Overview

Complex medical conditions including cancer, hepatitis, multiple sclerosis and other chronic diseases often require a specialty medication. There are several paths for processing a specialty medication and the current lack of standardization around the process means it can take days, weeks or even months to get a patient on their treatment regimen.

All stakeholders involved in specialty medications are dedicated to enabling safe and timely access to these therapies. NCPDP is focused on supporting the standardization of industry transactions for claim and service billing, predetermination of benefits, prior authorization, information reporting and ePrescribing. Through this process we gain administrative efficiencies which can improve time to initiation of therapy.

In an effort to create awareness on this topic, NCPDP’s President & CEO Lee Ann Stember wrote an article for Drug Channels website titled “Three Reasons to Join the Industry-Wide Effort to Speed Time-to-Therapy for Specialty Pharmacy”. The article can be found here.

If you would like to participate, you can work collaboratively with colleagues and competitors alike to advance health information technology solutions through NCPDP’s consensus-building process for Specialty prescriptions. Your voice impacts your business and provides value to both you and your company.

In response to market demands NCPDP created a new Work Group (WG 18) devoted to specialty.

Work Group 18 Specialty Pharmacy

WG18 Specialty Pharmacy meets in-person during NCPDP’s Joint Technical Work Group Meetings. Work Groups meet on a quarterly basis (February, May, August, and November). Please click here for information on the next meeting. Registration for NCPDP’s Joint Technical Work Group Meetings provides access to all work group meetings during the event.

There are several Task Groups actively focused on ensuring the successful electronic exchange of information related to specialty pharmacy and products. Other task groups may be addressing items that impact specialty prescribing, dispensing, billing or reporting.

Work Group Co-Chairs:

- Michele Kidd, PharmD
- Maggie Buchinger
- Laura Topor
Specialty Resources

**WG 18 Task Group Information**

Please consider joining one or more of the following Task Groups to share your expertise and gain knowledge. Task group calls are open to NCPDP members and non-members, and you may join a task group at any time. Information and instructions for joining the task groups can be found by clicking here.

**WG 18 Specialty Pharmacy Data Exchange Task Group**

Task Group will standardize documentation, reporting or data exchange to support programs and agreements between specialty pharmacy stakeholders such as specialty pharmacies, manufacturers, PBMs, hubs, data aggregators, and payers. This could occur via the creation of new standards or the modification of existing NCPDP standards.

Task Group Leads:
- Andrea Kent
- Laura Topor

**WG 18 Specialty Requirements for ePrescribing Task Group**

In the specialty pharmacy realm, there is often additional information needed before a prescription can be dispensed. This information is provided by the prescriber (or someone in the prescriber’s office). This information includes additional patient demographic and clinical information, order-specific clinical information and instructions related to delivery of the medication (i.e. to the patient or the clinic, nursing services required). This information would be added to the appropriate SCRIPT Standard and/or Specialized Standard transactions, depending on analysis.

Task Group Leads:
- Michele Kidd, PharmD
- Maggie Buchinger

**WG 18 Benefit Coverage Identification Task Group**

This task group was created to address the areas of opportunity related to determining if coverage is through the medical or pharmacy benefit.

Task Group Leads:
- Harold Barnes
- Jason Reed
**WG 18 Patient Consent Task Group**

The goal of this task group is to allow for the electronic exchange of patient consent information for the purpose of transmitting such information in DME and Specialty Pharmacy related transactions. Patient consent may cover the following: required authorizations under HIPAA, required individual state consent language, authorizations for release of records (including medical records), consent to work with patient’s insurance company, and consent to receive marketing communications. This task group aims to fully capture any necessary electronic patient consent and authorization to allow DME and Specialty Pharmacy prescribers to send electronic prescription information and authorizations when needed in electronic transaction(s).

**Task Group Leads:**
- Joe Kelly
- Frank McKinney

**WG 18 Facilitating Pre-Prescribing Information Access Task Group**

The goal of this task group is to improve communication and access to information around specialty and/or limited distribution products from sources other than the payer. The task group will determine a course of action for each area of opportunity:

- Specialty Product Distribution
- Hub Services

**Task Group Leads:**
- Amy Konak
- Elizabeth Gibson

**Additional Resources & Information**

Join a Task Group on the NCPDP Collaborative Workspace:
[Instructions on how to Join the Collaborative Workspace](http://dms.ncpdp.org/)

**VIDEO** - NCPDP’s WG18 Co-Chairs discuss the critical importance of standardizing specialty pharmacy transactions to speed time to therapy for patients with complex or chronic medical conditions:
[https://youtu.be/h-JFRxHkIvM](https://youtu.be/h-JFRxHkIvM)

**NCPDP Specialty Pharmacy Benefit Coverage Identification White Paper, September 2020**