What is NCPDP?

- An ANSI-accredited standards development organization.
- Provides a forum and marketplace for a diverse membership focused on health care and pharmacy business solutions.
- A member driven organization that has been named in various government legislation and rulings, such as HIPAA, the Medicare Prescription Drug Benefit, and healthcare reform.
- One of several Standards Development Organizations (SDOs) involved in Healthcare Information Technology and Standardization.
- Focus on pharmacy services, and has the highest member representation from the pharmacy services sector of healthcare.
- NCPDP standards are used in pharmacy processes, payer processes, electronic prescribing, rebates, and more.
- NCPDP dataQ™ - provides healthcare stakeholders with up-to-date, comprehensive, and in-depth pharmacy information. NCPDP Online - enumerator of the NCPDP Provider ID number. See [http://www.ncpdp.org/Products/DataQ](http://www.ncpdp.org/Products/DataQ)
- HCIdea - NCPDP’s relational healthcare prescriber database of over 2.1 million prescribers created for the industry, by the industry. See [http://hcidea.ncpdp.org/](http://hcidea.ncpdp.org/)
- RxReconn™ - NCPDP’s legislative tracking product. See [http://www.ncpdp.org/Products/Rxreconn](http://www.ncpdp.org/Products/Rxreconn)
The Prescribing Paper Process…

Current Rx Process

How most people think of the prescribing process

But there’s much more to it than just a simple transaction of paper and pills…
What is all going on…

**Current Rx Process**

- Patient gives Doctor Medical History, current medication list
- Doctor looks up clinical information in journals and medical texts
- Doctor also refers to printed formulary and drug reference book
- Doctor writes out a prescription and hands it to the patient
- Patient takes the prescription to a local pharmacy for filling

- Pharmacist calls Doctor because the drug requires Prior Authorization
- Doctor calls Pharmacy Benefit Manager to obtain Prior Authorization
- PBM sends approval information to pharmacy via EDI transaction
- Pharmacist fills Prescription and hands it to Patient
The Patient Needs a Refill...

Current Rx Process

- Patient learns from pharmacist that she is out of refills
- Pharmacist sends fax to doctor’s office manager
- Office manager puts renewal request on doctor’s desk
- Doctor reviews renewals at the end of the day before leaving the office
- Doctor gives signed renewal to nurse for processing and filing
- Nurse calls pharmacist to give renewal approval
- Pharmacist fills renewed prescription and hands it to the Patient
The Electronic Exchanges

Cardholder & dependent(s)

Pharmacy ID Card (WG 3)

NCPDP Formulary and Benefit Standard / NCPDP SCRIPT Medication History (WG 11), ASC X12 270/271 Eligibility Inquiry/Response

Eligibility Formulary Drug History

Point of Care Vendor

Electronic Prescription

Switch or Service Intermediary

Processor/PBM

ASC X12N 834 Benefit Enrollment and Maintenance (WG 45)

Payer/Health Plan

Drug Wholesaler

Pharmaceutical Manufacturer

Billing Unit Standard (WG 2)

NCPDP Telecommunication Standard Universal Claim Form Standard Batch Transaction Standard (WG 1)

NCPDP Formulary and Benefit Standard

ASC X12N 835 Remittance Advice (WG 45)

NCPDP SCRIPT Standard

Electronic Prescription

Physician or Prescriber

Patient

Card

Cardholder & dependent(s)
Standards for Electronic Exchange

The NCPDP **Standard Implementation Guides** contain the

- business and technical definition of the transactions
- the actual transaction layouts, the syntax and formatting rules, the transaction rules, usage,
- further information about the implementation of the standard by the use of descriptive paragraphs, business situations, examples, and frequently asked questions.

- Software vendors and implementation departments take the standards documents and create software for the exchange of data using these standards.
NCPDP Standards Used in Electronic Prescribing

- **SCRIPT Standard**
  - Exchange between prescribers, pharmacies, intermediaries, payers
    - New prescription request
    - Change of new prescription
    - Cancel of prescription
    - Refill/renewals request/response or Resupply in long term care
    - Fill Status notification
    - Medication history exchange
    - Drug Administration exchange in long term care
    - Prescriber-reported samples for more robust medication history
    - Query functions for new prescriptions
Some of the Transactions and the Flow…
NewRx and RxChangeRequest/Response
PICTORIAL TRANSACTION FLOW

START

NewRx

GOOD TRANSACTION?
Yes
No
Error

Status

RX NEEDS CHANGE?
Yes
No
END

RxChangeRequest

GOOD TRANSACTION?
Yes
No
Error

RxChangeResponse

Status

GOOD TRANSACTION?
Yes
No
Error
New Prescription (NewRx)

This transaction is a new prescription from the doctor to the pharmacy.
Change of a New Prescription (RxChangeRequest/Response)

These transactions are used when the pharmacy is asking for a change in the original prescription, and the prescriber’s response. An example may be to allow for generic substitution.
Renewal of a Prescription (RefillRequest/Response)

These transactions are used from the pharmacy to the prescriber requesting additional refills and the prescriber’s response.
Fill Status Notification

This transaction is sent to the prescriber from the pharmacy and indicates the status of the prescriptions dispensing (dispensed, partially dispensed, not dispensed).
Medication History (RxHistoryRequest/Response)

This transaction is from an entity requesting medication history from an entity, and the medication history response.
Cancel of a Prescription (CancelRx/CancelRxResponse)

This transaction is a request from the prescriber to the pharmacy to not fill a previously sent prescription, and the pharmacy’s response.
New Transactions

- SCRIPT Standard Version 2013101
  - Prior Authorization Initiation/Response
  - Prior Authorization Request/Response
  - Prior Authorization Cancel/Response
  - Prior Authorization Appeal Request/Response

- The prior authorization transactions work with the Formulary and Benefit Standard and the eligibility check....
Prescriber system receives timely Formulary & Benefit file updates from payers/intermediaries, giving group-level formulary and coverage information (including PA flags) for use when ordering medications.

Prescriber system sends an eligibility request before the patient encounter, and learns the patient’s payer, member ID and pointers to their formulary information.

The prescriber selects a medication that may require prior authorization. The prescriber’s system initiates the PA process with the patient’s payer.

The payer identifies the info needed for the PA.

The prescriber system collects the needed information from the prescriber, the patient’s electronic medical record, etc and returns a completed PA request to the payer. This exchange may repeat more than once if additional information is needed.

The payer returns its determination.

If needed, the prescriber system and payer exchange PA appeal or PA cancellation messages.
NCPDP Standards Used in Electronic Prescribing

• Formulary and Benefit Standard
  • Pharmacy benefit payers (including health plans and Pharmacy Benefit Managers) to communicate formulary and benefit information to prescribers via technology vendor systems. Information for the prescriber to consider for the most appropriate drug choice for the patient.
    • Which drugs are considered to be “on formulary,” and alternative medications for those drugs not on formulary
    • Limitations that may impact whether the patient’s benefit will cover a drug being considered (such as age limits, gender limits, step therapy rules, benefit-specific coverage exclusions, etc.)
    • The cost to the patient for one drug option versus another
Of Interest

• NCPDP electronic prescribing web page for resources, industry information, fact sheet, etc.
  • [http://www.ncpdp.org/Resources/ePrescribing](http://www.ncpdp.org/Resources/ePrescribing)

• NCPDP task groups - [http://www.ncpdp.org/Standards/Standards-Info](http://www.ncpdp.org/Standards/Standards-Info) - Click on Task Group Listing on page left