation Implementation Guide was approved by WG9.

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 and Pharmacist Clinical Services Task Group** gave an update on the eCare Plan. The comment only ballot has been completed for two implementation guides, the C-CDA and the FHIR. Comments are being reconciled for resolution. The task group also completed revising and updating the *MTM Billing* white paper. The white paper will undergo final editing and be presented to at the February 2018 work group for approval.
- The **mL White Paper Task Group** met once and reviewed the work plan for updating the white paper. The group agreed that the revised paper should update the third recommendation of the original paper to address more recent research favoring the provision of dosing devices that most appropriately corresponded with the volume and device accuracy for the prescribed dose. Key industry contacts were also identified for gathering feedback regarding adoption and policy changes within various pharmacy settings. An overview was recently presented to the Centers for Disease Control and Prevention (CDC) on the task group’s plan to revise the white paper.
- The **WG14 Consultant Pharmacist Interoperability Task Group** announced the [C-CDA Consult Note Guidance Document](#) has been finalized and published on the NCPDP website. The Consult Note provides consultant pharmacists a means for documenting and sharing their recommendations electronically with providers. The task group is seeking volunteers for a pilot.

- An update was provided on the activities of the **WG11 Specialty Requirements for ePrescribing Task Group**.

New Business:

- John Sykora, BPharm, MBA of Chapman University provided a presentation on his recent Pinnacle Award and his patient-centric pharmacy business model.
- The work group completed a review of the 2017 ONC ISA ([Interoperability Standards Advisory](#)) document as provided by the Maintenance and Control Education, Legislation and Regulations Task Group. The work group made modifications to the recommended changes.
- The work group reviewed comments and formulated responses for the HL7 C-CDA ballot.

Work Group 11 ePrescribing & Related Transactions

Ballots Adjudicated:

- **Ballot WG110077** for the SCRIPT, Specialized and XML Standard is considered a valid ballot having received the required 60% of Consensus Group votes. The negative, object, affirmative and accept with comments were adjudicated by the Work Group. The comments categorized as persuasive and substantive result in the removal of DERF 001512 from the ballot. See Letter Ballot Comment spreadsheet for the ballot results. Submitters of the Negative Votes and Objection Comments are given the opportunity (either at the WG meeting or in writing) to change their votes. The ballot will be recirculated.

DERFs/ECLs Reviewed:

- DERF 001509 was withdrawn by the submitter.
- DERF 001553 was approved as modified.
- DERF 001563 was approved as modified.
- DERF 001564 was pended to the WG11 SCRIPT Implementation Recommendations Task Group.
- DERF 001565/ECL 000251 was approved as modified.
- DERF 001566 was approved as modified.
- DERF 001567 was approved.
- DERF 001568 was pended to the WG14 LTPAC ePrescribing Task Group.
- DERF 001569 was approved.
- DERF 001570 was approved.
- DERF 001571 was approved with one in opposition.
- DERF 001572 was approved.
- DERF 001573 was approved as modified.
- DERF 001574 was approved.
- DERF 001575 was approved with three in opposition.

Old Business:

- Update on the next version of the SCRIPT Standard regulation was given.
- Update on electronic prescribing of controlled substance prescriptions was given.

Task Groups:

- The **Biologics and Biosimilar Access and Traceability Task Group** brought forth DERF 001575.
- The **ePrescribing Regulatory Task Group** continued discussion on the response received from the DEA on the NCPDP letter regarding RxRenewal.
- The **Formulary and Benefit Task Group** continues working on alternatives by indication and total cost. They received feedback from the work group on tier structure.

- The **Harmonization of Prescribing and Dispensing Units Task Group** did not meet this quarter. A webinar was held on October 24, 2017 entitled *Prescription Quantity Units: Exploring Accuracy Issues, Downstream Impacts, and Solutions*. An archived version is available on the [NCPDP website](#).
- The **Implementation of Structured Sig Task Group** focused on validating the sig examples in the SCRIPT Standard v2016071, working on FAQs. They also met with SNOMED CT® on additional codified values to be used in the structured sig.
 - The **Structured and Codified Sig Format Implementation Guide Analysis Sub-Task Group** continued identifying probable changes for the *Structured and Codified Sig Format Implementation Guide* (housed in WG10).
- The **Integrate S&I PDMP Guidance into SCRIPT Task Group** brought forth DERFs 001573 and 001574.
- The **NCPDP/HL7 Pharmacist Functional Profile Task Group** brought forth questions to the work group around the recommendation pharmacy adopt the Meaningful Use 2015 EHR test criteria Functional Profile (FP). They will begin working on guidance for using the FP.
- The **Prior Authorization Workflow to Transactions Task Group** brought forth DERF 001566 for a new optional message type of PANotification and changes for a pharmacist initiated electronic prior authorization.
- The **REMS Workflow to Transactions Task Group** continued reviewing and preparing comments on the *REMS Platform Standards Initiative Needs Assessment* document which was recently released by the FDA.
- The **SCRIPT Implementation Recommendations Task Group** brought forth DERFs 001553, 001564 and 001569. Received approval to change the task groups name to Electronic Prescribing Recommendations Task Group. Received approval for updates to the *SCRIPT Implementation Recommendations* document:
 - New FAQ -Where should State specific Opioid exemption codes be populated in SCRIPT v10.6?
 - New FAQ - I am required to send either a diagnosis code or a Code on Dental Procedures and Nomenclature (CDT Code) on controlled substances prescriptions. How do I send this in the SCRIPT transactions?
 - Update to Section: COUPON/DISCOUNT INFORMATION EXCHANGE
- The **SCRIPT Managed Updates Schedule Task Group** is on hiatus awaiting the outcome of Ballot WG110077R.
- The **Specialty Requirements for ePrescribing Task Group** continued looking into the creation of an intake form.
- The **WG14 LTPAC ePrescribing Task Group** brought forth DERFs 001563, 001568, 001571, and 001572. Received approval for updates to the *SCRIPT Implementation Recommendations* document:
 - Update of language in Section: Change to Existing Orders
- The **X12 270/271 version 7030 Review Task Group** did not meet this quarter as the X12 270/271 TR3 release has been delayed.
- The **XML Task Group** reviewed all submitted DERFs and provided recommendations for them.

New Business:

- The **Dispensed Medication Reporting Task Group** was formed. Leads include Cathy Graff, of Sonora Advisory Group, LLC and Michele Davidson of Walgreen Co. The purpose of the task group is to develop a reporting standard based upon the SCRIPT related transactions.

WG14 Long Term and Post Acute Care (LTPAC)

Old Business:

- An Industry Update was provided on the status of NPRM to name a new version of the SCRIPT standard and what it means for the Long Term Post Acute Care industry. An update was provided surrounding ongoing initiatives by several agencies to create consistency of the definition of Long Term Care and how that may affect NCPDP downstream.

Task Groups:

- The **LTPAC Current Billing Issues Task Group** submitted DERF 001578/Emergency ECL 000254 to add a new Submission Clarification Code ECL value of “Discharge Medication” to clarify that a patient is being discharged from a Long Term/Post Acute Care setting. The ECL DERF was approved as modified in WG1 Telecommunication and approved with no further modifications in MC Maintenance and Control. The task group also reviewed ongoing work on new ECL DERFs that will be submitted for the February 2018 meeting.
- The **Long Term and Post Acute Care ePrescribing Task Group** is focusing its efforts on addressing needs for long-term and post-acute care settings in the SCRIPT Standard. They submitted DERFs 001563, 001568, 001571 and 001572 which were reviewed and approved by WG11 ePrescribing and Related Transactions and MC Maintenance and Control.
- The **Consultant Pharmacist Interoperability Task Group** announced the [C-CDA Consult Note Guidance Document](#) has been finalized and published on the NCPDP website. The Consult Note provides consultant pharmacists a means for documenting and sharing their recommendations electronically with providers. The task group is seeking volunteers for a pilot. NCPDP will partner with American Society of Consultant Pharmacists (ASCP) to create a press release for the industry.
- Received updates from the **WG1 Eligibility Verification Task Group**, **WG9 Hospice Task Group**, and **WG11 Prior Authorization Workflow-To-Transactions Task Group**.

Work Group 16 Property & Casualty/Workers Compensation

Task Groups:

- The **Legislative/Regulatory Monitoring and Education Task Group** provided updates on state regulatory and legislative initiatives affecting Workers’ Compensation programs for several states including Arkansas, Arizona, California, Colorado, Pennsylvania and Wyoming.
- The **Billing and State Reporting Task Group** provided an update on comments the task group submitted to Michigan surrounding their proposed changes of exempting pharmacies from the requirement of using the state specific WC700 code to bill for dispensing fees. The task group also provided updates on electronic billing updates for Michigan and New Jersey. The task group will be scheduling a meeting to formulate written comments for New Jersey and asked for participation.
- The **Future Development Needs for WC/PC Task Group did not meet this quarter**. This 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. Members were asked to submit any known issues for consideration.

Work Group 45 External Standards Assessment, Harmonization and Implementation Guidance

Old Business:

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

- The 2017 – 2018 Work Group 45 Scope and Goals were reviewed by the work group. There were some changes made by the Standardization Co-Chairs which the work group felt restricted the scope of work to standards that are mandated by HIPAA and ACA. The work group reviews and works with non-HIPAA and non-ACA standards. The work group approved modifications to clearly define the intended scope. The revised Scope and Goals will be resubmitted for approval.

Task Groups:

- The **Document Revision Task Group** met once this quarter. Reviewed new and revised CARCs and usage notes which were approved by the Code Committee at the X12 September meeting. Most did not impact the pharmacy industry. The task group will meet to review the changes to CARCs used by pharmacy and present recommendations to the work group in February 2018. The updated mapping document with tentative pharmacy use is available in the download folder.
- The **Pharmacy and/or Combination ID Card Task Group** did not meet this quarter. Barcode modifications to the implementation guide to reflect the change from BIN to IIN were completed and the guide was approved by the Board to be published.
- The **X12 7030 834/835 TR3 Review Task Group** met once this quarter to discuss a change that was made to the 835 Loop ID 2100 DTM Claim Received Date to include pharmacy requirements.
- The **834/835 FAQ Task Group** met once this quarter. A question was referred to them but WG9 had already resolved it.
- The **DSMO Task Group** received no DSMO requests for review.
- The **DIR Task Group** presented examples of transactions representing positive and negative claim level DIR taken on the original claim and retroactively, including partial repayment of an assessed fee. The work group agreed to submit for a new CARC code for DIR specific adjustments. The CARC code has been reviewed and received preliminary approval with WG3 of X12. The new CARC code request has been submitted for approval at the January 2017 X12 meeting.

MC Maintenance and Control

DERFs/ECLs Reviewed: 21 new and 6 pended DERFs/ECLs were reviewed (see WG1, WG11, and MC).

- DERF 001500 was withdrawn by the submitter.
- DERF 001509 was withdrawn by the submitter.
- DERF 001524/ECL 000232 was withdrawn by the submitter. See DERF 001559/ECL 000248.
- DERF 001525/ECL 000233 was withdrawn by the submitter. See DERF 001559/ECL 000248.
- DERF 001526/ECL 000234 was withdrawn by the submitter. See DERF 001559/ECL 000248.
- DERF 001553 was approved with no further modifications.
- DERF 001558 was approved.
- DERF 001559/ECL 000248 was pended.
- DERF 001560/ECL 000249 was approved.
- DERF 001561 was approved.
- DERF 001562/Emergency ECL 000250 was approved with no further modifications.
- DERF 001563 was approved with no further modifications.
- DERF 001564 was pended.
- DERF 001565/ECL 000251 was approved with no further modifications.
- DERF 001566 was approved with no further modifications.
- DERF 001567 was approved.

- DERF 001568 was pended.
- DERF 001569 was approved.
- DERF 001570 was approved.
- DERF 001571 was approved.
- DERF 001572 was approved.
- DERF 001573 was approved with no further modifications.
- DERF 001574 was approved.
- DERF 001575 was approved.
- DERF 001576/ECL 000252 was pended.
- DERF 001577/ECL 000253 was approved.
- DERF 001578/Emergency ECL 000254 was approved with no further modifications.

Old Business:

- Received updates on:
 - Board of Trustees
 - HIPAA
- Update on Project Development Form 000044
 - The project was approved by the Standardization Co-Chairs and the Board of Trustees. The **Dispensed Medication Reporting Task Group** was created in WG11. WG11 will be invited to participate.
- Update on Project Development Form 000046
 - The project was approved by the Standardization Co-Chairs and the Board of Trustees. The **Standardized Pharmacy Credentialing Task Group** was created in WG9.

Task Groups:

- The **Education/Legislation and Regulations Task Group** completed comments (corrections) for 2017 ONC Interoperability Standards Advisory.
- The **Real Time Prescription Benefit Standard Task Group** completed the mapping of the data elements of the Response transaction to data elements in Telecommunication and SCRIPT standards. The task group is in the process of reviewing the EDI format transaction layout.
- The **API Task Group** is reviewing the NCPDP Connectivity Guide in relation to API's.
- The **Emergency Preparedness Task Group** reviewed the NCPDP.org website to ensure all Emergency Preparedness information was current and accurate. The task group has been reviewing the NCPDP Emergency Preparedness document v1.4, in relation to the industry meeting with the Assistant Secretary for Preparedness and Response (ASPR) which occurred in September 2017.
- The **X12 TR3 Comment Consolidation Task Group** did not meet this quarter.
- The **ECL Task Group** finalized the best practice guidance for ECL and Emergency ECL DERF submission. They completed review of ECL values for "Other" across all standards and recommend an expanded description or value limitation to clearly define when the value is to be used. They also created an ECL DERF Review Checklist to provide a framework for the task group review of ECL DERFs.
- The **Specialty Task Group** receives regular updates from task groups with activity which either specifically targets specialty workflows or may impact/benefit specialty stakeholders. The task group also provides a forum for participants to share industry events and learning opportunities on specialty.

- The **2D Barcode Implementation Task Group** created and published a white paper with pharmacy specifics to ensure a smooth transition from the UPC-A Linear Bar Code to the 2D Bar Code as indicated in the Drug Supply Chain Security Act (DSCSA).
- The **Gender Transition Task Group** created and submitted DERF 001576/ECL 000252 to introduce a new Submission Clarification Code to allow Pharmacies to override gender rejects when the pharmacy determines the reject is invalid for patients transitioning genders.
- The **Patient Identification Task Group** began developing use cases to outline the communication of universal patient identifiers (UPIs) within the NCPDP Standards. The task group also agreed upon their scope and goals.

New Business:

- The attendees received recaps of each Work Group's activities.
- Reviewed and approved DSMO Change Request System (CRS) Requests No. 1201 and 1202.