

Work Group 1 Telecommunication

Ballots:

- Ballot WG010032 – DERF 833 and 839. DERF 833 - During the WG1 FAQ task group, it was found that there were insufficient fields to associate the dispensing of a product in one transaction with the injection of that product as a service in another transaction using the associated fields in the claim segment. The situation is when a pharmacy dispenses the product and another entity administers the injection of the product. This is in relation to the Medicare Part D dispensing of the vaccine product and the LTC (long term care) facility does the injection administration. Note: During the DERF discussion it was noted that CMS guidance indicated that the Vaccine and the Administration charge should be billed in the same transaction by one of the two entities involved. The Long Term Care attendees indicated that they were aware of the Medicare Part D requirements but these additional fields could be used for other situations outside of the Medicare D vaccine requirement. DERF 839 - For drugs like Sudafed, that are used in the making of Methamphetamine that are now regulated and dispensed from behind the counter of a store and in a limited quantity. These drugs still do not require a prescription in 49 of 50 states. In 2006 the Federal Combat Methamphetamine Act went into effect. Federal, State and local PSE/EPH point of sale purchase tracking requirements were defined which vary from state to state. In July 2007, NAMSDL (National Alliance for Model State Drug Laws) held a Methamphetamine Strategy conference. The major goal is to establish and coordinate an electronic standard for monitoring and reporting. The task group formed in WG1 Telecommunication, looked at all 50 states current and proposed legislation to determine what changes were legislatively required to support the State and Federal requirements for reporting of regulated non-prescription products and submit the modifications to the Controlled Substance Reporting transaction within the Telecommunication Standard to address those identified requirements. With the changes requested, the current Controlled Substance reporting transactions (C1, C2, C3) can now electronically report on regulated non-prescription products that do not require a prescription but require Federal or State reporting and the current Schedule II prescription transactions that require state reporting. The ballot was valid at 61.97%. Negative With Reason comments were categorized. The ballot will be recirculated with modifications made.

DERFs

(see DERF Resolution at http://www.ncpdp.org/members/members_wg_info.asp?wgid=wgmc):

- DERF 000842 requests "During the JTWG meetings in February, there was a discussion with CMS that was established to provide industry participants an opportunity to address concerns with the draft guidance issued by CMS on how it intended the FIR Standard to be applied by Part D plan sponsors. A need was discussed to allow the facilitator a tool to support its ability to issue a transaction to plans that acknowledges that a beneficiary's accumulations should be passed, but some condition exists that currently prevents the plans and the facilitator from passing valid data for the beneficiary. Upon completion of the effort to resolve the condition, another transaction would be required that identifies to all plans that the issue has been resolved and that the normal flow of data will soon resume. This DERF provides the needed transaction code values to support this need." The DERF was pended due to time constraints.
- DERF 000846 requests "The DERF supports the following two goals: (a.) To create a Universal Claim Form that aligns with NCPDP Telecommunication Standard Version D.0. (b.) To create a claim form to support the state specific requirements for Workers' Compensation / Property and Casualty Claim Submissions." The DERF was approved with modifications.

Old Business:

- **NCPDP SNIP Committee** is working on guidance for implementation of the next HIPAA transactions, and also on a Payer Sheet Template Implementation Guide for version D.0.
- The 2007 Year in Review presentation was given.

Task Group Reports:

- The **Prior Authorization Transfer Task Group** is creating a standard format and code set for transferring prior authorizations between Pharmacy Benefit Managers (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 is working on the implementation guide.
- The **Version 5 Questions Task Group** brought forward questions to discuss.
- The **Coordination of Benefits Task Group** had discussed questions received during this period.
- The **Universal Claim Form (UCF) for Version D.Ø Claims Task Group** provided a report of their work on an updated UCF and a Workers' Compensation UCF which were submitted as a DERF (000846). They received feedback from the work group on questions.
- The **Regulated Non-prescription Product Compliance, Collection, and Reporting Task Group** provided a report of their work which includes planning for an educational webcast on this topic. They will monitor Ballot WG010032 until completion.
- An update was given about the **Financial Information Reporting Task Group** that meets via conference calls to discuss CMS guidance, when needed.
- A new **Payer-to-Payer Task Group** was formed out of the Version 5 FAQ question Forty-One.

Work Group 2 Product Identification

Old Business:

- Updates on NDC and RxNorm were provided.
- WG2 accomplishments in 2007 were reviewed with the attendees.

Task Groups Reports:

- **Billing Unit Standard Marketing Task Group** is working on a White Paper to present to CMS in order to educate CMS, and subsequently OIG, on the BUS. Will invite CMS to the August WG meetings in Baltimore. Kay Morgan and Linda Schock will attend the Medicaid Rebate 101 pre-conference workshop in September 2008. Discussed billing discrepancies between CMS and NCPDP BUS billing units. ASHP and the industry are asking to use RxNorm and not NDCs. A call with ASHP will be scheduled.
- **Structured Product Labeling Task Group** will continue to review the SPL and offer suggestions as it impacts the Billing Unit Standard and the goals of WG2. The task group will spend time reviewing SPL Schema for possible data elements that may be needed and communicate those needs to the FDA. There are currently 3,737 SPL Leaflets available on the National Library of Medicine's Daily Med, compared with 3,610 in February.
- **Standard Exception Review Task Group** is looking at all of the exceptions within the Implementation Guide. They completed review of the exception re-cap and applied changes to the Implementation Guide and FAQs following the February 2008 WG meeting. They reviewed one new product exception, and followed up on the request to FDA for clarification on Overfill issue. The TG drafted a document to explain issues with overfill and effects on the BUS assignment to products as well as on rebates and dispensing volumes. WG2 co- chairs will draft a follow up letter to Randy Levin at FDA with input from the WG 14 co-chairs. The Compendia reached consensus on uniform application of BUS for RhoGAM and Salicept.
- **Change in Existing/New Products Review Task Group** was formed to develop a structured/formalized/consistent process by which issues are reviewed resulting from changes to existing products and the release of new products. There were no new QUIC forms presented at this WG meeting.

New Business:

- At the February 2008 WG meetings a group was formed to provide information/education on billing units to HL7 for their SPL Workgroup that is working on the messaging around HL7's Version 3. It was noted that HL7 will meet this week and

- will be reviewing the placement of the BUS into Version 3 of the SPL. Ross Martin of BearingPoint will attend that discussion.
- Discussion was held regarding the X12N request for a valid NDC as a default to be used on the 835 and placed in their HIR 592. WG2 will report the following to WG45:
 - There is no such thing as a valid, representative NDC.
 - An NDC represents a real, marketed product.
 - Compendia cannot create a unique NDC on their own since the “labeler” code portion of the NDC is assigned by the FDA and the product and package code portions are within the control of the labeler.
 - While NDC numbers for discontinued products should not be reused, they sometimes are so it is not an option to use a discontinued product's NDC. In addition, per the point above, the compendia do not have the authority to do so since the NDC belongs to the labeler.
 - Creating a representative NDC containing alpha character(s) is not a good option since many systems have the NDC field programmed to be only numeric.
 - If a representative NDC were established and if it were assigned to a product in the future, then there would be rebate and other issues associated with its use.
 - A representative NDC using 9999-9999-## or 1111-1111-## could be used but there is potential that other systems and entities may have NDC's in this format programmed in their systems for specific purposes or for testing.
 - Discussion was held regarding products that have the same billing units but varying package sizes. A task group was formed with Tom Bizzaro as the lead to determine the business issues of this problem.

Work Group 3 Standard Identifiers

Old Business:

- An update was given on NPI Readiness
- NCPDP Pharmacy Database Status Report
- A WG3 Year in Review presentation was given

Task Group Updates:

- The **Letters to States/State of States Task Group** provided an update on NPI implementation and discount card legislation. WG3's State of the States Report is available on the NCPDP website: http://www.ncdp.org/members/members_wg_info.asp?wgid=wg03
- The **Pharmacy Label Task Group** is on hiatus at this time, pending a request from NABP regarding current direction and next steps for the task group.
- The **Pharmacy and Combination ID Card Implementation Guide Task Group** provided an overview of the work to date on the NCPDP Pharmacy and Combination ID Card Implementation Guide.

Work Group 7 Manufacturer Rebates

DERFs:

- DERF 000845/ECL 000038 requests “The purpose of this DERF is to request a new value for Field 147-U7 Pharmacy Service Type, named PBM Owned Mail Order Pharmacy Services.” WG7 pended the DERF/ECL.

Task Group Reports:

- The **CMS Roundtable Task Group** has regrouped and will focus their efforts on working with CMS on a pilot project to promote the use of the Rebate Standard by CMS and state entities.
- The **Standards Implementation Survey Task Group** presented a report on the results of the Implementation Survey to date. Additional volunteers are needed to test the survey. The results of the survey will be available at the August 2008 Work Group meeting.
- The **Standards Update Task Group** continues work on revising the Formulary and Plan Flat Files.

- The **Reference Guide Task Group** gave a status report on the new content being developed for inclusion in the Manufacturer Rebate Standard Reference Guide.
- A WG7 Year in Review presentation was given.

New Business:

- WG7 received an overview of the Formulary and Benefit Standard v1.0.
- The 340B Pharmacy Crosswalk discussion was postponed until the August 2008 Work Group meeting due to time constraints.

Work Group 9 Government Programs

Old Business:

- State of the States. The work group reviewed and updated the SOS document (specifically NPI implementation) which will be posted on the website. http://www.ncdpd.org/news_npi-info.asp
- WG9 received an update on Medicaid and Medicare activities.
- A WG9 Year in Review presentation was given

Task Group Reports:

- The **State of the States Outreach Task Group** was disbanded.
- The **Tamper Resistant Prescription Pad (TRPP) Task Group** provided an update on ongoing TRPP education efforts with stakeholders.

New Business:

- WG9 formed a new task group, **Required Information Outreach to States**. This task group will review WG9's SOS document to determine if the requested information is of value to the membership and recommend next steps for outreach to the states.

WG10 Professional Pharmacy Services

Old Business:

- WG10 accomplishments in 2007 were reviewed with the attendees.
- A HITSP update was provided.

Task Group Reports:

- **Structured and Codified Sig Format Task Group** reported that the group submitted a DERF that was approved at the August 2007 JTWG. The ballot was adjudicated in November. The ballot was approved and the initial release of the Structured and Codified Sig Format Implementation Guide Version 1.0 is currently awaiting NCPDP Board of Trustees approval. Version 1.0 was provided to the Sig into SCRIPT TG, who incorporated the updates into a DERF, which was reviewed on the same timeline. In February, 2008, CMS and AHRQ hosted an e-prescribing expert panel to identify actions needed to bring Sig to production. The Sig TG is awaiting updates from AHRQ as to next steps, including the potential for funded pilots.
- **MTM Communications Task Group** has broken out into 3 subtask groups:
 - **Technology and Communication Methods** – Lead by Shelly Spiro
 - **Communication Payer Use** – Lead by Brand Newland
 - **Provider Use Case** – Lead by Stacy Swartz
 The task group has decided on a problem statement and is in the process of reforming to reconcile the subtask groups thoughts and documents.

New Business:

- DSMO Change Request 1069 recommending to NCVHS that CPT guidelines be specifically named as part of the national standard for implementing CPT codes, when used in HIPAA standard transactions was reviewed. This change can be put forward in the upcoming ICD-10 Notice of Proposed Rulemaking. The WG approved the request as stated in the recommendation.

Work Group 11 ePrescribing & Related Transactions

Ballots:

- Recirculation Ballot WG110033 – DERF 821, 824, 825, 827, 828, 829, 831. DERF 821 requests “Based on the HITSP standards harmonization recommendation on the AHIC

Consumer Empowerment Use Case to use the Federal Medication Terminologies (FMT), NCPDP formed the FMT and ECL Analysis Task Group, in Maintenance and Control to analyze the FMT against the currently used codes and vocabularies in the NCPDP standards and other documents to determine the potential implications of any changes. This DERF is the result of the TG efforts. (FMT 1131, Fields for Drug Form)". DERF 000824 requests "This document is being submitted to request the addition of verbiage defining the use of a "representative NDC" within the Medication information of a NEWRX. There are no new fields or values being proposed, merely addition of verbiage explaining usage within the applicable guides. The added verbiage would define the value present in DRU 010-03 when DRU 010-04 is ND (NDC)." DERF 000825 requests "This request is being submitted to request the addition of a "DEA Schedule" within the Medication loop for all transactions communicating a 'medication'. The presence of an indicator identifying the schedule of the medication will help facilitate efforts that are currently under way relative to management of controlled substance prescriptions being communicated electronically using the NCPDP SCRIPT Standard. The DEA Schedule would be populated by the system generating the message, and would utilize the Federal DEA Schedule classification." DERF 000827 requests "The note for DRU-060-01 does not match the conditionality of the element. DRU-060 should be changed to conditional for Refill. Request. P = Pharmacy Requested Refills. This value will appear only in REFREQ messages. Because DRU 060 is not mandatory, a pharmacy may submit a REFREQ without requesting a particular number of refills by omitting DRU 060. If a pharmacy wishes to request a specific number of refills, it should submit "P" and the desired number of refills in field 060-1009-02-6060 Quantity. If the pharmacy wishes to request additional refills without specifying how many, composite data element DRU 060 should be omitted completely. If "P" is used, the number of refills requested must not be zero." DERF 000828 requests "This DERF will clarify the intent of the prescriber for refills when using PRN (take as needed)." DERF 000829 requests "The REQ-010 Message Function Coded field is used in multiple messages with the same external code list even though all codes don't apply to all messages. This DERF will constrain the codes to the appropriate messages. This DERF will also add additional codes needed for the CENSUS message and clarify definitions for the NEWRX and Cancel messages." DERF 000831 requests "The Official Name of the Script Standard on the Implementation Guide is PRESCRIBER/PHARMACIST INTERFACE SCRIPT STANDARD this name no longer is representative of the Standard and it is recommended to be removed or changed. The name should either be "SCRIPT STANDARD" or "Ambulatory Electronic Prescribing Script Standard". The current name could be confusing to those new in the domain, and be overlooked as a standard. When doing this, a pictorial representation of the new transactions (Medication History, Formulary) should be included in Appendix A." The ballot was valid at 75.41% and received 90% approval. There were no new Negative With Reason comments. After the appeal process, the ballot will be sent to the Board of Trustees for approval.

- Ballot WG110034 – DERF 835 and 836. DERF 835 requested enhancements to the DUE composite of the DRU Segment that would enable a physician to include prescribing-time DUR alerts and comments to the pharmacist when communicating a prescription. DERF 836 requested a new Allergy Segment that enables the sender to inform the recipient of all known patient allergies and would be available in NEWRX, Refill Request, Refill Response, Change Request, Change Response, CENSUS, and Medication History Response transactions. DERF 837 requested the addition of a Diagnosis Segment for use in the CENSUS transaction. DERF 838 requested the modification of the CENSUS Transaction to require a PVD Segment for the Facility. The ballot was valid at 62.82%. Negative With Reason comments were categorized. The ballot will be recirculated with modifications made.

DERFs:

- DERF 000843 requests "To provide a dependable base of information for Formulary and Benefit transmissions, this DERF requests that the Formulary Status List be required. Additionally, the Formulary Status List Header provides fields that allow the sender to

specify a default formulary status for non-listed drugs. In some cases, this is all the information that is necessary to describe the formulary. This DERF requests that language be added to allow omission of Formulary Status Detail records when the non-listed formulary policies are used exclusively to convey the drugs' formulary statuses. Finally, this DERF contains minor clarifications and errata." The DERF was reviewed with modifications made.

- DERF 000844 requests "Business case: Our prescriber-side Practice Management System (PMS) client has a number of software versions in the field. These versions have differing eprescribing capabilities (e.g., some accept the RXCHG message, others do not). As software upgrades roll through the field, the capabilities of each site changes. To provide appropriate editing and mapping services in behalf of our clients, we need to know what version/release of the PMS software is running at each site. General request: We are requesting that a data element be established within SCRIPT to allow the transmission of PMS software version/release information from the source PMS to its aggregator, to enable the aggregator to invoke the proper edits and maps in behalf of its clients. We anticipate that this functionality would be of use to both pharmacy and prescriber PMS software vendors and aggregators. Specific request: We see three possible approaches to address this need. (1) establish a new data element specifically intended to carry the source system version/release. (2) establish a new general-purpose data element to facilitate communication between a PMS (pharmacy or physician) and its aggregator. This data element would be analogous to claim data element 464-EX (Intermediary Auth ID). (3) employ a currently grayed-out data element in the UIB segment. In any case, we would expect any destination downstream of the aggregator to gracefully disregard any data present in this field. The DERF was pended for more discussion via a new **Patient Profile Task Group**.

Old Business:

- An industry update was provided on NCVHS Subcommittee on Standards and Security, CMS (eprescribing, including AHRQ/CMS), DEA (eprescribing), and HITSP (Medication Management use case, and Medication Harmonization project).
- The 2007 Year in Review presentation was given.

Task Group Reports:

- The **Prior Authorization Workflow-through-Transactions Task Group** will be looking at action items from the AHRQ/CMS Eprescribing Expert Meeting held in February as well as looking for the industry to build and participate in a Prior Authorization Survey.
- The **Formulary and Benefit Task Group** provided an update on their activities.
- The **RxNorm Task Group** is on hiatus at this time, pending new work items from the AHRQ/CMS Eprescribing Expert Meeting.
- WG11 is assisting the WG14 LTC/EHR TG in mapping the needs of long-term care into eprescribing standards. They are bringing DERFs forward.
- **SCRIPT XML Task Group** previewed the SCRIPT 10.6 ballot (XML sections).
- **RxQuery and Response Task Group** was formed to analyze needs for pharmacists to request additional information about a prescription/patient without a phone call.
- **Compounded Prescriptions Task Group** was formed to revisit the support of multi-ingredient compound prescriptions.
- A new **Patient Profile Task Group** was formed from DERF 000844.

Work Group 12 Education – Legislation and Regulation

Old Business:

- A WG12 Year in Review presentation was given
- Updates were provided on
 - HIPAA and NCVHS activities
 - Tamper Resistant Prescription Pads
 - California Pedigree Law
 - Third Party Behind the Counter Drugs
 - AHIC/HITSP

- NPI Readiness
- HCidea

Task Group Reports:

- The **Joint WG3-WG12 Letters to States/State of States Task Group Task Group** provided a report on NPI implementation and Discount Card legislation.

New Business:

- E-Prescribing Final Rule
- Medicare 2009 Final Call Letter
- MN AUC Companion Guide activity
- Wg12 disbanded as was reformed as the Industry Update Task Group under MC Maintenance and Control

WG14 Long Term Care

Old Business:

- Updates on the American Health Care Association (AHCA) and (NASL) were provided.
- Updates on the Office of the National Coordinator for Health Information Technology ONCHIT and the National Committee for Vital and Health Statistics (NCVHS) were provided.
- An update was given on the regulatory activities of the Drug Enforcement Agency and the NABP
- A CMS/HIPAA update was provided.
- An update on the Rebate Reporting Website was provided.
- The 2007 Year in Review presentation was given.

Task Group Reports:

- The **Return Credit Task Group** – The task group is developing a Return Standard and Implementation Guide based on the SCRIPT and Telecommunication formats.
- The **EHR/HL7 Task Group** –The task group began work on two related use cases associated with the management of open-ended medication orders: Resident census-related order holds (e.g., those that are linked to a resident leaving the facility) and Drug-specific order holds (those driven by a clinical need) In addition the group has kicked off a cooperative effort that will investigate obstacles and approaches for enabling more physicians to directly participate in a long-term care e-prescribing process. Several physicians have joined the group for these discussions.
 - EHR Inter-organization Sub Task Group provided an update on the progress of defining the requirements for certification of EHR software and the elements added for LTC.
- The **Current LTC Billing Issues Task Group** – The task group did not meet during the quarter, but plan to begin work on a recommended workflow process for Best Available Evidence (BAE) and the D.Ø Editorial Guidance.
- The **Consultant Pharmacist Task Group** – The task group has focused on the HL7 EHR Functional Model, Direct Care Functions (Chapter 3) to assure that the LTC needs are being included. They will not meet again until the Direct Care Functions chapter is complete. At that time they will review the final document and comment as needed.
- The **LTC Pharmacy Rebate Reporting Task Group** – The task group did not meet during the quarter.

WG15 Sample Management

Old Business:

- WG15 accomplishments in 2007 were reviewed with the attendees.

Task Group Reports:

- **Physical Samples, Etc. Task Group and Alternative Distribution Task Group** were merged at the February 2007 meeting. The task group has not met awaiting the finalization of the survey coming out of the Sample Medication Codification Identification task group.

- **Outreach Task Group** was charged at the November 2007 WG meeting with developing not only a draft proposal for Sample Communication but also identifying a process and plan for a pilot for samples. This task group is on hold awaiting the finalization of the survey by the Sample Medication Codification Identification task group.
- **Sample Medication Codification Identification Task Group** — This task group has Completed a survey of about 30 drug companies and the result is that primarily NDCs are used to identify samples. The task group was disbanded. Next steps will be to start work on a Samples Reporting Standard.

New Business:

- Discussion was held on steps for a potential pilot on samples. Two phases for the pilot were identified and the critical need for a sponsor noted.

WG16 Property & Casualty/Workers Compensation

Old Business:

- An updates were given on the on the Texas implementation, the mailing of the outreach letter to state WC agencies and the pricing discussions for the new WC-UCF.
- The 2007 Year in Review presentation was given.

Task Group Reports:

- The **Legislative Advocacy Task Group** provided an update on state regulatory and legislative initiatives affecting billing and reimbursement of Workers' compensation claims, noting actions in Arizona, California, Delaware, Maryland, Michigan, Minnesota, New York, Oregon, Texas and West Virginia. The Billing Standards Task Group is working with several states regarding billing initiatives including Minnesota, Texas and California. California doesn't not have a proprietary paper form for use by providers unable to bill electronically and is awaiting the new paper form now under development. Texas reverted to their proprietary form for the interim until the new WC specific form is available.
- The **State Reporting Task Group** continues to maintain the spreadsheet developed to capture the reporting requirements by state and are adding the legislative initiatives regarding billing. Oregon Group 1 testing begins July 1, 2008. The IAIABC draft regulation on state reporting provisions is under development and proposes submission billing, attachment and payment data within ten day of the receipt of data or of payment, denial or refund.
- The **eBill Task Group** reported on the IAIABC Conference in April and their creation of a draft eBill/Bill/Reporting Rules National Model template. Minnesota has set a July 2009 implementation date for eBilling. A review of the batch process in Workers Compensation has been completed and a proposal for a new WC specific Batch Standard was put forth.
- The joint **WG1 WG16 UCF Task Group** reported that UCF/WC-UCF DERF (prototype forms and Implementation Guide) was reviewed in WG1 and approved with modifications WG16 approved the WG1 modifications and made no additional changes.

New Business:

- A new **Education Task Group** was created to develop educational programs for the new WC-UCF and other WC specific issues as needed.

WG17 RFID/Auto-ID

Old Business:

- Updates were given on state and federal developments and regulations related to the use of pedigree and tracking of drugs.
- An update on acquiring the HDMA resource for regulatory activity was provided.
- An update on the California Regulation was provided. The implementation has been delayed until January 2011 with a phase in of the pedigree for manufacturers to occur six months prior to the supply chain implementation.
- An update was provided on the activities of the **Education Task Group** which included:
 - Responses to FDA-2008-N-0120 Request for Comments and FDA-2008-N-0121 Request for Information

- First draft of a glossary of pedigree and related terms
- Proposals for task groups
- 2007 Year in Review was presented.

New Business:

- Based on the recommendations of the Education Task Group, the following task groups were formed:
 - **Regulatory and Tracking Task Group**
 - **Grandfathering Task Group**
 - **Product Identifiers Task Group** (on hold due to loss of leader)
- Proposed name change and scope were reviewed and will be finalized in August.
- An update was provided on GS1 activities.
- A proposal for a Webinar on Pedigree 101 was presented and approved. The Education Task Group will draft the content with a projected completion by July.

WG45 External Standards Assessment, Harmonization and Implementation Guidance

Old Business:

- An update was given on the WEDI SNIP 835 Sub Workgroup and the ongoing review of claim adjustment reason codes and the completion of the 835 White Paper.
- The next X12 meeting will be June 2-5, 2008 in New Orleans, LA.
- An NPI update was provided.
- A progress report from the WG14 Return Credit Task Group was given
- An update on the NCPDP SNIP was provided.
- 2007 Year in Review was presented.

Task Group Reports:

- The **Document Revision Task Group** did not meet during the quarter.
- No questions were received for the **834 FAQ or 835 FAQ Task Groups**.
- The **External Organization Coordination Task Group** had no issues referred during the quarter.
- The **835 Audit Reporting Task Group** presented a reporting guidance paper with two versions based on different handling of audit adjustments that result in zero payment to the provider. The Task Group will review both options and approved the version requiring the creation of a replacement claim.
- The **835 White Paper Task Group** did not meet during the quarter
- The **HIR592 Task Group** provided an update and historical perspective on the issue. Members of WG2 joined for the discussion of possible solutions for the issue. A draft will resolution will be prepared and submitted to the Standardization Co-chairs for approval to submit to X12.

New Business

- There was no new business to report.

MC Maintenance and Control

Ballot Adjudication:

- Will result in:
 - Recirculation of Ballots WG110034 and WG010032 for the May 2008 ballot period.
 - Appeal letters to the negative voters on Ballot WG110033R will be sent. Should there be no appeals, SCRIPT Standard Implementation Guide Version 10.5 will be sent to the NCPDP Board for approval.

DERFs/ECLs:

- MC Maintenance and Control reviewed 5 new DERF/ECLs (see WG1, WG7, WG11, and WG16 above).
 - DERF/ECL review and approval will result in:
 - The May 2008 release of 2 new ballots WG110035 for WG11 ePrescribing & Related Transactions
 - WG010033 for WG1 Telecommunication

Old Business:

- New Project Development Form 30 for Tax Advantage Accounts was approved at the February 2008 MC meeting and a recommendation that a TG be formed in WG1. The Standardization Co-Chairs approved and recommended that it be assigned to WG1. The NCPDP Board agreed with the recommendation made by the Standardization Co-Chairs.
- HITSP, HIPAA and industry updates were provided.
- MC accomplishments in 2007 were shared with the attendees.

Task Group Reports:

- **The Modeling and Methodology (M&M) Task Group** named Galen Mulrooney as a Task Group leader. Several conference calls were held serving to orient and review charter, scope, goals, and previous Road Map documents. The next version of the NCPDP Modeling and Methodology Road Map will be reviewed during the May 29, 2008 conference call.
- A **Values Definition Task Group** update was provided. All values have been defined and added to the ECL. All DERFs are being screened and returned to the submitters if definitions are not provided for values. The task group was disbanded.
- The **Federal Medication Terminologies/ECL Analysis Task Group** has reviewed NCPDP data elements to determine which of them could be associated with which FMT components. DERFs 821, 822 and 823 were submitted at the November 2007 meeting. The DERF for Field 252 will be held and submitted at a later time per input from the Post Adjudication Task Group. For DERF 823 - Field 601-34 no action was taken by the TG awaiting feedback from WG7 regarding the impact on the Manufacturers Rebate Standard and/or a recommendation on the best method of implementing this change. For Field 450-EF it was determined that this DERF could move forward with guidance added to the front matter of the ECL that gives clarification to the link. A new DERF will be submitted for the August 2008 meeting.

New Business:

- The attendees received daily Work Group recaps.
- Review of DSMO Change Request 1069
 - Approved request to recommend to NCVHS that CPT guidelines be specifically named as part of the national standard for implementing CPT codes, which would require their use in HIPAA standard transactions.
- NCPDP 2008 Co-Chair ballot results were announced.
- Recipients of the NCPDP MVP Awards were announced.