DOCUMENTATION FOR MAY 2017
JOINT TECHNICAL WORK GROUP MEETINGS

For a listing of meetings, dates, times and agendas, please visit the NCPDP web site at http://www.ncpdp.org/Events/Work-Group-Meeting.

To help prepare for the work group meetings, documentation is available on the NCPDP web site. The agendas link is above. The individual work group pages of working documents are below. Review of the documentation prior to the meeting will provide helpful background.

Please make sure you bring copies with you, as copies will not be provided. Some documents are still being developed and may not yet be available on the specified page. Please check back before work group meetings.

DERFs and New Project Development Forms:
Any Data Element Request Forms (DERFs) and New Project Development Forms submitted for review at the Joint Technical Work Group Meetings, scheduled for May 7-8, 2017 in Scottsdale, AZ will be available on the website beginning April 23, 2017. To view and download the DERFs, log in to the website as a member, go to Work Group Lookup, select MC Maintenance and Control page and scroll down for the DERFs. For access to the information either download the ZIP file containing all the DERFs and New Project Development Forms, or click on each item and download a copy. If you have any questions or need clarification on a DERF, please contact the Work Group Co-Chairs or the individual identified in the "submitter" section of the DERF.

Note the following DERFs are External Code List (ECL) requests and will be discussed in the Work Group identified and voted on in MC Maintenance and Control.

DERF 001501/ECL 000222
DERF 001502/ECL 000223
DERF 001503/ECL 000224
DERF 001504/Emergency ECL 000225
DERF 001505/ECL 000226
DERF 001506/ECL 000227
DERF 001508/ECL 000228

Please review the DERF/External Code List Process at http://www.ncpdp.org/NCPDP/media/pdf/Flow-For-DERF-website.pdf. If you are unable to attend the work group meeting, but have substantive comments on the DERF/ECL, please send those comments to the assigned Work Group Co-Chairs and Liaison.

The final review of all DERFs is held in MC Maintenance and Control where modifications may be made.

New DERF/ECL	Request	Assigned WG
001500	The purpose of this DERF is to add a new qualifier to the Patient ID Qualifier (331-CX) and to add an additional situation to the Patient ID (332-CY) field in the Telecommunication Standard. Background: NCPDP has partnered with an outside company to enumerate the population based off of multiple sources of information such as healthcare records,	WG1

	credit card records, etc. The purpose of the DERF is to create an additional qualifier value for field 331-CX and to add an additional situation to field 332-CY to communicate and openly share within the Telecommunication Standard the NCPDP Universal Patient Identifier (UPI). This would allow the unrestricted distribution of the UPI from participating pharmacies to any payer/processor. The intent is to enable access of a common patient identifier across multiple healthcare systems and ultimately create alignment of patient records to increase the quality and continuity of care. The conceptual design is the integration of the NCPDP Universal Patient Identifier (UPI) into the pharmacy patient's data within the practice management system. Through various probabilistic and deterministic methods, the UPI would be assigned to the representative pharmacy patient profile. As the patient profile is selected within the pharmacy workflow, the UPI Patient ID Qualifier would auto-populate in field and 331-CX and the actual value assigned from the previous integration would auto-populate in field 332-CY.	
001501/ ECL 000222	This ECL DERF is intended to sunset Submission Clarification Code 99 - Other as duplicative of SCC 2 - Other Override and add a value limitation to value 2 of "To be used when authorized by the payer in business cases not currently addressed by other SCC values." The SCC value of 2 should not be used when there is a more specific or more appropriate SCC value. Research into the current use of SCC = 2 indicated it is typically used when directed by payer help desk or a plan's pharmacy manual in the cases where an existing SCC value is not appropriate. The value limitation is being requested to limit this SCC value to situations where a payer has directed its use.	WG1
001502/ ECL 000223	This ECL DERF requests to update the value limitations on values 16-22 of the DUR/PPS Level of Effort (474-8E). In August 2016, DERF 001358 was approved to add values 16-22 to DUR/PPS Level of Effort. These new values are for compound use only and relate to level of complexity. Effective with Version EB, a new field Level of Complexity will be available to be used instead of the Level of Effort field to convey this information. The descriptions for the values of the new Level of Complexity field match the descriptions for values 16-22 of the DUR/PPS Level of Effort field. A recent review of the ECL revealed the value limitation that was initially added to values 16-22 could be improved by directing the reader to the new Level of Complexity field.	WG1
001503/ ECL 000224	This DERF is requesting a new reject code be added to communicate that a prescription claim has been submitted for a day supply that is less than the plan covered amount. For example, a prescription claim is submitted for a 30 day supply but the plan only covers a 90 day supply per fill. Business Case: Currently, there is no reject code to indicate that a prescription is not covered due to not meeting the plan required minimum day supply (i.e. 90 days). Reject Code 19- Missing/Invalid Days Supply, and Reject Code 76- Plan Limitations Exceeded, are both currently being used to reject these claims which results in confusion to pharmacies. This new reject code will allow pharmacies to identify that the claim is submitted for a day supply quantity that is less than what the plan covers, giving them the opportunity to contact the prescriber if needed and resubmit the claim for the minimum day supply.	WG1
001504/ Emerg. ECL 000225	Since 2011, multiple regulations have been implemented that require that providers seeing Medicaid members be enrolled with the State Medicaid FFS (Fee-for-Service) program. Prior to the Medicaid Managed Care Oversight Rule of 2016 and the 21st Century Cures Act, these requirements applied only to FFS Medicaid claims, unless the State Medicaid agency extended	WG9 (of interest to WG1)

	them to their MCO (Managed Care Organizations) contracts. Regulations requiring prescribers to be enrolled with the FFS program may also be referred to as ORP (Ordering, Referring, Providing) prescriber regulations. Depending on the State Medicaid program, these requirements may apply to both pharmacies and prescribers, or only one type of provider. Effective 1/1/2018, Medicaid claims must ensure that both the prescriber and pharmacy are valid and enrolled with the State Medicaid program for whose member they are providing services. Currently, third party payers are using various reject codes (e.g., 25- M/I Prescriber ID, 50 - Non-matched Pharmacy ID) to communicate that a prescriber or pharmacy is not currently enrolled, often without clear and concise messaging being returned in the 526-FQ field (Additional Message Information), which results in potential communication discrepancies with the patient and/or prescriber. This Emergency ECL DERF requests: 1. The creation of two new Reject Codes to communicate that a prescriber or pharmacy is not enrolled with the State Medicaid program 2. Two new Submission Clarification Codes - subject to Trading Partner Agreement - to override rejects caused by potential timing issues with the publication of the most current enrollment file, and 3. Two new Approved Message Codes to flag any claims for retrospective review where an override has been entered	
001505/ ECL 000226	This DERF request is to modify a data element in the External Code List (ECL). The data element is named Reconciliation Status Code (Field Number 602-11). Currently the field contains 3 values (P, A, and R) with associated descriptions. The request is to retain the existing three code values of P, A, and R and revise the associated descriptions for these three codes. In addition, the request includes adding two new codes (N and C) with associated descriptions.	WG7
001506/ ECL 000227	This DERF request is to modify a data element in the External Code List (ECL). The data element is named Invoice Type 1 (and also includes Invoice Type 2 through 6) (Field Numbers 170-WB, 171-WC, 172-WD, 173-WF, 174-WG, 175-WH). Currently the field contains 23 values with associated descriptions. The request is to provide revisions to existing codes. In addition, 8 new codes and descriptions are being proposed.	WG7
001507	This DERF request is to modify a data element in the External Code List (ECL). The Data Element is named Reconciliation Reason Code (Field Number 602-10). Currently the field contains many values with associated descriptions and definitions. The request is to revise the full set of codes, descriptions, and definitions. In nearly all cases, the codes are being reassigned with description and definition edits. In addition, many new codes, descriptions, and definitions are being added.	WG7
001508/ ECL 000228	In the event that a payer is asked to cover drugs for the transition of a member from genders (male to female or female to male), there are prescription drugs that may be prescribed and covered by the health plan during the transition phase of the gender change. Proposed gender codes would be G1 for males to female and G2 for female to male. U would be used for unknown, M- males, and F-females. The new gender codes would allow payers to place limits on drugs based on these specific gender codes and they would be an optional use.	WG1 (of interest to WG11)
001509	The purpose of this DERF is to add a new Patient Identification value to the SCRIPT standard. Background: NCPDP has partnered with an outside company to enumerate the population based off of multiple sources of information such as healthcare records, credit card records, etc. The purpose of the DERF is to create a new patient identifier to be added to Patient Identification in the Patient Segment in	WG11

	order to communicate and openly share the NCPDP Universal Patient Identifier (UPI). This would allow the unrestricted distribution of the UPI from participating prescribers to any pharmacies or payer/processor. The intent is to enable access of a common patient identifier across multiple healthcare systems and ultimately create alignment of patient records to increase the quality and continuity of care. The conceptual design is the integration of the NCPDP Universal Patient Identifier (UPI) into the pharmacy patient's data within the practice management system. Schema changes: Add new identifier value to all occurrences of PatientIdentification. Annotation: Used to share and openly communicate the NCPDP Universal Patient ID (UPI) when available.	
001510	Purpose of this DERF is to remove all references to the time zone element wherever it is used throughout the standard since all date and time elements are transmitted using UTC. In addition to removing references to the TimeZone element we need to sunset TimeZoneDifferenceQuantity and TimeZoneIdentifier elements found in the Data Dictionary and ECL.	WG11
001511	In November 2016 DERF 1412 created companion fields for Order Group in the Telecommunication Standard. The values for OrderGroupReason were used for one of the new Telecom fields. This DERF is requesting the modification of OrderGroupReason value IVTherapy to InjectableTherapy.	WG11
001512	The WG11 SCRIPT Managed Updates Task Group has reviewed the values in the ECL and request codes be made more human readable. Reasoning: The current recommendation for the XML schema is to make values be human readable. The task group reviewed the values published as of January 2017 and request modifications to several of the codified values. Schema, Data Dictionary and ECL changes only for SCRIPT, Specialized and Benefit Integration.	WG11
001513	The WG11 SCRIPT Managed Updates Task Group has reviewed the SCRIPT fields in the ECL and would like to request that fields in SCRIPT using Boolean values be removed from the ECL. In addition, references to the ECL for these fields in the Data Dictionary should be removed. Reasoning: Boolean values are T/F, and the Task Group felt these were not true ECL values. Note: The names, definitions, and formats of these fields are not changing. Schema update: Remove Boolean from ecl.xsd. Update all associated fields to point to xsd:boolean.	WG11
001514	Update the Data Dictionary and External Code List (ECL) to include Benefit Integration. It currently just shows SCRIPT and Specialized. For TransactionErrorCode change from "S,Q" to "S,Q,I".	WG11
001515	Currently in all Medications there is an element called PriorAuthorization which has an annotation of the status of the prescriptions' prior authorization as know by the sender and has no defined data type. <xsd:element name="PriorAuthorization" minOccurs="0" maxOccurs="unbounded"> <xsd:annotation> <xsd:documentation>The status of the prescription's prior authorization as known by the sender.</xsd:documentation> </xsd:annotation> </xsd:element> In the data dictionary, this element is defined as "Identifies the Prior Authorization" and has a field length of x(35). This DERF is requesting the	WG11

	schema be updated to include a datatype of an1..35 and modify the annotation to match the definition as shown below for all medications. This will allow the prior authorization number to be communicated if known. <xsd:element name="PriorAuthorization" type="an1..35" minOccurs="0" maxOccurs="unbounded"> <xsd:annotation> <xsd:documentation>Identifies the Prior Authorization..</xsd:documentation> </xsd:annotation> </xsd:element>	
001516	This DERF is requesting a modification to the schema for DoseAdministration as well as the sunsetting of the element DoseCalculationClarifyingFreeText. In the current schema DoseClarifyingFreeText can only be used in conjunction with DoseAmount. It should be able to be used with any of the Dose elements (Dose, DoseCalculation and DoseAmount). The annotation for DoseAdministration will also be modified.	WG11
001517	The WG11 SCRIPT Managed Updates Task Group has reviewed the SCRIPT fields in the ECL and would like to request the following fields be removed from the ECL. In addition, references to the ECL for these fields in the Data Dictionary should be removed. Reasoning: Upon review of the ECL, the Task Group felt the values for these fields were not true codified lists. Some fields will only ever be populated with one value, while others would be populated with one value or left blank, depending on the situation. Note: The names, definitions, and formats of these fields are not changing.	WG11
001518	Background: In February 2017, section 14 of the SCRIPT Implementation Recommendations Document was updated to include additional information on the appropriate use of product concept qualifiers and the expected timeline to sunset unacceptable quantity qualifiers. This DERF is requesting to replace the existing section 8.1.3.5 of the SCRIPT Implementation Guide with Section 14 of the Implementations Recommendations Document to ensure alignment between the two documents. See additional documentation below.	WG11
001519	The Data Dictionary and External Code List have the fields Race and Ethnicity as used in the Specialized Standards only. These two fields are also included in SCRIPT. They are not used in Benefit Integration. This DERF requests the addition of “S” for SCRIPT Standard be added to Race and Ethnicity in both the Data Dictionary and ECL. Please change the link to: https://phinvads.cdc.gov/. The website is currently down for extended maintenance, but has instructions on how to request a file.	WG11
001520	In an effort to clean up the xml schema for SCRIPT an element “DiagnosisGeneral” was left in SCRIPT message. At some point in time this element was replaced with primary and secondary diagnosis in the medication elements. This DERF requests the removal of DiagnosisGeneral from the schema. It is not used in all messages except the SCRIPTRequest where it is optional. SCIRPTRequest is the master request message and is not a message that is exchanged. Please note: this element is still used in Specialized. The usage for this element is as follows: CancelRx/DiagnosisGeneral – not used DrugAdministration/DiagnosisGeneral – not used NewRx/DiagnosisGeneral – not used NewRxRequest/DiagnosisGeneral – not used Recertification/DiagnosisGeneral – not used Resupply/DiagnosisGeneral – not used RxChangeRequest/DiagnosisGeneral – not used	WG11

	RxFill/DiagnosisGeneral – not used RxHistoryRequest/DiagnosisGeneral – not used RxRenewalRequest/DiagnosisGeneral – not used RxTransferConfirm/DiagnosisGeneral – not used RxTransferRequest/DiagnosisGeneral – not used SCRIPTRequest/DiagnosisGeneral - optional Note: This is a schema change only with pictures changes in the SCRIPT Implementation Guide.	
001521	The purpose of this DERF is to create a new FillStatus ReasonCode value "Biologics substitution" for use in the RxFill for Biologics. Regulations currently exist in 27 states, with more pending, that requires a pharmacist to communicate with the physician if a substitution was made at the pharmacy for a biologic or biosimilar prescription. Currently, there is no guidance on how to electronically communicate the prescribed versus dispensed medication for this substitution requirement.	WG11
001522	Increased distribution of Naloxone results in fewer opioid overdose deaths, without any corresponding increase in opioid misuse. Co-prescribing Naloxone with opioids in patients with chronic pain has been associated with sustained and significant decreases in opioid-related emergency department visits. The Centers For Disease Control and Prevention (CDC) recommends co-prescription of Naloxone for all patients on higher doses of opioids, to patients with substance use disorder diagnoses, and patients taking opioids with benzodiazepines. The FDA has added black box warnings to all opioid and all benzodiazepine drug labels, due to the dramatically higher incidence of fatal respiratory depression seen when these drugs are used together. To facilitate co-prescribing and/or co-dispensing of Naloxone to patients receiving opioids, it is requested that NCPDP add a value to the Patient Codified Notes element that says: "Patient is taking an opioid--please provide Naloxone and counsel on its use."	WG11
001523	Increase the size of Product Reference Qualifier (916-B7), Product Reference Qualifier – Alternative (918-B9), Product Reference Qualifier-Source (920-CT) and Product Reference Qualifier (922-CV) from 3 to 4 bytes. In addition modify the code values of BPK to BPCK and GPK to GPCK. This allows for alignment with modifications being made for SCRIPT and Specialized.	WG11
Projects	**Request**	**Assigned WG**
000044	Dispensed Medication Reporting Standard - Develop a national standard for the reporting of dispensed medications to third parties by providers.	MC
000045	Enhancing Standards for Patient Equality - Improve NCPDP standards to ensure they support interoperability, improve patient care, and help foster a welcoming healthcare environment for transgender and LGB (lesbian, gay, and bisexual) people	MC

Of Special Note:

CMS Medicare Part D and General Medicaid Discussion

The CMS Medicare Part D and General Medicaid Discussion is tentatively scheduled for Monday, May 8, 2017 from 7:30 a.m. to 8:00 a.m.

Frequently Asked Questions (FAQ) Documents

Multiple task groups develop Frequently Asked Questions documents for Work Group review and publication. These FAQs should be reviewed during task group calls and prior to Work Group meetings as discussion time is limited.

Ballot Responses

The results of the ballots will be reviewed as follows:

Ballot WG010074, WG010075, WG010076 – WG1 Telecommunication

Ballot WG020009 – WG2 Product Identification
Ballot WG090009 – WG9 Government Programs
Ballot WG110072, WG110073, WG110074, WG110075 – WG11 ePrescribing & Related Transactions

The ballot results will be posted to the appropriate Work Group web pages prior to the Work Group meetings.

SPECIFIC WORK GROUP DISCUSSION ITEMS:
Documents for discussion during specific Work Groups will also be available to members on the NCPDP web site, on their respective work group pages. If you are interested in (or think you may attend) a work group(s), go to the specific work group page and download or print any documentation for May 7-8, 2017 meetings. **Please make sure you download/bring copies with you, as copies will not be provided.**

The detailed work group documentation is accessible from the Member Portal page http://www.ncpdp.org/members/member-info.aspx. Select the Work Group from the dropdown at the left side of the screen.

On each Work Group page you will see the May 2017 Meeting Materials with a zip file. Download the zip file.

Previous meeting minutes are also available on each page. **Please note you may need to check work group website pages just before work group meetings, as recent work is being posted in the zip files, as well as the ballot results**.

WG1 Telecommunication

Work Group 1 Telecommunication develops and maintains standards and guidelines to accommodate the collection, transmission, and processing of electronic pharmacy claim information, i.e. administering and certifying eligibility, prior authorization, and prescribing drug benefits for traditional, managed care, and government programs; billing; payment or denial of compensation with explanations, and concurrent drug use review.

During the May Work Group meetings, WG1 will hear updates from the following task groups:

- Telecommunication FAQ Task Group
- Coordination of Benefits (COB) Task Group
- Information Reporting Problems Task Group
- Post Adjudication Task Group
- Definition of a Valid Prescriber Task Group
- Part D Supplemental Payment Reporting Task Group
- Eligibility Verification Enhancements Task Group
- Benefit Integration Task Group
- Standardized Subrogation Task Group
- Compound Task Group
- Usage of Submission Clarification Code Task Group
- Upstream Reporting of Copay Assistance Task Group

WG1 will also:

- Review Ballot WG010074, WG010075, WG010076 results and comments
- Discuss new DERFs
- Discuss questions and answers from various task groups for inclusion in the Version D Editorial document and/or Telecommunication Implementation Guide
- Discuss action items from any task group

Documents for discussion that are on the WG1 page include:

- 201705.WG1.zip containing:

- Agenda
- Task Group Recaps
- Year in Review

- See web page for all available documentation.

WG2 Product Identification

Work Group 2 Product Identification deals with issues relating to the identification of drugs and health related products within NCPDP's stated mission. Identification consists of how the product is billed (billing units, quantity designations), product identification systems, and any type of descriptive data which serves to uniquely identify a product with the intent to establish standards for product identification such that there is no ambiguity in distinguishing one product from another.

During the May Work Group meetings, WG2 will hear updates from the following task groups:

- Dates Associated With Pharmaceutical Products Task Group
- Structure Product Labeling Activities Task Group
- Product Review and Billing Unit Exception Task Group
- SPL REMS Task Group
- Naming Standards for Drugs, Biologics and Biosimilars Task Group
- Application of BUS Clarification Task Group
- Update Joint WG2/WG11 Harmonization of Prescribing and Dispensing Units Task Group

WG2 will also:

- Review ballot WG020009 results and comments
- Hear an update on the Industry and Government Activities
- Hear presentations on FDA Common REMS Platform document and the impact of Track and Trace on pharmacies
- Review new QUIC forms

Documents for discussion that are available on the WG2 page include:

- 201705.WG2.zip containing:
  - Agenda
  - New QUIC Forms
  - Task Group Recaps
  - Presentations
  - Year in Review
- See web page for all available documentation

WG7 Manufacturer and Associated Trading Partner Transaction Standards

Work Group 7 Manufacturer and Associated Trading Partner Transaction Standards develops, monitors, and maintains standards for the electronic exchange of data between manufacturers and data providers, and/or trading partners. Additionally, the work group will facilitate the implementation and education of the standards and process.

During the May Work Group meetings, WG7 will hear updates from the following task groups:

- Medicaid Drug Rebate Program Task Group
- Medical Rebate Task Group
- Manufacturer Rebate Standard Task Group
  - Specialty Pharmacy Data Exchange Sub-Task Group
- Formulary Management Survey Task Group

WG7 will also:

- Review new DERFs and pended DERF 001446

Documents for discussion that are available on the WG7 page include:

- 201705.WG7.zip containing
  - Agenda
  - Task Group Recaps
  - Year in Review
- See web page for all available documentation

WG9 Government Programs

Work Group 9 Government Programs, in conjunction with Work Group 1 Telecommunication, guides and advises Federal and State funded pharmacy programs and their agents on standards implementation, supports data processing initiatives, and provides design alternatives for standards, which support government requirements.

During the May Work Group meetings WG9 will

- Hear updates from the following task groups:
  - 340B Task Group
  - Government Programs Encounter Reporting Standard Task Group
  - Hospice Task Group
  - Medicaid Best Practices Using NCPDP Standards to Implement Reimbursement Methodology Task Group
  - Medicaid Frequently Asked Questions Task Group
  - Medicaid Subrogation FAQ Task Group
  - Medicare Financial Information Reporting Task Group
  - Medicare Part D FAQ Task Group
  - Medicare Prescription Drug Event Task Group
  - Medicare Standardized Fraud, Waste and Abuse Training Attestation Task Group
  - Medicare/Medicaid Claim Billing Issues Task Group
  - OIG Report OEI-05-12-00540 Task Group
  - Prescription Monitoring Programs Task Group
  - Supplemental Payer Part D Reconciliation Task Group
  - Social Security Number Removal Initiative (SSNRI) Task Group
  - Coordination of Benefits Contractor (COBC)/Benefits Coordination & Recovery Center (BCRC) Task Group

WG9 will also:

- Review Ballot WG090009
- Receive Government Programs and Industry Changes Update
  - NCPDP EDvocacy/Legislative Update

Documents for discussion that are available on the WG9 page include:

- 201705.WG9.zip containing
  - Agenda
  - Task Group Recaps
  - Year in Review
- See web page for all available documentation

WG10 Professional Pharmacy Services

Work Group 10 Professional Pharmacy Services assists in the development and maintenance of standards to support electronic documentation and transmission of data for professional pharmacy services.

WG10 will hear updates from the following:

- MTM Communication Task Group
- mL White Paper Task Group
- USP Allergy Update (Donna Bohannon)
- WG11 Specialty Requirements- eRx Task Group
- WG14 Consultant Pharmacist Interoperability Task Group

WG10 will also receive:

- Pharmacist Dispensing Legislation
- Presentation
    - Tricia Lee Wilkins

Documents for discussion that are available on the WG10 page include:

- 201705.WG10.zip containing
    - Agenda
    - Task Group Recaps
    - Presentations
    - Year in Review
- See web page for all available documentation

WG11 ePrescribing & Related Transactions

Work Group 11 ePrescribing & Related Transactions develops standardized messages for prescribers, pharmacists, payers and/or other interested parties to exchange information.

During the May Work Group meetings, WG11 will hear updates from the following task groups:

- WG14/11 LTCPAC ePrescribing Task Group
- Formulary and Benefit Task Group
- XML Task Group
- NCPDP/HL7 Pharmacist Functional Profile Task Group
- ePrescribing Best Practices Task Group
- REMS and ePrescribing Task Group
- Electronic Prior Authorization Workflow to Transactions Task Group
- Meaningful Use and NIST Test Methods for ePrescribing Task Group
- Implementation of Structured Sig Task Group
- Specialty Requirements for ePrescribing Task Group
- Harmonization of Prescribing and Dispensing Units
- EPCS Renewal Task Group
- SCRIPT Managed Updates Schedule Task Group
- Biological and Biosimilar Access and Traceability Task Group
- X12 270/271 Version 7030 Review Task Group

WG11 will:

- Review Ballot WG110072, WG110073, WG110074, and WG110075 results and comments
- Receive a status on industry activities
- Discuss questions and answers for inclusion in the SCRIPT Implementation Recommendations document (if applicable)
- Discuss questions and answers for inclusion in the Formulary and Benefit Implementation Recommendations document (if applicable)
- Seek to create a new task group as a result of the approval of New Project Development Form 000043 to incorporate the work of the S&I Framework PDMP initiative into SCRIPT documents.

Documents for discussion that are available on the WG11 page include:

- 201705.WG11.zip containing:
  - Agenda
  - Task Group Recaps
  - DSMO Change Requests (if applicable)
  - Year in Review
- See web page for all available documentation

WG14 Long Term and Post Acute Care (LTPAC)

Work Group 14 Long Term and Post Acute Care (LTPAC), in conjunction with the other Work Groups, guides and advises payers, processors, and providers of the long term care industry and institutional pharmacy programs and their agents on standards implementation and supports data processing initiatives.

During the May Work Group meetings, WG14 will hear a status from the following task groups:

- Current Billing Issues Task Group
- ePrescribing Task Group
- Consultant Pharmacist Interoperability Task Group
- Best Available Evidence (BAE) Form Automation Task Group

WG14 will also:

- Receive an update from the WG1 Eligibility Verification Task Group, WG9 Hospice Task Group, WG9 Medicare Part D FAQ Task Group, MC RTBI Task Group and WG11 Prior Authorization Workflow-to-Transactions Task Group
- Discuss Industry/Regulatory Updates

Documents for discussion that are on the WG14 web page include:

- 201705.WG14.zip containing
  - Agenda
  - Task Group Recaps
  - Year in Review
- See web page for all available documentation.

WG16 Property and Casualty/Workers' Compensation

Work Group 16 Property and Casualty/Workers' Compensation will ascertain, monitor and analyze regulatory requirements to develop correlating fields to be supported in the Telecommunication Standard format; evaluate, and maintain a Property and Casualty/Workers' Compensation standard paper claim form; proactively promote and educate pharmacy industry stakeholders and regulatory policy makers on the form and format standards found in Property and Casualty/Workers' Compensation (including but not limited to uniform billing, state reporting policies and the overall delivery of pharmacy services/care.)

WG16 will receive status reports from the following task groups:

- Legislative/Regulatory Monitoring and Education Task Group
- Billing and State Reporting Task Group
- Future Development Needs for WC/PC

WG16 will:

- Discuss Rule Comments and Advocating for NCPDP Standards
- IAIABC Update - Gregg Lutz, Director, Standards Development and Outreach
- Update on Compound Guidance

Documents for discussion that are on the WG16 web page include:

- 201705.WG16.zip containing
    - Agenda
    - Task Group Recaps
    - Year in Review
- See web page for all available documentation.

WG45 External Standards Assessment, Harmonization and Implementation Guidance

Work Group 45 External Standards Assessment, Harmonization and Implementation Guidance reviews, assesses and works to continually monitor the development of standards and/or operating rules by other Standards Development Organizations (SDOs) and/or other Non-NCPDP entities that may impact the pharmacy industry. The Work Group

- Communicates SDO and other external entities developments and identifies actions that may be needed by this or other NCPDP work groups. These include, but are not limited to, the ASC X12N Implementation Guides and the Health Level Seven International (HL7) Standards.
- Develops and maintains guidelines for the pharmacy industry to accommodate pharmacy implementation of the Health Insurance Portability and Accountability Act (HIPAA) and Affordable Care Act (ACA) mandated electronic data interchange (EDI) transactions and operating rules not developed by NCPDP as determined by the membership.
- Contributes to the development and maintenance of operating rules that impact the pharmacy industry.

To this end, Work Group 45 External Standards Assessment, Harmonization and Implementation Guidance will collaborate with other SDOs, operating rules entities or other Non-NCPDP entities to provide the pharmacy perspective and represent the industry needs in the development of standards and guidelines.

During the May Work Group meetings, WG45 will hear updates from the following task groups:

- Document Revision Task Group
- Pharmacy ID Card Task Group
- X12 7030 834/835 Task Group
- 834/835 FAQ Task Group
- DSMO Change Request Task Group
- DIR 835 Reporting Task Group
- MC UDI Task Group

WG45 will receive the following reports:

- Industry Updates (WEDI, NCPDP SNIP, X12, CAQH CORE)
- Inter-SDO Process
- Legislation
- Review WEDI Liaison role

WG45 will also review:

- DERF 001464 (Pharmacy ID Card)

Documents available on the WG45 web page include:

- 201705.WG16.zip containing
    - Agenda
    - Task Group Recaps
    - Year in Review
- See web page for all available documentation.

MC Maintenance and Control:

MC Maintenance and Control monitors and maintains the development of NCPDP standards, implementation guides and reference documents, promotes consistent business and technical administration, makes recommendations to the Standardization Co-Chairs on development procedures, due process compliance, as well as ethical and legal matters. MC provides a forum for updates of work group activities, resolution of inter-Work Group issues and discussion of legislative, regulatory, policy, and court decisions which may affect the pharmacy industry.

During the May Work Group meetings, MC will hear a status from the following task groups:

- Education/Legislation/Regulations Task Group
- Real-Time Prescription Benefit Inquiry Task Group
- Unique Device Identifier (UDI) Task Group
- API Task Group
- Emergency Preparedness Task Group
- X12 TR3 Comment Coordination Task Group
- ECL Task Group
- Specialty Task Group

MC will also:

- Review new and pended DERFs
- Review New Project Development Form
- Receive daily WG updates
- Receive updates on HIPAA
- Receive an update from the Board of Trustees
- Receive an update from the NCPDP SNIP Committee
- Receive an update on Project Development Forms 000042 and 000043
- Hear a presentation on FDA Common REMS Platform document

Documents for discussion that are on the MC page include:

- 201705.MC.zip containing
    - Agenda
    - Task Group Recaps
    - Year in Review
    - Presentation
- See web page for all available documentation