

Work Group Recaps:

Work Group 1 Telecommunication

Ballots:

- Ballot WG010021 for the Telecommunication Standard-Requests to provide clarification of when and how to use Reject Codes and the Reject Field Occurrence Indicator during a Multi-Ingredient Compound Transaction Rejected Response was valid at 65.52%. There were no Negative With Reason comments. The Ballot will proceed to the Board of Trustees.

DERFs:

- DERF 672 which requested “As a result of the November Quarterly Workgroup Meeting and the version 5.1 editorial document discussion in Workgroup 1, this DERF is being submitted. The intent of this DERF is to distinguish between a patient’s residence (e.g., home, nursing facility) and where a drug or service was administered (e.g., pharmacy, office). For example, a patient living in a Skilled Nursing Facility (patient residence) goes to an End Stage Renal Disease Facility (place of service) to receive dialysis. Coverage or reimbursement of the drug or service may be limited due to the location that dialysis takes place, rather than where the patient resides. This DERF requests a revised name and definition for field 307-C7 (Patient Location), replacement of the list of values for 307-C7, and a new optional data element and values for Patient Residence. It is recommended that the list of values for revised 307-C7 be maintained in the External Code List document. It also recommended that the list of values be consistent with the X12N 837 Implementation Guide.” was approved with modifications.
- DERF 682, which requested to adopt the Protocol document for Telecommunication Standard and Batch Standard, was pended.
- DERF 683 requests to eliminate the confusion of how to calculate a Sales Tax Amount when using the value of 01 = Gross Amount Due in Data Elements 484-JE (Percentage Sales Tax Basis Submitted) & 561-AZ (Percentage Sales Tax Basis Paid). By definition Gross Amount Due includes Sales Tax. The DERF was approved.
- DERF 684 This DERF is a result of analysis by the WG1 Reject Code Task Group. New Reject Code Descriptions are requested for addition. Verbiage has been added to the Reject Code List to explain “Not Supported”, “Not Covered”, and “Missing/Invalid” reject code assignment and usage. Also clarification is given for Reject Codes that apply to Product/Service ID, can apply to both fields Product/Service ID (407-D7), and Compound Product ID (489-TE). The DERF was approved.
- DERF 686 Request to adopt the Billing Unit Standard Version 2.0 was approved with modification.

Task Groups:

- The **Post Adjudicated Pharmacy Reporting** Task Group is continuing to meet biweekly to create a standard. The purpose of the standard is to allow the exchange of Patient claim history from one payer to another when the business moves from one business to another, and to let payers share information with their clients after claims have been processed (for example payer to payer, or payer to medical group). They are working on the implementation guide.
- The **Proposal Patient Validation Standard** Task Group did not provide an update (pilot companies are exchanging claims without patient name (as appropriate)). A document will be creating with findings and recommendations.
- The **Coupon Task Group** will be presenting draft clarifications of coupon processing based on ballot comments at a future meeting.
- The **Prior Authorization Transfer Task Group** is creating a standard format and code set for transferring prior authorizations between PBMs. This format would be used when clients change PBMs/Claims Processors and request that their prior

authorizations transfer from their previous PBM/Claim Processor to their new PBM/Claim Processor. This task group will be dormant until after the August work group meetings as companies are limiting a draft structure this summer to be ready for January plan changes.

- The **Long Term Care Pharmacy Task Group** is creating solutions for problems with Return Credit and timing issues of claim amendments.
- The work group discussed Telecommunication Version 5 Frequently Asked Questions. See documents on WG1 page.
- The **Reject Codes Task Group's** recommendations are contained in DERF 684. See documents on WG1 page.

Updates:

- An update on HIPAA activity was given.
- An update of the WEDi SNIP Committee was given.
- NCPDP SNIP Committee has resumed activities via conference calls. They are discussing COB, compounds, prior authorization, and other business needs.
- No DSMO Change Requests were discussed.
- The new laser Universal Claim Form (UCF) should be available for purchase through Moore Wallace North America in September.

New Items:

- The Telecommunication Standard and Implementation Guide have been combined into one document, the NCPDP *Telecommunication Standard Implementation Guide* as part of the consolidation of all NCPDP standards going forward from version A.1. See documents on WG1 page.
- The work group discussed a document on the use of the Product/Service ID Qualifiers (UPC, HRI, NDC, etc) that WG2 is working on.
- The work group discussed Project 000022 on a **pre-determination of benefits inquiry** transaction and created a task group.

Work Group 2 Product Identification

Updates:

- An NDC/NCVHS update was provided and RxNorm was discussed.
- UPC format and general usage within the Telecommunication Standard was discussed.
- The QUIC form process as originally developed and past letters to Manufacturers were reviewed.

New Items:

- QUIC forms on Androgel Pumps and Diastat Rectal Gel were discussed with a recommendation made for Androgel Pumps and the form pended for further investigation on the Diastat Rectal Gel.
- DERF 686, for the Billing Unit Standard Implementation Guide Version 2.0 was reviewed and approved.
- Compliance issues regarding use of the incorrect pack size for Copaxone 20mg Kit and the incorrect billing unit for Lovenox, a pre-filled syringe were discussed.

Work Group 3 Standard Identifiers

Task Groups:

- Task Group 1 presented updates to the **State Of the States** document.
- Task Group 2, **Affiliation Codes**, provided an update and presented a matrix for a proposed structure for accommodating changes to the NCPDP Provider File.

Updates:

- Updates were given on WEDi, HL7, NPI, NDC and HCIda.

New Items:

- The Work Group reviewed New Project Development Form No. 000019, which proposed providing NCPDP numbers to entities that do not qualify as retail pharmacies but wish to provide medical products (i.e. durable medical equipment)

under other appropriate state laws to patients, where such products are routinely covered as pharmacy benefit by health insurers.

- The issue of leading spaces on I.D. cards was reviewed, with plans made to provide an FAQ in the Implementation Guide to address this.
- A new task group was formed to **provide comments on a pharmacy ID card** to the Notice of Proposed Rule Making (NPRM) released by the Centers for Medicare and Medicaid Services in July about the Medicare Prescription Drug Benefit Program. This task group will join WG9, 11, and 12 also working on comments.

Work Group 4 Provider/Member Enrollment

Task Groups:

- **TG1 (Provider Enrollment White Paper)** - An initial draft template of the 274 White Paper on Enrollment was presented. A working session by task group members was held to review the beginning draft of the document and to continue composing it.
- **TG2 (Member Enrollment)** - The Task Group met for a working session to identify specific goals of the task group and outline a plan for how to proceed.

New Items:

- The Work Group reviewed DSMO Change Request System 1001 regarding enrollment in a health plan and agreed with the suggested change.

Work Group 5 Payment Reconciliation

Updates:

- The work group was provided with a HIPAA/Regulatory update.

New Items:

- The work group was given a presentation on ASC Security Protocol.
- There was discussion on how best to handle a negative balance on the 835 when there is no claim activity.
- A discussion on the Long Term Care task group, its work on Return Credits, and 835 implications for this proposed new transaction.
- A WEDI/SNIP update was provided.
- A task group was formed to take the **NCPDP 835 Mapping document and the Payment Template and update to the 4050 version of the 835 guide.**

Work Group 7 Manufacturer Rebates

Updates:

- Co-Chairs have requested CMS participation in a roundtable discussion with States, manufacturers, and vendors in an effort to increase use of the rebate standard among State Medicaid programs. The co-chairs confirmed that the CMS administrator has received the letter but is unable to address the request at this time. The roundtable task group was re-formed to attempt to gain support and make this roundtable meeting happen.
- The work group made a few changes to the implementation survey and re-distributed it. No new responses were returned but the task group will meet prior to the November meeting to try to gain more responses.
- The work group reviewed the 2004 scope and goals and approved some additional modifications to the goals.

New Items:

- The Co-Chairs reported that the Board of Trustees approved the New Project Development Form for a Best Practices Document. The members present created a list of issues they would like addressed in the document and placed them in priority order. The task group will begin working on this list of items and will report back at the November meeting.
- The task group for **Standard Updates** presented proposed changes. The work group members in attendance discussed the suggested changes presented by the task group. The members present discussed the proposed changes and the task group

will take the discussion and create a draft of the changes for the utilization file. The co-chairs encouraged members to invite others in the industry that might be interested in participating in the process.

Work Group 9 Government Programs

Task Groups:

- The **HIT Task Group** presented the final draft of the White Paper on Home Infusion Therapy. The work group approved the paper and it will now be sent to the Board for approval. Once approved by the Board, the paper will be sent to CMS.
- The **CMS Task Group** presented their report. The work group voted to proceed with the submission of 2 DERFs.

DERFs:

- The work group reviewed DERF 672 – see WG1 above. The DERF was approved.

Updates:

- The work group updated the State of the States and received State implementation information.

New Items:

- A new task group was formed to provide comments to the Notice of Proposed Rule Making (NPRM) released by the Centers for Medicare and Medicaid Services in July about the **Medicare Prescription Drug Benefit Program**. This task group will join WG11, 3, and 12 also working on comments.

Work Group 10 Professional Pharmacy Services

Updates:

- It was reported that NCPDP sent a letter to AMCP in June 2004, endorsing the Principles on Electronic Messaging document.
- The attendees reviewed the NCPDP v5.1 and Online Messaging document, with recommendations for specific reject codes and how they should be used. AMCP has approved NCPDP's recommendation that NCPDP take ownership of the document. The work group is asking members to review the document and send suggestions to Co-Chair Keith Fisher prior to the November work group meetings. The work group will further discuss the document at the November meeting.
- The co-chairs reported that AMCP is working with the University of Iowa on a study for to create a common methodology for DUR drug interactions. There should be some data available on the study in early fall of 2004.
- The work group decided to retire the ORDUR Application Manual, originally created in WG8, but will incorporate the useful information within the document in another document.

New Items:

- The work group revised and approved their 2004 Scope and Goals.
- The work group discussed the **standardization of SIGs**. The work group decided that they would work with HL7, JCAHO and other interested organizations to analyze and potentially develop standardized SIGs. A task group was formed to work on this project.

Work Group 11 Prescriber/Pharmacist Interface

Ballots:

- Ballot WG110017R to add support for Prior Authorization was valid at 61.3% and received the 90% approval. The work group will incorporate clarification language into the implementation guide based on a Negative With Reason comment. Negative With Reason commenters will be sent appeal letters. After the appeal timeframe, the ballot will proceed to the Board of Trustees for approval.
- Ballot WG110018 for the Prescriber/Pharmacist Interface SCRIPT Standard - Requests to accommodate the reporting of a supervisor by modifying the Provider

Segment from 2 to 3 loops and to provide further guidance of usage for the term “designated agent” (modified from “authorizing prescriber agent”) in the Provider Segment was valid at 64.37%. The work group categorized the Negative With Reason comments and will modify the ballot information as noted. The ballot will be re-circulated.

DERFs:

- DERF 687 Request to clarify ambiguity regarding the population of the RES segment in a REFRES Denial Response and recommend that the SCRIPT Imp Guide be revised to address it. The DERF was approved with modifications by WG11.

Task Groups:

- The **Prescription Transfer Task Group** gave an update. This is a new standard for a pharmacy-to-pharmacy transfer of prescriptions, for retail-to-retail transfers, or mail-order-to-mail-order transfers. The work group discussed questions from the task group. The task group is finalizing the formats and working on the implementation guide.
- The **E-prescribing Guidance Task Group** has completed a document to be given to the National Committee on Vital and Health Statistics (NCVHS) that discusses the current e-prescribing environment, gaps, actual implementations and pilot projects related to e-prescribing needs from the Medicare bill.
- The joint task of WG11 and 12 was formed due to Project 000017 **electronic signatures**. The task group met jointly during August. They are working on a recommendations document.
- A new task group was formed to provide comments on **e-prescribing** to the Notice of Proposed Rule Making (NPRM) released by the Centers for Medicare and Medicaid Services in July about the Medicare Prescription Drug Benefit Program. This task group will join WG9, 3, and 12 also working on comments.
- A new task group was formed to create a **standard for sharing formulary and benefit information between PBMs and prescribers**, based on information being shared today in proprietary formats.
- A new task group was formed to provide guidance of usage of the **RXFILL Notification** transactions.

Updates:

- One frequently asked question was discussed. It will be added to the next version of the SCRIPT Implementation Guide.

New Items:

- An overview was given on the “NCPDP-HL7 Electronic Prescribing Coordination Project” – collaboration on electronic prescribing between environments that are HL7 to/from NCPDP SCRIPT based environments (for example a hospital discharging a patient and sending a new prescription to the community pharmacy of the patient’s choice)

Work Group 12 Education – Legislation and Regulation

Old Business:

- Security/Enforcement – no update at this time
- There was a joint meeting of WG11 and 12 E-Signature Task Group. They are creating a recommendations document of current use of the signing of a prescription in electronic prescribing.

New Items:

- The links to the Medicare Prescription Drug Benefit Notice of Proposed Rule Making documents were in a recent NCPDP NOW. CMS is looking for comments in many areas. Members are encouraged to send their responses to the comments to the WG12 Co-Chairs for inclusion in an NCPDP response letter.

MC Maintenance and Control

DERFs/ECLs:

- MC Maintenance and Control reviewed one pended and six new DERFs (see WG1, WG2, and WG11 above).
- DERF/ECL review and approval will result in:
 - The release of three new ballots
 - WG1 Telecommunication,
 - WG2 Product Identification and
 - WG11 Prescriber/Pharmacist Interface
 - The release of a re-circulation ballot for
 - WG11 Prescriber/Pharmacist Interface
 - The release of a new publication of the External Code List

New Project Development Forms:

- Reviewed New Project Request forms.
 - Project 000021 “This is a Pending Patent Business Method Process that reduces fraud at the front-end and the back-end of a prescription drug transaction and protects privacy using a smart card and/or biometrics.” This project was pended at the May 2004 meeting and denied at the August meeting.
 - Project 000023 “Café Rx is a working group open to all who are dedicated to removing the barriers to adoption and utilization of E - Prescribing solutions thru collaboration of industry leaders with the goal to improve the quality of patient care as a pathway to comprehensive clinical automation.” This project was approved with modifications and recommended to the Standardization Co-Chairs that it be referred to WG11 Prescriber/Pharmacist Interface and WG12 Education – Legislation and Regulation as a joint project. The Standardization Co-Chairs will make their recommendation to the Board of Trustees.

Task Groups:

- A Task Group update on **HIPAA Regulatory Timelines** was given.

Updates:

- The attendees received daily Work Group recaps.
- An update of MC goal to define data element values was given.

New Items:

- DSMO CR 1001 was reviewed. MC approved WG4 Provider/Member Enrollment’s recommendations.
- A proposal for ballot modifications was provided.