

## Work Group Recaps:

### Work Group 1 Telecommunication

#### Ballots:

- Ballot WG010039 Telecommunication Version D.3 enhancements. The ballot was valid at 66.12%. Negative With Reason comments were adjudicated. The ballot will be recirculated with modifications made.
- Ballot WG010040 Financial Information Reporting enhancements. The ballot was valid at 66.45%. There were no Negative With Reason comments. After the appeal timeframe, the ballot will proceed to the Board of Trustees for approval.

#### DERFs (see DERF Resolution at

[http://www.ncpdp.org/members/members\\_wg\\_info.asp?wgid=wgmc](http://www.ncpdp.org/members/members_wg_info.asp?wgid=wgmc)):

- DERF 000903/ECL 000047 requests specific Reject Codes to identify benefit limitations which need to be segregated and thereby facilitate proper coordination of processing by any downstream payers. The DERF was approved with modifications.
- DERF 000907/ECL 000049 This DERF requests "This request is for a new value for the fields Basis Of Cost Determination (423-DN) and Compound Ingredient Basis Of Cost Determination (490-JE). The intent of the new value would define situation when 'pharmacy cost' is used for hospital pharmacies or other entities based on trading partner agreement." The DERF was approved with modifications.
- DERF 000908/ECL 000050 This DERF requests "This request is for a new value for field Basis of Reimbursement Determination (field 522-FM). The intent of the new value would define when the submitted gross amount due was used to determine reimbursement. This value would be defined as Gross Amount Due Paid as Submitted – Indicates when the ingredient cost reimbursed to the provider is based upon the submitted Gross Amount Due." The DERF was pended for more discussion.
- DERF 000909/ECL 000051 This DERF requests "This request is for a new value for field Basis of Reimbursement Determination (field 522-FM). The intent of the new value would define when the 'pharmacy cost' for hospital pharmacies or other entities based on trading partner agreement was used to determine reimbursement." The DERF was approved with modifications.
- DERF 000910/ECL 000052 This DERF requests "Requesting additional Reject Codes for D.0 Data Fields. See Excel for specifics. In the current list of Reject Codes there are some data fields with code lists that have the rejection for a value within the code list. To maintain consistency, have identified all claim fields that allow for a code list and have created a corresponding Reject Code for 'Code Value not Supported'. There are a few miscellaneous code values that I feel are needed." Some items on the DERF were approved with modifications. Other items on the DERF were pended for more discussion.
- DERF 000913/ECL 000054 This DERF requests "There are several Reject Codes listed within the ECL for pharmacy not contracted, i.e. G6 -G8, however there is not a specific Reject Code for pharmacy not contracted for Assisted Living network." The DERF was approved.
- DERF 000917 This DERF requests "Modify the Post Adjudication layout to include removal of fields, addition of fields, additional recurrences of existing fields, situational field clarifications, modification to field names, guidance on COB fields and a new column on the layout to indicate whether the source of the data is taken from the claim or is provided from the processor." The DERF was approved.
- DERF 000918 This DERF requests "ECL request to add new Reject Codes (511-FB) for Not Used specific situations in Telecom and an explanation of usage in the External Code List. If a segment or field is defined in the implementation guide as "Not Used" in a particular transaction, the Reject Code of "XXX (field) not used for this Transaction Code" is to be used. Add to the VD Editorial document as well." The DERF was approved.
- DERF 000919 This DERF "Requests to add a new structured Additional Message Information field (526-FQ) with a new Additional Message Information Qualifier (132-UH) for not used fields. The DERF was withdrawn by the submitter.

Old Business:

- **NCPDP SNIP Committee** completed a document of ICD-10 guidance (see SNIP page of website). They have created a survey in preparation for NCVHS testimony on HIPAA readiness in December. They are working on webinars on the standards.
- WG45 updated information on NET (Retro-Eligibility (P10)) activities.

Task Groups:

- The **Telecommunication FAQ Task Group** brought forward the questions received that the task group had discussed and two DERFs.
- The **Coordination of Benefits Task Group** reviewed question D-Twenty from the FAQ Task Group, they discussed a sales tax question, the possibility of adding more examples, and they discussed a new question on proper COB submissions.
- The **Controlled Substance Reporting Task Group** was disbanded since they have completed known work. WG9 has a task group on prescription monitoring programs that will apprise if any work for WG1 comes up.
- The **Financial Information Reporting Task Group** discussed new questions.
- **Payer-to-Payer Task Group** did not meet.
- **Tax Advantage Accounts Task Group** has met to discuss the models for their work. They are looking for more participation to complete a transaction between the payer and the source of funds.
- **Information Reporting Problems Task Group** – the subgroup has met to analyze data for processing Medicare Part D claims to supplemental payers.
- The **Post Adjudication Task Group** was reformed to provide more guidance in the implementation guide and brought forward a DERF.
- The **Information Reporting Transition to D.0 Task Group** is building an educational document. They are waiting to discuss problems found with the CMS COB contractor.
- The **Patient Location/Patient Residence Task Group** was formed to build industry guidance for the use of these fields, especially in transition from version 5.1 to D.0 and they have brought forward a recommendation.
- **Project 000032 Audit** was discussed and a task group was formed to create an electronic audit transaction with requests, responses, and final outcome segments for both “desk top” claim audits and for in-store audit notices.

Work Group 2 Product Identification

Ballots:

- Ballot WG020003 was adjudicated with no negative comments received. After a 30-day appeal period, Version 3.0 of the Billing Unit Standard Implementation Guide will be sent to the Board for approval.

Old Business:

- A WG17 activities update was provided.
- A GS1 activities update was posted to the WG2 page of the website for review.
- The WG 2009 Scope and Goals were approved by the Board with minor editorial revisions and the addition of a new goal.
- DERF 905 was approved at the August WG meetings and was balloted in WG020003.

Task Groups:

- The **Billing Unit Standard Marketing Task Group** is working to assure that NCPDP has a presence at conferences that attract pharmaceutical manufacturers and where the billing unit standard will impact this sector of the business.
- The **Structure Product Labeling Activities Task Group** met during the WG meeting and agreed to the Guiding Coalition’s recommendation to request that the FDA clarify quantity reported in the SPL. The request is that the overfill quantity NOT be included in reported quantity. They also discussed the recommendation that the Billing Unit not be part of the SPL but be added it to an appended file that is available to the public. The Coalition Group will discuss. The group made a request to the HL7 Leadership Group to add a Last Marketed Date element to the SPL standard and will ask the FDA to make

available the non-NDA and non-ANDA products. A letter to the FDA requesting this information will be developed.

- The **Product Review and Billing Unit Exception Task Group** is reviewing the exceptions within the Implementation Guide and issues that result from changes to existing products or release of new products. Reviewed:
  - Tyvaso - billing unit is MLs for all NDCs.
  - Ozdurex (Dexamethasone Intravitreal Implant - NDC 0023-3348-07) - billing unit is EA. FAQ to be written to address all implant dosage form products.
  - Keralyt Scalp Complete Kit (NDC 11086-047-01) – billing unit is a kit, 1 EA.
  - Varibar Thin Liquid. 32909-0105-10 - list as “grams” and quote 5.1.8 and FAQ 7.33.
  - New Product Launch by Graceway Pharmaceuticals, LLC. - This product (a cream) is being launched as a box of 28 sachets of 250 mg each. A 7.5 gm pump will be marketed some time later. All agreed that the cream in the sachet should have a core 9 NDC of “A” with the Billing Unit of each (28 of them) and the cream in the 7.5 gm pump would have a core 9 NDC of “B” with the Billing Unit of gm (total qty. of 7.5).

The group also reviewed package size discrepancies remaining from the Package Size discrepancy TG work. With the exception of 5 NDCs, all discrepancies have been reviewed and compendia have scheduled the changes. It was suggested that future package size review/discrepancies be merged with this task group’s work and that the Package Size TG be disbanded. The WG agreed and the Package Size TG was disbanded.

- The **Package Size Task Group** was disbanded. See the Product Review and Billing Unit Exception Task Group report above.
- The **Non-Matched NDC CMS List Task Group** developed an NCPDP-sponsored webinar that was held at 3:00 p.m. EDT on Thursday, September 3, 2009. The web-based seminar provided an overview of the CMS unmatched NDC list and its implications. Representatives of CMS and FDA were on hand to describe the structure of the CMS Non-Matched NDC list and answer questions from participants. This task group was disbanded.

#### New Business:

- QUIC Form Review:
  - #200908 Ozurdex (dexamethasone intravitreal implant) NDC: 00023-3348-07 - the billing unit was determined to be each.
  - #200909 Tyvaso Starter Kit and Tyvaso Refill Kit NDC 66302-0206-01 & 66302-0206-02 – the billing unit was determined to be mL.
- A report was given on the CMS initiated meeting with WG2 participation to discuss the differences between the CMS and NCPDP billing units. After the meeting a file of NDC discrepancies was sent to CMS for review and further discussion.
- A presentation on an SPL Overview was given by Mark Bayer and Gary Saner of Reed Technology. This presentation will be available on the NCPDP website at [http://www.ncdp.org/members/members\\_presentations.asp](http://www.ncdp.org/members/members_presentations.asp).
- A Ten/Eleven Digit NDC discussion was held regarding an FDA document instructing manufacturers to place an “\*” asterisk character as a place holder for the “0” in the 10-digit NDC. This is a hold over from the paper legacy system and the FDA is in the process of cleaning this up.

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#### Work Group 3 Standard Identifiers

##### Old Business

- WG3 received an update on the Prescription Label initiative being led by the United States Pharmacopeia advisory panel.
- The revised InterNational Committee for Information Technology Standards (INCITS) 284 Health ID Card Standard has been approved by INCITS and has been submitted to ANSI for public comment.

- WG3 received an update on the work of the CAQH CORE Phase III Subgroup for Health ID Cards

#### Task Group Updates:

- The **Letters to States/State of States Task Group** provided an update regarding Medicare Part D Claims for Drugs Prescribed by Excluded Providers. The task group wrote a letter advising CMS of the problems with the data and recommending the addition of the NPI to both the OIG and GSA files to simplify and increase the accuracy of mapping to prescriber files. Recognizing the difficulty of this enhancement for both systems it was suggested to relax the requirement for the GSA file editing as a short-term solution. The task group has not received a response from CMS. WG3's State of the States document is available on the NCPDP website at [http://www.ncdp.org/members/members\\_wg\\_info.asp?wgid=wg03](http://www.ncdp.org/members/members_wg_info.asp?wgid=wg03).
- The **Pharmacy and Combination ID Card Implementation Guide Task Group** presented the Pharmacy and Combination ID Card Fact Sheet, which was updated to reflect the changes in version 3.0 of the Implementation Guide approved by the Board of Trustees in October. WG3 approved the revised Fact Sheet with one modification. During the next quarter, the Task Group will review and make appropriate modifications to the X12 270/271 and ID card mapping document.
- The **dataQ™ Enhancement Task Group** will meet next quarter to review the design specifications for the enhancements to make sure what was requested was understood and will be implemented in such a way that each company can work with the changes.
- The **HCIdesa™ Enhancement Task Group** reported on the development of the Frequently Asked Questions document, which will accompany the new HCIdesa™ Implementation Guide..

#### Work Group 7 Manufacturer Rebates

##### Old Business

- WG7 received an overview of the layout and use of the Rebate Reconciliation File.

##### Task Group Updates:

- The **CMS Task Group** reported on their work to develop a survey aimed toward State IT and Rebate contacts. The purpose of the survey is to inform them of the existence and usefulness of the Rebate Standard and to collect information on their current processes, needs and wants, and decision makers around the use of the standard.
- The **Standard Update Task Group** reported on the proposed revisions to the Formulary and Market Basket Files. There was lengthy discussion about whether benefit design information should be part of the Formulary file. WG7 agreed to suspend work on the Formulary file at this time and provide a plan/formulary/benefit design overview at the next quarterly meeting.
- The **Reference Guide Task Group** presented two new topics for the Reference Guides and the removal of Question 08 from the Guides. The Guides are being reformatted to be more user friendly.
- The **Non-Pharmacy Biologics Task Group** presented a draft template for Medical Utilization Rebate Data. The task group will continue their work on the template and incorporate the modifications suggested by WG7.

##### New Business:

- Establish a quarterly review and discussion of emerging industry issues related to Health Care Reform.
- Work on the development of an education webinar to help companies better understand and use the Manufacturer Rebate Standard.

#### Work Group 9 Government Programs

##### Old Business:

- An update was provided on Part D Supplemental Payer issues.
- WG9 received an update from WG45 NET Retroactive Eligibility Task Group.
- WG9 reviewed the Medicare Part D 2010 benefit year changes.

#### Task Group Update:

- The **Prescription Monitoring Program (PMP) Task Group** reviewed the updates made to the tracking document this quarter.
- The **Dual Eligible Recipients and Medicare Advantage Plans Task Group** identified the State Medicaid model using NCPDP Telecommunication Standard v5.1 to support COB claims for Part B products secondary to the Medicare Advantage program. A State Medicaid MAO Part B chart containing information on how the States handle the billing process was provided to CMS to review and identify available options to promote a consistent billing process. A short-term option is sending a letter to the Medicaid Directors to promote the model process. A long-term solution is to include guidance in the 2011 Call Letter.

#### New Business:

- WG9 received an overview of the MC Legislation and Regulation Education task group.
- WG9 formed three new task groups:
  - **340B Task Group** lead by Gary Reiss, SUNRx and John Lynch, Eaton Apothecary. The proposed goal of the task group is to develop recommendations on the use of existing standards or future enhancements to standards that will serve the needs of trading partners involved in the 340B federal pricing program. The task group will provide a forum for discussion and education on the various issues related to the 340B federal pricing program.
  - **H1N1 Vaccine Billing Tracking Task Group** led by Amy Harvey, Rite Aid. The task group will track the H1N1 vaccine billing process being used by each State Medicaid Program. This information will be added to the State of the States spreadsheet.
  - **Medicaid Communication Process Task Group** led by Sharon Gruttadauria, CVS Pharmacy, Louise Gustafson, ACS, Inc. and Monique Irmen, Argus Health Systems, Inc. The purpose of the task group is to develop a process for communicating with State Medicaid Programs to keep them informed of actions/recommendations by NCPDP that affect their business processes.

#### Work Group 10 Professional Pharmacy Services

##### Old Business

- The work group scope and goals were approved for 2009.

##### Task Group Reports

- The **Structured and Codified Sig Task Group** is participating in the CMS pilot of SCRIPT 10.5 using Sig and RxNorm. A subset of task group is participating as an expert panel to review lab data. The task group will review feedback from pilot and revise the Sig, guidance and implementation documents as needed. A RAND Health presentation titled "CMS 2008-9 E-Prescribing Standards Testing RxNorm and Structured and Codified Sig" was shown
- The **MTM Communications Task Group** has identified the following gaps in the existing standards: PHR communication with pharmacy, identification of service by a payer to a pharmacy, communication between LTC Pharmacy and the Facility, documentation of the MTM Service (Actions, Reasons, and Results) and reporting aggregate or detail results. Gaps in the existing procedure code sets have also been identified.

#### Work Group 11 ePrescribing & Related Transactions

##### Ballots:

- Ballot WG110040 – SCRIPT 10.10 enhancements. The ballot was valid at 65.79%. Negative With Reason comments were adjudicated. The ballot will be recirculated with modifications made.
- Ballot WG110041 – Prescription Transfer enhancements. The ballot was valid at 66.45%. There were no Negative With Reason comments. After the appeal timeframe, the ballot will proceed to the Board of Trustees for approval.

##### DERFs:

- DERF 000893 requests a modification to the Medication History Response (RXHRES) to be allowed to be an unsolicited transaction allowing physicians to send sample medications to participating pharmacies. Between work group meetings, the task group modified the DERF based on discussion during the August meeting. The modified DERF was approved as modified.
- DERF 000899 requests to mark the two shorter fields of Sig as not used and add a new longer field. The DERF was pended for more work.
- DERF 000906 This DERF requests "Communicate the patient's primary language to the pharmacy/pharmacist so that 1) Sig information may be translated from English to this language (if possible) and 2) indicate that a potential safety issue exists (in the way of a language barrier) that should be addressed with regard to medication administration instructions." The DERF was approved with modifications.
- DERF 000911/ECL 000053 This DERF requests "Effective July 25, 2005, physicians must include their Data 2000 Waiver ID Number on prescriptions for Opioid addiction treatment medications. The practitioner's DEA Registration Number and the Unique Identification Number (Data 2000 Waiver ID Number or "X" Number) must be on the prescription 21 CFR 1306.05(A). The Identification Number is not in lieu of the DEA Registration Number, it is an addition." The DERF was approved.
- DERF 000914 This DERF requests "The Version 10.X XML for Cancel Response contains a code that is not relevant to the Cancel Process - Approved with Changes." The DERF was approved.
- DERF 000915 This DERF requests "When a pharmacy receives a Cancel Request for a prescription that has been transferred out to a competitor, the Cancel Request can be denied, but currently there is no way to specify that a prescription has been transferred out to a competitor. " The DERF was approved.
- DERF 000916 This DERF requests "In Long-Term and Post-Acute care settings, a medication order may be communicated by the prescriber and entered into the electronic prescribing system in multiple ways. For example, a prescriber may enter the order directly into the e-prescribing system, or an order may be telephoned into the care facility, where a nurse enters it into the system. Dispensing rules in certain locations require that the pharmacist obtain additional documentation from the Long-Term care facility when an electronic order is not entered directly into the prescribing system by the prescriber or by the recipient of a verbal order. In locations where these rules apply, the pharmacist would benefit from knowing how the electronic orders they receive were captured into the e-prescribing system." The DERF was approved.

#### Old Business:

- An industry update was provided on NCVHS Subcommittee on Standards and Security, CMS (eprescribing, including AHRQ/CMS), DEA (eprescribing), and HITSP (use cases and Medication Harmonization project).
- A presentation was given on the CMS pilot on Sig and RxNorm usage in electronic prescribing.
- Frequently asked questions were discussed.
- There was discussion on AHRQ's Patient Safety Organization Web Site at - <http://www.pso.ahrq.gov/>

#### Task Groups:

- The **Prior Authorization Workflow-through-Transactions Task Group** did not meet this quarter. The next steps are for companies to commit to a prior authorization pilot and relaying that information to OESS. The task group brought forward an XML-based exchange for prior authorization information which was approved by the WG for use in a pilot. As there is more interest in a pilot, the task group could create pilot criteria. There was discussion of the MN prior authorization activities.
- The **Formulary and Benefit Task Group** are evaluating the industry survey responses.
- The **RxNorm Task Group** brought forward recommendations for the inclusion of RxNorm into Formulary and Benefit Standard.

- **SCRIPT XML Task Group** continues to monitor SCRIPT Implementation Guide updates for XML. They did not meet this quarter.
- **Clinical Health Information exchange between Pharmacies and Prescribers Task Group** has heard presentations on CDA, CCD, and is going through use cases for query functions.
- **NCPDP/HL7 Eprescribing Functional Profile Task Group** is actively working on functional profiles.
- The **Sample Standard Task Group** brought forward updates to DERF 000893.
- A **RxNORM in SCRIPT Task Group** analyzed the recommendations from the RxNorm Task Group and will bring forward a DERF.
- A **Prescription Requirements Task Group** brought a guidance document forward for prescriptions, which was approved for publishing.
- A **Central Fill Task Group** looked at the needs of this sector and will proceed with creating a standard.

#### WG14 Long Term Care

##### Old Business:

- Updates on the Long Term Post Acute Care Health Information Technology Collaborative (LTCPAC).
- 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.
- A report on the LTC Resident Report White Paper was provided.
- A report was provided on the Audit Focus Group.
- HIPAA update was provided.
- Approval of the 2009 Scope and Goals was announced.

##### Task Group Reports:

- The **EHR/HL7 Task Group** –The task group submitted a DERF for a SCRIPT enhancement in the new prescription message to enable the facility system to provide the long-term care pharmacist with information on the method by which a medication order for a long-term or post-acute care patient is defined and captured in the e-prescribing system.
  - Updates were provided on the WG11 CHIX, Sig Length, and Central Fill.
  - An update was provided on the joint NCPDP HL7 Standalone Electronic Prescribing effort.
  - EHR Inter-organization Sub Task Group provided an update including information on the CCHIT Certification.
- The **LTC Current Billing Issues Task Group** – The task group worked with the WG1 FAQ Task Group to incorporate the LTC billing guidance into the D.Ø guidance.
- The **Consultant Pharmacist Task Group** – The task group is on hold pending completion of the HL7 EHR Functional Model, Direct Care Functions (Chapter 3). An update was also given on the WG10 MTM Communications Task Group.
- The **LTC Utilization Reporting Task Group** – The task group did not meet during the quarter, but members have been working with CMS as the requirements for LTC reporting are being developed.
- The **Return Credit Task Group** –This task group is suspended awaiting completion of the work in the eMAR Task Group.
- The **eMAR Task Group** - The task group has developed the Return (RTN) and Destruction (DST) transactions that include seven new segments. They are currently working on examples.
- 2009 WG14 Scope and Goals were approved by the BOT.

#### New Business

- A request to establish a new task group to do a gap analysis relative to Hospice was reviewed and approved.
- There was a discussion on the CMS PDE and Days Supply Issue with a resultant recommendation for a focus group.

#### WG16 Property & Casualty/Workers Compensation

##### Old Business:

- An update was provided on the new UCF and distribution options including licensing.
- The formatting and additional definitions added to the guidance document for billing patient brand selection were reviewed. Edits will be incorporated and posted for the group to review.
- Approval of the 2009 WG16 Scope and Goals was announced.
- Update on the AWP was provided.

##### Task Group Reports:

- The **Legislative/Regulatory Monitoring and Education Task Group** provided an update on state regulatory and legislative initiatives affecting billing and reimbursement of Workers' compensation claims.
- The **Billing and State Reporting Task Group** provided an update on the NCCI Data Call, modifications to the IAABC Model e-Bill Rule Draft and the development of an Workers Compensation example for reporting D.Ø billing using the X12 835.

##### New Business:

- A letter to introduce NCPDP and WG16 to the Property/Casualty and Workers Compensation sector was reviewed and edited.

#### WG17 Pharmaceutical Pedigree and Traceability

##### Old Business:

- An update was provided on activities in GS1 and GS1 US regarding traceability, pedigree and related issues.
- An update was provided on Massachusetts HB3915 and New York S4592 legislative proposals.
- Approval of Year 2009 Scope and Goals announced.
- White Paper development work session.

##### Task Group Reports:

- The **Regulatory Tracking/Pedigree Task Group** reported that it did not meet during the quarter.
- The **Grandfathering Task Group** is suspended contingent upon completion of the WG recommendations for implementation of pedigree and traceability.
- The **Product Identifiers Task Group** is suspended pending the FDA regulations.
- The **Education Task Group** provided an update on the white paper development and led the group in a work session.

#### WG45 External Standards Assessment, Harmonization and Implementation Guidance

##### Old Business:

- A report was given that the WEDI SNIP 835 Sub Group is concentrating on mapping of the Claim Adjustment Reason Codes (CARC) and writing a white paper on the ASC X12 835 version 5010 including information on incorporation of the CARC into the 835.
- An update was provided on the NCPDP SNIP Committee activities including the published "Pharmacy Industry Impact for Implementation of the ICD-10 Code Sets White Paper" and updating the 2007HIPAA II Webinars to educate on the transition to the new standards. The new Webinars will be available the first part of next year. A white paper dealing with transition issues from Telecommunication Standard version 5.1 to D.0 is planned. SNIP has also created a survey on the industry's preparedness for the Telecommunication Version D.0, Batch 1.2 and Medicaid Subrogation version 3.0 which

is available on the NCPDP Web Site A survey on industry preparedness for version 5010 of the 835 is being developed.

- The X12 update reported on efforts to create a real-time version of the 835 transaction. Also in the next version of the 835 guide the Claim Adjustment Reason Code and the Healthcare Remittance Remark Code will be combined in one segment.
- A HITSP Update was provided.
- A HIPAA Update was provided.
- An update on the Minnesota 835 Companion Guide reported that the recommendations made by NCPDP and its members for the use of Claim Adjustment Group Codes and Claim Adjustment Reason Code pairs were accepted. The Companion Guide is now available on the Minnesota AUC Web Page.
- The work group was informed the 2009 Scope and Goals were approved and have been posed on the WG45 Web Page.

#### Task Groups:

- The **Central Pay Task Group** will continue with the documentation of balance forward processing with examples for when a pharmacy leaves a PSAO and moves to another with a negative forward balance and when a pharmacy goes out of business with a negative forward balance.
- The **Document Revision Sub Task Group** presented the NCPDP ASC X12 835 (005010X221) Pharmacy Remittance Advice Template along with the Telecommunication Standard Version D.0 examples for Work Group approval. The Task Group will continue working on the 835 examples along with the mapping of the Claim Adjustment Group Codes, Claim Adjustment Reason Codes, Healthcare Remittance Advice Remark Codes and the NCPDP Reject Codes.
- **834 FAQ Task Group** received no new questions.
- The **835 FAQ Task Group** received no new questions.
- The **NET Retro-Eligibility Task Group** presented an 835 Version 4010 solution for use by Medicaid Agencies that currently recoup monies from the pharmacy via an 835 transaction.
- The **835 White Paper Task Group** presented version 1 of their white paper which the Work Group approved. They will continue working on additional guidance related to the creation of the ASC X12 835 Version 5010.
- A **DSMO Task Group** was created to review DSMO change requests and create recommendations for presentation at the Work Group Meetings. The Task Group is currently working on DSMO Change Requests 1085 and 1088.

#### New Business

- DSMO 1080 was reviewed by the Work Group with a recommended that WG45 deny the request.
- WG45 will resume a discussion on the mapping of the NCPDP Telecommunication Standard vD.0 to ASC X12 837 Version 5010 pending the outcome of an investigation of the mapping X12 has already created.

#### MC Maintenance and Control

##### Ballots:

- **Ballots WG010039 and WG110040** will be released as re-circulation ballots with the November 2009 ballots.
- **Ballots WG010040, WG020003 and WG110041** received no negative comments. After a 30-day appeal period, should no appeals be received, these ballots will be sent to the BOT.

##### DERFs/ECLs:

- MC Maintenance and Control reviewed 14 new and 3 pended DERFs/ECLs (see WG1 and WG11 above). All DERFs approved at the November 2009 WG meetings will be held and balloted after the February 2010 WG meetings. The November 2009 approved DERFs will be combined with any February 2010 and will result in:

- Potential February 2010 ballots for SCRIPT, Post Adjudication and the Data Dictionary.
- A new publication of the External Code List (ECL)

Old Business:

- An update on New Project Development Form #032 was given.
- Update on DSMO Change Requests 1078 and 1080 were given.
- The MC 2009 Scope and Goals were approved by the Board with minor grammatical modifications.

Task Groups:

- The **Modeling and Methodology (M&M) Task Group** created a UML Profile to produce and maintain the External Code List (ECL) from the model. They also created a UML Profile to carry additional metadata needed to produce and maintain the EDI structure for SCRIPT. These will be refined over the next few months. A first pass was completed of the Domain Analysis Model (DAM) based on the concepts identified within the reverse-engineered SCRIPT 10.6 standard. This DAM will be expanded to include the artifacts for the other standards and then be used to forward-engineer both the EDI and XML implementation guides, as well as the Data Dictionary and External Code List.
- The **Pharmacy Transport Task Group** completed a DERF adopting the NCPDP Connectivity Standard Implementation Guide for the CAQH CORE Connectivity Rule Version 1.0, including new data elements and ECL values. The group will await the CORE Phase III Connectivity subgroup decision (expected to convene before year end) on adopting the NCPDP proposed XML Schema for payload type as well as other NCPDP transactions.
- The **Education/Legislation and Regulations Task Group** drafted a revised scope and goals and created the Legislation and Regulations Research Process which defines the work group actions, MC task group actions and the Standardization co chairs actions on Legislative/Regulatory Activity. These were approved by MC.
- The **Safe Use Processing (FDA REMS) Task Group** wrote a response to the FDA with NCPDP recommendations for a standard format to submit REMS. The docket is closed, and many responses were. The TG is investigating whether to develop a new standard or use an existing standard.
- The **Federal Medication Terminologies Task Group** submitted a DERF that was included in an August 2009 ballot. The task group was disbanded.

New Business:

- The attendees received daily Work Group recaps.
- The New Project Development Form 033 requesting the creation of a new standard format for reporting Health Plan Rx claim information as required by state law. The Post Adjudication Standard format was suggested as a possible base for the standard. This request was approved with the recommendation to the Standardization Co-Chairs that it be moved under the existing Post Adjudication Standard Task Group in WG1.
- DSMO Change Requests were reviewed:
  - CR 1080 requesting use of the 835 for providers to return money to payers was reviewed by WG45. This request was disapproved by WG45 and MC. NCPDP recommends that DSMO 1080 be denied because the current use of the 835 was intended from the payer to the provider; it was not built for this reversed exchange. A new transaction would need to be developed.
  - CR 1085 asks that a recommendation be made to NCVHS to adopt as HIPAA required transactions the ASC X12 acknowledgement transactions using version 005010:
    - ASC X12 999 Acknowledgement transaction using Technical Report type 3 (document number: 005010X231) for implementation specifications.
    - ASC X12 277 Claim Acknowledgement (277CA) transaction using Technical Report type 3 (document number: 005010X214) for implementation specifications.
    - ASC X12 TA1 Acknowledgement Segment (document number: 005010X231 Appendix C.1)

WG45 with MC concurrence will ask for an extension in order to allow task group review of this request.

- CR 1088 asks to include qualifier for 'state withholding' - SW in the 835 Summary PLB03-1 listing of values/qualifiers. WG45 with MC concurrence will ask for an extension in order to allow task group review of this request.
- An NCPDP 2010 Ballot Processing Overview was given
- A MC Modeling and Methodology Presentation was given that focused on the business benefits