August 2018 Work Group Recaps:

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

Work Group 1 Telecommunication

DERFs/ECLs Reviewed:

- DERF 001591 was approved as modified.
- DERF 001594 was withdrawn.
- DERF 001613/ECL 000266 was withdrawn.
- DERF 001614 was approved.
- DERF 001615 was withdrawn.
- DERF 001616 was approved.
- DERF 001617/ECL 000267 was recommended for MC to approve as modified. This is no longer an ECL.
- DERF 001618/ECL 000268 was recommended for MC to approve as modified.
- DERF 001619 was pended.
- DERF 001620/ECL 000269 was recommended for MC to pend.
- DERF 001621/ECL 000270 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.
    - Telecommunication Standard vD.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.
- 02/2018: Possibly Q1 in 2018.
- 05/2018: In HHS Clearance - Sometime in 2018.
- 08/2018: Sometime in 2018.

Task Groups:

- The **Telecommunication FAQ Task Group** reviewed two questions and a proposed modification to the *Telecommunication Standard Version F2 and above Editorial and Best Practices Document*. The modification to the *Telecommunication Standard Version F2 and above Editorial and Best Practices Document* was approved. The updated opioid guidance to the *Telecommunication Version D and Above Questions, Answers and Editorial Updates* document was approved.
    - The **Morphine Equivalent Dosing (MED) Sub-Task Group** updated the General Opioid Limitations guidance for the claim request/response fields and worked closely with WG9 Medicare Part D FAQ Task Group to create a scenarios matrix for specific use cases for the limits/edits associated with the 2019 requirements from CMS.
    - The **FAQ Controlled Substance Guidance Update Sub-Task Group** will create a DERF to modify three reject code descriptions, track certain state level controlled substance legislation and regulations and create letters to states requiring prorated copays on controlled substance incremental (partial) fills. The task group plans to complete the LTC use cases.
- The **Coordination of Benefits Task Group** reviewed and answered three questions. The group also participated in the WG1 Expanded Dollar Fields Task Group. The group developed Telecommunication Standard vF2 tax examples and submitted a DERF and will begin development of transition guidance and educational materials.
- The **Information Reporting Problems Task Group** reviewed the application of negative PLRO in non-EGWP single payer and created examples of LIS and Non-LIS scenarios for review by CMS. The task group continues to review and update the *Overview of the Medicare Part D Prescription Drug Coordination of Benefits (COB) Process* white paper. The task group began the development of a method/process to report to CMS which SPAP/ADAPs are missing from the HPMS module. The task group continued their review of the *NCPDP Best Practices Guide for Managing Med D OHI* based on feedback from the Standardization Committee. The task group continues to gather actual examples of negative PLRO in non-EGWP to provide to CMS.
- The **Post Adjudication Task Group** did not meet this quarter.
- The **Definition of a Valid Prescriber Task Group** reviewed the WG9 Medicare Part D FAQ DERF for Prescriber Specialty DUR Result of Service Code, created a letter outlining open areas of concern with the 01/01/2019 Precluded Provider process and reviewed the *Telecommunication Version D and Above Questions, Answers and Editorial Updates* references to Medicare enrollment requirements. The group will draft applicable updates to the *Telecommunication Version D and Above Questions, Answers and Editorial Updates* document to remove references to Medicare Enrollment and incorporate applicable Precluded Provider guidance and create a DERF for new response fields and an ECL DERF for Additional Message Information Qualifiers (132-UH) that will identify the Exclusion/Preclusion file source and effective date.
- The **Part D Supplemental Payment Reporting Task Group** did not meet this quarter.
- The **Eligibility Verification Enhancements Task Group** did not meet this quarter.
- 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** did not meet this quarter. The task group was disbanded.
- The **Expand Dollar Fields Task Group** submitted a DERF to add a new High Dollar Pricing Request and Response segment which was withdrawn. The task group recommended the increase of all dollar fields in the standards. The group will continue to work on an interim solution for Version D.0 of the Telecommunication Standard.

Other Reportables:

- **DSMO Change Requests:** Received an update on the status of the DSMO Change Request 1201 and 1202.
- **MC Patient ID TG:** Received a presentation on the work of the task group.
- **WG11 X12 270/271 Version 7030 Review TG**: Provided a review of the task group activity and requested members participate in the task group.

New Business:

- The 2018 – 2019 Work Group 1 Scope and Goals were reviewed, modified and approved as modified.

Work Group 2 Product Identification

Old Business:

- Tom Bizzaro of First Data Bank (FDB) provided comments on health policy focusing on the opioid crisis, biosimilar naming, re-branding of Meaningful Use to Promoting Interoperability, and promotion of the participation by the FDA in the Work Group's efforts.
- Tammy Powell of the National Library of Medicine (NLM) provided an update on RxNorm and DailyMed.

Task Groups:

- The **Structured Product Labeling Activities Task Group** did not meet this quarter.
- The **Product Review and Billing Unit Exception Task Group** reviewed issues resulting from changes to existing products or to the release of new products. The task group:
    - Reviewed and submitted to WG2 for adjudication two new QUIC forms (see final adjudication determination by the WG in this report):
        - QUIC #201805 Aimovig™
        - QUIC #201806 Equitas weight based dosing tablet
    - Reviewed QUIC Form #201807 for Enbrel® but did not make a recommendation as more information from the manufacturer is being sought.
    - Reviewed five products via email to determine the billing unit and package size.
    - For April, May, and June 2018, 2,054 and 0 changed billing unit indexing files were generated by FDA based on the files received by the compendia. The compendia group has reconciled the 11 NDCs with discrepancies.
- The **SPL REMS Requirements Task Group** did not meet this quarter.
- The **Dates Associated with Pharmaceutical Products Task Group** announced the completion of the *Dates Associated with Pharmaceutical Products* white paper which is available on the NCPDP website. The task group was disbanded.
- The **Naming Standards for Drugs, Biologics and Biosimilars Task Group** did not meet this quarter.

- The **Application of the Billing Unit Standard Clarification Task Group** completed review and categorization of products which were subjects of QUIC forms in May. The task group completed adding draft language for each category related to the exceptions in preparation for creating a guidance document.
- The **WG2/WG11 Harmonization of Prescribing and Dispensing Units Task Group** did not meet this quarter.

New Business:

- New QUIC Form Review**:**
    - QUIC #201805 Aimovig®
      BU = mL and package size =1 for 70 mg NDC and 2 for 140 mg NDC per 5.2.2 of the Billing Unit Standard
    - QUIC #201806 Equitas weight based dosing tablet
      BU = EA; the quantity is the total number of tablets in the box dispensed (going to the patient)
- Jeffrey Abraham, Vice President of Market Access and Trade of Akili, gave a presentation on Digital Therapeutics.
- The 2018 – 2019 Work Group 2 Scope and Goals were reviewed and approved.

<u>Work Group 7 Manufacturer and Associated Trading Partner Transaction Standards</u>

Task Groups:

- The **Medical Rebate Standard Task Group** discussed adding Service Provider fields to the standard to assist with 340B identification but there were questions on the availability/reliability of the information. The task group has not reached consensus on whether to combine the Medical Rebate Standard with the Manufacturer Rebate Standard as it seems to be an adoption problem. Payers are finding ways to send medical claims to pharmaceutical manufacturers, but the Medical Rebate Standard is not being used.
- The **Medicaid Drug Rebate Program Task Group** continued to work on the development of a white paper, *Medicaid Drug Rebate Program - Challenges Across the Industry.* The white paper will provide the pharmaceutical industry an overview of the Medicaid Drug Rebate Program (MDRP) and information related to disputing invoiced claims, 340B claims submitted for rebate, terminated claims, claim level data necessary to validate summary level invoices and high level recommendations which would benefit the overall MDRP processes.
- The **Manufacturer Rebate Standard Task Group** discussed a request from the May Work Group meeting to identify the technical requirements to move from an older version of the Manufacturer Rebate Standard to the current Manufacturer Rebate Standard v07.02 and the value of implementing the changes. A draft document was shared with the Work Group and work will continue next quarter. The outcomes based contracting discussions did not reveal a need to develop standard files or formats for the information that supports the rebate. The task group requested some known examples of outcome based contracting which could be reviewed to determine what might be missing and/or what the implementation hardships would be based on the way the contracts are structured.
    - **Specialty Pharmacy Data Exchange Sub-Task Group** did not meet this quarter and will be transferred to WG18 Specialty Pharmacy.

New Business:

- The Work Group received a Point of Sale Rebates Overview.
- The 2018 – 2019 Work Group 7 Scope and Goals were approved as modified.

Work Group 9 Government Programs

DERFs Reviewed:

DERF 001597 was approved with modifications.

DERF 001622/~~Emergency~~ ECL 000271 was approved with modifications. The Emergency designation was removed based on input from WG9.

Task Groups:

- The **Prescription Drug Monitoring Program (PDMP) Task Group** reviewed and modified pended DERF 001597 requesting a new PDMP Reporting Standard for the purpose of supplementing B1 real-time reporting to the PDMP facilitator and/or the State PDMP. The task group also reviewed the State PMP Tracking Document and updated PMP information for the following states: Alaska, Iowa, Kansas, Kentucky, Maine, Mississippi, New Jersey, Puerto Rico, Tennessee, Washington and West Virginia.
- The **340B Task Group** did not meet this quarter.
- The **Government Programs Encounter Reporting Standards Task Group** continued to assess fields from the Telecommunication and Post Adjudication Standards for inclusion in the proposed encounter reporting standard. The task group drafted 12 questions for use in surveying State Medicaid agencies about the standardized file format and reject codes for encounter rejections. The task group also developed a timeline and approach for preparing deliverables with smaller groups working on components with the objective of submitting a DERF in November 2018 with a goal to achieve delivery of the new standard to the industry in 2019 at the latest.
- The **Medicaid Subrogation FAQ Task Group** did not meet this quarter.
- The **Medicaid Frequently Asked Questions Task Group** finalized a standardized Medicaid Prescriber Enrollment File for use by states when communicating prescriber enrollment information. The task group discussed the need for additional provider enrollment reject codes to address scenarios where enrollment status would not allow for an override. The task group is also developing a standardized Medicaid Pharmacy Enrollment File. The task group requested input from WG9 regarding whether these files should be formalized as NCPDP standards or as a best practices documents. A straw poll of WG9 indicated a preference for the enrollment files to be formalized as NCPDP standards. The task group also requested input related to a standardized format for communicating formulary data and how to conduct the analysis (i.e., sub task group under Medicaid FAQ or new task group under WG9 or WG11). The work group suggested the task group leads determine if a new task group or sub-task group should be formed for this work.
- The **Hospice Task Group** finalized the material for an educational webinar covering Hospice and Part D processes which was held on July 24, 2018. There were approximately 350 attendees. Next quarter the task group will begin work on a hospice collection notice.
- The **Medicare Standardized Fraud, Waste and Abuse Training Attestation Task Group r**eviewed CMS–4182–F: *Reducing the Burden of the Compliance Program Training Requirements* (§§ 422.503 and 423.504) issued on April 2, 2018. This provision does not eliminate the Parts C and D compliance program and Fraud, Waste and Abuse training for first tier, downstream and related entities (FDRs); however it does change how the plan sponsor can achieve these training requirements for its FDRs. Stakeholders will provide input related to the regulation which will result in modifications to the NCPDP Fraud, Waste and Abuse Training Attestation Form for 2019.
- The **Medicare Prescription Drug Event (PDE) Task Group** reviewed 11 outstanding questions (Q26, Q39, Q40, Q41, Q45, Q48, Q49, Q50, Q51, Q59, Q62), reopened one question (Q62 PDE 870: EA Plan, Copay for Applicable Drugs in Gap, No NPP), finalized six questions which were submitted to CMS (Q39, Q40, Q41, Q45, Q59, Q62) and closed one question (Q26 Edit 671 – Copay to Copay Rule).

- The **Medicare Financial Information Reporting Task Group** reviewed a scenario where in a given benefit year a plan receives an F2 Transaction and then subsequently receives only F1 Transactions which would potentially indicate a change in the order of enrollments for the Part D plans. This kind of change leaves the plan with an active F2 Transaction and causes confusion with CMS auditors and the processors as well. The task group will be addressing this scenario and possibly others to determine what changes in the audit off process are necessary. The task group also reviewed and recommended updates to the Medicare Part D Transaction Facilitator Financial Information Reporting web pages.
- The **OIG Report OEI 05-12-00540 Task Group** is on hiatus.
- The **Medicare Part D FAQ Task Group** worked on operationalizing the call letter guidance related to the new opioid care coordination safety edit requirements for the 2019 contract year. CMS provided some clarification and feedback as requested. The task group reviewed and recommended modifications to DERF 001622/ECL 000271 to support the care coordination edits. The task group also closed two questions in collaboration with WG14 Long Term and Post Acute Care Current Billing Issues Task Group (Q140. Discharge Medications and Q142. Bundled Services by ESRD Facility for Part B Payment).
- The **Medicare Card Project Task Group** monitored the April 1, 2018 transition to the new Medicare Beneficiary Identifier (MBI) and provided input to CMS. The task group also disseminated CMS memos to the task group as needed. The task group will continue to accept and respond to questions throughout the transition period.
- The **Coordination of Benefits Contractor (COBC)/Benefits Coordination & Recovery Center (BCRC) Task Group** reviewed BCRC payer order logic, CMS Plan Communication Guide updates and issues related to the BCRC sending delete records for COB with insurance name "disabled." The task group will develop a list of invalid insurance names for submission to CMS. The task group also reviewed and responded to one FAQ which was approved by WG9.
- The **Standardized Pharmacy Credentialing Task Group** is reviewing an existing data set of information in order to gather feedback and identify the fields that should be included in a standard for pharmacy dispenser data. The task group proposed the following questions to the Work Group:
    - How committed is everyone to adhere to and embrace the proposed standard? What is a meaningful consensus – something as simple as committing to provide data for the presented fields and accepting the fields without requirements for a different question just for the sake of regulations/company policies? Are PBM's and Chains in particular invested in this exercise?
    - How frequent of an 'ask' is enough (outside of an audit)? Is one-year acceptable or should we ensure pharmacies attest to the data more frequently?

  The task group needs input from all stakeholders in order to gain consensus on the data elements to be included in the file.
- The **Medicare Part D Multi-Payer Reconciliation Task Group** developed an initial list of issues including how to communicate change between Part D plans and supplemental payers, problems incurred with multi-payer processing, how to handle financials and PDE reporting on responders, how to handle financials and PDE reporting on non-responders, how to engage supplemental payers for non-responses and timeframe for responses. Next quarter the task group will develop a best practices flow document.

New Business:

- The 2018 – 2019 Work Group 9 Scope and Goals were approved as modified.

Work Group 10 Professional Pharmacy Services

Old Business:

- A **USP Allergy Update** was provided and an informational document from the FDA is available in the August 2018 Work Group Materials download folder on the WG10 Professional Pharmacy Services members' only page of the NCPDP website.

Task Groups:

- The **MTM and Pharmacist Clinical Services Task Group** gave an update on the eCare Plan. DERF 001635/ECL 000274 requesting modification to the definition of the ECL values for 'State License' was reviewed. The task group announced the completion of the *MTM Billing Guidance for Pharmacists' Professional and Patient Care Services* white paper which is available on the NCPDP website.
- The **mL White Paper Task Group** created a draft survey to retail chains to collect feedback on the implementation of (or lack thereof) policies as a result of the *NCPDP Recommendations and Guidance for Standardizing the Dosing Designations on Prescription Container Labels of Oral Liquid Medications* white paper.
- The **Universal Medication Schedule White Paper Task Group** provided an update on the scope of the task group and next steps that will be taken to make revisions to the *Universal Medication Schedule* white paper. The task group has initiated a preliminary review and revisions and is looking for participants.
- The **WG14 Consultant Pharmacist Interoperability Task Group** provided an update to the Work Group regarding the status of the pilot with various vendors for the *Consultant Pharmacist Consult Note*.
- The **WG11 Specialty Requirements for ePrescribing Task Group** announced its transition to WG18 Specialty Pharmacy after August Work Group. The task group is working on developing use cases and flows as well as gathering input from industry stakeholders.

New Business:

- A new **WG10 Electronic Referral Task Group** was formed to identify and/or develop electronic standard(s) for the bi-directional exchange of referral requests for services between a pharmacy or pharmacist and another entity or provider.
- The 2018 – 2019 Work Group 10 Scope and Goals were approved as modified.

Work Group 11 ePrescribing & Related Transactions

DERFs/ECLs Reviewed:

- DERF 001583 was approved with modifications.
- DERF 001599 was approved with modifications.
- DERF 001601 was approved with no modifications.
- DERF 001603 was approved with modifications.
- DERF 001623 was approved with no modifications.
- DERF 001624 was pended to the task group for additional work.
- DERF 001625/ECL 000272 was pended to the task group for additional work.
- DERF 001626 was approved with modifications with four in opposition.
- DERF 001627 was approved with no modifications.
- DERF 001628 was pended to the task group for additional work.
- DERF 001629 was approved with no modifications.

- DERF 001630 was approved with no modifications.
- DERF 001631 was approved with no modifications.
- DERF 001632/ECL 000273 was approved with no modifications.
- DERF 001633 was approved with no modifications.

Old Business:

- The following update on the next version of the SCRIPT Standard regulation was provided:
    - A webinar will be held on September 18, 2018 entitled, "What is XML and How is it Used in ePrescribing."
    - The November Educational Summit will be focused on the NCPDP SCRIPT Standard version 2017071.
    - NCPDP is now the owner of the former NIST eRX texting and certification tool for both the NCPDP SCRIPT Standard version 10.6 and the NCPDP SCRIPT Standard version 2017071.
- An update on Electronic Prescribing of Controlled Substance (EPCS) prescriptions was provided.

Task Groups:

- The **Dispensed Medication Reporting Task Group** created a timeline for completion of the new reporting message and continued working on the layout and implementation guide changes for a new Dispensed Medication message in SCRIPT.
- The **ePrescribing Regulatory Task Group** continued discussion on the DEA's response to NCPDP's letter regarding RxRenewal and received approval on updates to the *SCRIPT Implementation Recommendations* document.
- The **Formulary and Benefit Task Group** brought forth DERFs 001583, 001599 and 001623 and received approval on updates to the *Formulary and Benefit Implementation Recommendations* document. The task group presented a timeline for requesting the next version of the Formulary and Benefit Standard to be adopted by CMS.
- The **Harmonization of Prescribing and Dispensing Units Task Group** did not meet this quarter. Reminder: The sunset of several QuantityUnitOfMeasure code values will take place in September 2019. A copy of the code list to be sunset is available in the August 2018 Work Group Materials download folder on the WG11 ePrescribing and Related Transaction members' only page of the NCPDP website.
- The **Implementation of Structured Sig Task Group** did not meet this quarter.
    - The **Structured And Codified Sig Format Implementation Guide Analysis Sub-Task Group** did not meet this quarter.
- The **NCPDP/HL7 Pharmacist Functional Profile Task Group** is creating guidance on the use of the *HL7 EHR-S Functional Profile: Meaningful Use, Release 1 - US Realm (MU EHR-S FP)* for the pharmacy industry.
- The **Prior Authorization Workflow to Transactions Task Group** reviewed a proposal and workflow to leverage ePA transaction set to facilitate the handling of delegation of electronic prior authorization to a trading partner and received approval on updates to the *SCRIPT Implementation Recommendations* document.
- The **REMS Workflow to Transactions Task Group** brought forth DERFs 001624 and 001625/ECL 000273.
- The **WG11/WG14 RxFill Task Group** began review of several use cases for possible modifications to the RxFill transaction.
- The **SCRIPT Implementation Recommendations Task Group** brought forth DERFs 001601, 001626, 001627, 001628, 001629, 001630, 001631 and 001632/ECL 000274 and received approval on updates to the *SCRIPT Implementation Recommendations* document.

- The **Specialty Requirements for ePrescribing Task Group** continued looking into the creation of an intake form. The task group will be moved under WG18 Specialty Pharmacy.
- The **WG14 LTPAC ePrescribing Task Group** brought forth DERF 001633 and received approval on updates to the *SCRIPT Implementation Recommendations* document.
- The **X12 270/271 version 7030 Review Task Group** began review of the X12 270/271 TR3.
- The **XML Task Group** reviewed all submitted DERFs and provided recommendations and discussed a reorganization of the current medication elements and making the product identification mandatory.

New Business:

- The 2018 – 2019 Work Group 11 Scope and Goals were reviewed and approved.

WG14 Long Term and Post Acute Care (LTPAC)

Old Business:

- An update was provided on the final rule for *Inpatient Medicare Program; Hospital Inpatient Prospective Payment Systems for Acute Care Hospitals and the Long-Term Care Hospital Prospective Payment System and Proposed Policy Changes and Fiscal Year 2019 Rates; Proposed Quality Reporting Requirements for Specific Providers; Proposed Medicare and Medicaid Electronic Health Record (EHR) Incentive Programs (Promoting Interoperability Programs) Requirements for Eligible Hospitals, Critical Access Hospitals, and Eligible Professionals; Medicare Cost Reporting Requirements; and Physician Certification and Recertification of Claims*.
- An update was provided on the IMPACT ACT.

Task Groups:

- The **LTPAC Current Billing Issues Task Group** provided updates on their activities throughout the quarter which includes:
    - Reviewed DERF 001618/ECL 000268 - New Submission Clarification Code to override multiple concurrent orders of the same drug but with different directions.
    - Discussed Post Consumption billing issue where an NDC change occurs mid-cycle.
- The **Consultant Pharmacist Interoperability Task Group** did not meet this quarter but provided an update regarding the efforts underway to pilot the *C-CDA Consult Note Guidance Document*. Efforts continue to organize a pilot that incorporates the task group's recommendations. The pilot will include a LTC EHR participant, a LTC physician practitioner EHR participant and a consultant pharmacist software participant. Currently, two consultant pharmacist software packages, two LTC facility EHR systems, and one LTC practitioner EHR system have expressed an interest. All of these companies have development pipelines that are already at capacity therefore, development efforts specific to the Consultant Pharmacist Consult Note pilot are likely a few months out.
- The **Long Term and Post Acute Care ePrescribing Task Group** brought forth DERF 001633 as well as the following guidance to be added to the *SCRIPT Implementation Recommendations* document:
    - Number of Refills
    - Quantity Sufficient in Resupply
    - LTC Compound
- The **WG11/WG14 RxFill Task Group** is looking at RxFill use cases including partially dispensed and profiled medication.

New Business:

- The 2018 – 2019 Work Group 14 Scope and Goals were reviewed and approved.

- A new joint **WG14/WG10 Standardized Medication Profile Task Group** was formed to make recommendations on the data to be included on a standardized medication profile.

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 Arizona, Colorado, Indiana, Hawaii, Massachusetts and Pennsylvania.
- The **Billing and State Reporting Task Group** provided an update on New Jersey and Virginia eBilling rules.
- 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.

New Business:

- The 2018 – 2019 Work Group 16 Scope and Goals were reviewed and approved.

Work Group 18 Specialty Pharmacy

New Business:

- A recap of the Specialty Pharmacy Stakeholder Action Group (SAG) meetings was provided.
- Specialty process flows were reviewed and areas of opportunity for the Work Group were identified.
- A summary of NCPDP related Specialty activity was provided.
- The 2018 – 2019 Work Group 18 Scope and Goals were reviewed and approved as modified.
- A review of the NCPDP Collaborative Workspace and NCPDP.org website was provided.

Task Groups:

- The **WG7 Specialty Pharmacy Data Exchange Sub-Task Group** will move out of WG7 and become a task group under WG18.
- The **WG11 Specialty Requirements for ePrescribing Task Group** will move out of WG11 and become a task group under WG18.
- The **Stakeholder Outreach and Education Task Group** was created to provide outreach to Specialty Pharmacy stakeholders and develop and execute education opportunities.
- The **Benefit Coverage Identification Task Group** was created to address the areas of opportunity related to determining if coverage is through the medical or pharmacy benefit.

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.

Task Groups:

- The **Document Revision Task Group** gave an update on the timeline of action for impending review and intent to create a new sub-task group under Document Revisions to identify updates needed to documents in preparation for the transition to the next HIPAA named version. The task group reviewed and approved the updated *NCPDP CARC Mapping* document. The task group reviewed and approved the updated *Version D.0 Claim to X12 835 Examples* document.

- The **Pharmacy and/or Combination ID Card Task Group** did not meet this quarter.
- The **X12 7030 834/835 TR3 Review Task Group** did not meet this quarter.
- The **834/835 FAQ Task Group** reviewed and approved a new FAQ within the X12 834 & 835 FAQ document concerning Network Reimbursement ID (545-2F).
- The **DSMO Task Group** received no DSMO requests for review.
- The **DIR 835 Reporting Task Group** completed their work in creating lump sum (PLB) examples and is currently in the process of discussion surrounding lump sum (PLB) claim level identifiers. The task group changed their goal to align with the scope of their current work on creating the DIR 835 Reporting Recommendations document.

New Business:

- The 2018 – 2019 Work Group 45 Scope and Goals were reviewed and approved as modified.

MC Maintenance and Control

DERFs/ECLs Reviewed: 22 new and 8 pended DERFs/ECLs were reviewed (see WG1, WG9, and WG11).

- DERF 001583 was approved with no further modifications.
- DERF 001591 was approved with no further modifications.
- DERF 001594 was withdrawn by the submitter.
- DERF 001597 was approved with no further modifications.
- DERF 001599 was approved with no further modifications.
- DERF 001601 was approved.
- DERF 001603 was approved with no further modifications.
- DERF 001609/ECL 000264 was approved with modifications.
- DERF 001610 was approved with modifications.
- DERF 001613/ECL 000266 was withdrawn by the submitter.
- DERF 001614 was approved.
- DERF 001615 was withdrawn by the submitter.
- DERF 001616 was approved with modifications.
- DERF 001617/~~ECL 000267~~ was approved with no further modifications. This is no longer an ECL DERF.
- DERF 001618/ECL 000268 was approved with no further modifications.
- DERF 001619 was pended.
- DERF 001620/ECL 000269 was pended.
- DERF 001621/ECL 000270 was approved with no further modifications.
- DERF 001622/~~Emergency~~ ECL 000271 was approved with no further modifications. The Emergency designation was removed in WG9.
- DERF 001623 was approved.
- DERF 001624 was pended.
- DERF 001625/ECL 000272 was pended.
- DERF 001626 was approved with no further modifications.
- DERF 001627 was approved.
- DERF 001628 was pended.
- DERF 001629 was approved.
- DERF 001630 was approved.
- DERF 001631 was approved.
- DERF 001632/ECL 000273 was approved.
- DERF 001633 was approved.

- DERF 001634 was approved.
- DERF 001635/ECL 000274 was approved.

Old Business:

- Received updates on:
  - Board of Trustees
  - Strategic National Implementation Process (SNIP) Committee
  - DSMO Change Request System (CRS) Requests No. 1201 and 1202
  - Project Development Form 000047

Task Groups:

- The **Education/Legislation and Regulations Task Group** did not meet this quarter but provided an update that the Interoperability Standards Advisory (ISA) has just been released which will require input from NCPDP to ensure NCPDP standards are named.
- The **Real Time Prescription Benefit Standard Task Group** reconfirmed the data element mapping for the EDI layout. A small group is working on the XML mapping. The task group established the February 2019 ballot as a target date for the initial version of the standard.
- The **API Task Group** has focused on an update of the *NCPDP Connectivity Operating Rules*.
- The **Emergency Preparedness Task Group** completed the NCPDP Emergency Preparedness Information v1.5 which was published in July 2018.
- The **X12 TR3 Comment Consolidation Task Group** did not meet this quarter.
- The **ECL Task Group** has been identifying and discussing the implementation and maintenance needs for executing the proposal to create reject code categories for Telecommunication Standard reject code values as an enhancement to the web-enabled ECL.
- The **Specialty Task Group** received regular updates from task groups with activity which either specifically targets specialty workflows or work that may impact/benefit specialty stakeholders. The task group reviewed website activity and monitored industry educational activity as identified/reported by task group members. The task group was disbanded because of the creation of WG18 Specialty Pharmacy.
- The **Gender Transition Task Group** reviewed claims to identify edits related to gender mismatch and determine how pharmacies are reconciling claims denied with gender related reject codes. The task group reviewed reject codes from claims provided by payers and "name" structures provided by an EHR vendor.
- The **Patient Identification Task Group** updated pended DERF 001609/ECL000264 (new ECL value for Patient ID Qualifier (331-CX)) and DERF 001610 (changes to the Telecommunication, Prescription Transfer and Batch Subrogation Standards to support the communication of universal patient identifiers (UPIs). The task group created DERF 001634 to add NCPDPUPI to SCRIPT and Specialty Standards with an annotation. The task group also created a FAQ document to answer questions from the previous work group meeting.

New Business:

- The attendees received recaps of each Work Group's activities.
- New Project Development Form 000048 was pended.
- New Project Development Form 000049 was withdrawn.
- The 2018 – 2019 MC Work Group Scope and Goals were reviewed and approved as modified.
- The **Harmonization Formation Task Group** was formed to define the next steps and process for improving harmonization across NCPDP's standards.
- Following a presentation on Digital Therapeutics by Jeff Abraham, Vice President of Market Access and Trade, Akili, the **Digital Therapeutics Task Group** was formed to explore prescribing, dispensing and billing digital therapy within pharmacy using NCPDP standards.