

## NCPDP Active Task Groups

Margaret Weiker	Kitty Krempin	Terry Fortin	Paul Wilson	Leslie Carr	Teresa Strickland
WG1 Telecommunication	WG7 Manufacturer and Associated Trading Partner Transactions Standards	WG2 Product Identification	WG10 Professional Pharmacy Services	WG45 External Standards Assessment, Harmonization and Implementation Guidance	WG11 ePrescribing and Related Transactions
	WG9 Government Programs	WG18 Specialty Pharmacy	WG16 Property and Casualty/Workers' Compensation		WG14 Long Term Post Acute Care (LTPAC)
		MC Maintenance and Control			

NCPDP Standards Development Liaisons: The liaisons facilitate the work groups shown except where **\*noted** within the task group listing.

**Staff Contact Information:** Patsy McElroy

**To Join a Task Group**

1. Go to NCPDP Collaborative Workspace <http://dms.ncdp.org/>
2. Create User Account or Sign In
3. Update User Profile to Join Task Groups

Active Task Group and Sub Task Group Count: 87

Task Group	Work Group	Task Group Leader and Contact Information
<p><b>Benefit Integration Task Group</b>  <i>This task group is developing a standard for exchange of accumulator dollars in an effort to maintain a total accumulator amount that is combined of various benefit types (e.g. Medical, Pharmacy).</i></p>	WG1	<p>Harry Ram Express Scripts</p> <p>Qun "Chin" Zhu MedImpact Healthcare Systems, Inc.</p> <p>Richard A. Jennejahn Excellus Rx</p> <p><b>*Paul Wilson-liaison</b></p>
<p><b>Clinical and Safety Edits Task Group</b>  <i>This task group will coordinate with WG9 Medicare D FAQ, WG9 PDMP, WG1 FAQ, WG10 Professional Practices, WG11 SCRIPT Implementation Recommendations and WG14 LTPAC Current Billing Issues and any other task groups or sub-task groups that may be impacted to draft the applicable recommendations that support harmonization of the appropriate clinical processes and interoperability across the standards to:</i></p> <ol style="list-style-type: none"> <li>1. <i>Draft guidance as to which reject codes, claim level point of service overrides, and other data elements should be used to promote standardization with the implementation of clinical limitations, such as dose, dispensed quantity, days supply, or morphine milligram equivalent restrictions, etc.</i></li> <li>2. <i>Draft and/or review applicable DERFs to support the necessary fields and codes set values (e.g. DUR Reason for Service Code, Professional Service Code and Result of Service Codes) within the necessary NCPDP standards (e.g. Telecommunication, SCRIPT,</i></li> </ol>	WG1	<p>Kelley Vaughan MedImpact Healthcare Systems, Inc.</p> <p>Leann Lewis PDX-NHIN</p> <p>Stephanie Denbow Express Scripts</p> <p><b>*Leslie Carr-liaison</b></p>

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<i>RTPB, etc.) required for standardization of clinical safety edits and justification of care based on the patient's condition and treatment plan.</i>		
<b>Compound Task Group</b> <i>This task group will develop solutions and recommendations for the correct billing and adjudication of compound claims. This task group will coordinate with other appropriate task groups.</i>	WG1	Nancy Bridgman Remedi Senior Care  Andrea Kent CoverMyMeds, LLC  Michelle Wong Pharmetika  <b>*Leslie Carr-liaison</b>
<b>Coordination of Benefits (COB) Task Group</b> <i>To answer questions and provide clarification to coordination of benefits processing which may be published in the Version D Editorial document or future standards.</i>	WG1	Louise Gustafson ProCare RX  JoAnn Landry CVS Health  <b>*Leslie Carr-liaison</b>
<b>Definition of a Valid Prescriber Task Group</b> <i>This task group provides guidance on what is a valid prescriber for use in standards.</i>	WG1	Sharon Gruttadauria CVS Health  Patricia Pimentel CVS Health  <b>*Leslie Carr-liaison</b>
<b>Eligibility Verification Enhancements Task Group</b> <i>This task group is exploring enhancements to the Eligibility Verification Transaction, specifically for Medicare Part D needs.</i>	WG1	Mary Perez MedImpact Healthcare Systems, Inc.  Nancy Bridgman Remedi Senior Care
<b>Expanded Dollar Fields Task Group</b> <i>This task group will evaluate each dollar field in the Telecommunication Standard to determine if the field needs to be expanded to accommodate high dollar medications. Upstream and downstream NCPDP standards will also be evaluated. The task group will also work to determine if and how these high dollar medications can be accommodated in the current (D.O) and future standards (F2 and beyond).</i>	WG1	Kelley Vaughan MedImpact Healthcare Systems, Inc.  Heather Graham CVS Health  Roma Roy McKesson Pharmacy Systems  Stephanie Denbow Express Scripts
<b>Information Reporting Problems Task Group</b> <i>This task group addresses processing problems with the Information Reporting transactions – specifically 4Rx Data (BIN, PCN, Group, Cardholder ID) used in processing for Medicare and supplemental payers).</i>	WG1	Mary Perez MedImpact Healthcare Systems, Inc.  Jamie Rush Express Scripts  Yvette Zawisza Aetna, Inc.  <b>*Leslie Carr-liaison</b>
<b>Pharmacy Locator for Backordered Medication</b> <i>This task group will create a way for pharmacies in a given geographical radius to seek backordered medications for patients and provide a way for</i>	WG1	Karen Guinan Wegmans

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<p><i>rejects for duplicate paid claims to show pharmacy and phone number of filling pharmacy.</i></p>		<p>Steve Clark Wellstar Pharmacy Network</p> <p><b>*Leslie Carr-liaison</b></p>
<p><b>Post Adjudication Task Group</b> <i>This task group is responsible for the reporting of payment and claim information after adjudication. They provide expertise on the Post Adjudication, Uniform Payer Claim, and Retiree Drug Subsidy Standards.</i></p>	WG1	<p>Annette Gabel ACAG Consulting, LLC</p>
<p><b>Point of Sale Rebate Review Task Group</b> <i>This task group will review relevant NCPDP standards for ways to effectively communicate details to facilitate point of sale rebates processing. The task group will identify and maintain a list of potential impacts to the NCPDP standards against which proposed use cases should be evaluated. The task group will monitor legislation/regulation for any new requirements. The task group will engage and coordinate with other NCPDP work groups and task groups as appropriate.</i></p>	WG1	<p>Leann Lewis PDX-NHIN</p> <p>Jennifer Ausbrook CVS Health</p> <p>Hannah Cardosi Express Scripts</p> <p><b>*Kitty Krempin - liaison</b></p>
<p><b>Standardized Subrogation Task Group</b> <i>This task group will analyze the Medicaid Subrogation Standard and enhancements for subrogation use by commercial payers for one standard encompassing both uses. WG1 and WG9 participants are encouraged to join.</i></p>	WG1, WG9	<p>Louise Gustafson ProCare RX</p> <p>Robin Reed CVS Health</p> <p>Monique Irmen RelayHealth/McKesson</p>
<p><b>Telecommunication Agility Next Generation (TANG) Task Group</b> <i>This task group will recommend structural changes to the Telecommunication Standard that accelerate the ability of stakeholders to respond to the needs of the marketplace. The task group will provide a high-level roadmap that transitions the relevant transactions towards those structural changes. Initially, its scope will be limited to the Claim Billing and Eligibility transactions, effective after the next HIPAA named version.</i></p>	WG1	<p>Heather Graham CVS Health</p> <p>Joe Kirn Walmart</p> <p>Howard Sragow Express Scripts</p> <p><b>*Terry Fortin and Teresa Strickland-liaisons</b></p>

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<p><b>Telecommunication FAQ Task Group</b>  <i>This task group reviews questions received about implementation of the Telecommunication or Batch Standards. The task group builds responses to the questions, which are then reviewed with WG1 Telecommunication and may be published in the Version D Editorial document or future standards.</i></p> <p><b>FAQ Controlled Substance Guidance Update Sub-Task Group</b>  <i>This task group will work to identify and draft guidance on changes needed to the Telecommunication Standards due to the Quantity Prescribed Field as well as changes in dispensing allowed under the Comprehensive Addiction Recovery Act (CARA).</i></p>	WG1	<p>Kevin Crowe            QS/1 Data Systems</p> <p>Kathy Knapp            SS&amp;C Health</p> <p>Michael Fitzgerald            CVS Health</p> <p>Monique Irmen            RelayHealth/McKesson</p> <p>Noelle Hardin            MedImpact Healthcare Systems, Inc.</p> <p><b>*Terry Fortin- FAQ Controlled Substance Guidance Update Sub-Task Group liaison</b></p>
<p><b>Usage of Submission Clarification Codes Task Group</b>  <i>This task group will evaluate the usage and code values associated with the use of the SCC field and streamline the process.</i></p>	WG1	<p>Nancy Bridgman            Remedi Senior Care</p> <p>Yvette Zawisza            Aetna, Inc.</p> <p>Jon Paladino            Prime Therapeutics, LLC</p> <p><b>*Leslie Carr-liaison</b></p>
<p><b>Application of BUS Clarification</b>  <i>This task group will identify the rationale used to determine the billing unit from past QUIC forms/products reviewed and the causes that lead to product reviews to capture/document the rationale and the process followed. They will also provide updates as appropriate to the NCPDP Billing Unit Decision Tree.</i></p>	WG2	<p>Melva Chavoya            Walgreen Co.</p>
<p><b>Naming Standards for Drugs, Biologics, and Biosimilars Task Group</b>  <i>This task group will involve a wide spectrum of industry input to formulate recommendations to standardize best naming practices for all new drug entities, biologics, and biosimilars to allow for distinguishable drug names while preserving traditional naming concepts.</i></p>	WG2	<p>Gerry McEvoy            Independent</p> <p>Alan Ryan            Sandoz</p> <p>Linda Schock            Coherus Biosciences</p>
<p><b>Outsourcing Facility Task Group</b>  <i>This task group will evaluate the situation where 503B products currently have an SPL marketing category of 'un-approved drug other' and determine if a suggestion should be sent to the FDA to create a separate SPL marketing category for Outsourcing Facility products.</i></p>	WG2	<p>Robert Nickell            Nubtratori RX</p> <p><b>*Paul Wilson-liaison</b></p>
<p><b>Product Review and Billing Unit Exception Task Group</b>  <i>This task group will review and analyze all drugs that are exceptions to the Billing Unit Standard (BUS) to determine how each should be categorized for billing and document within the BUS. Package Size discrepancies among the compendia will also be addressed. They will request submission of QUIC forms when appropriate and will review all QUIC Forms received prior to the WG meetings.</i></p>	WG2	<p>Anne Johnston            Express Scripts</p> <p>David Schuetz            Pharmacy Healthcare Solutions, Inc. (PHSI)</p>

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<p><b>Manufacturer Rebate Standard Task Group</b>  <i>This task group is responsible for maintaining the Manufacturer Rebate Standard and the Manufacturer Rebate Reference Guides.</i></p> <p><b>Manufacturer Rebate Standard Review for State Reporting Sub-Task Group</b>  <i>This sub-task group will (1) review the Manufacturer Rebate flat files (Utilization, Plan, Market Basket, Reconciliation and Formulary Description) for CMS compliance, utilization and accessibility and (2) incorporate requests for efficiencies, i.e., electronic payments.</i></p>	WG7	<p>Jeff Albright Model N, Inc.</p> <p>Suzanne Kain IQVIA</p> <p>Terry Neal CVS Health</p> <p>Andrea Kent CoverMyMeds, LLC</p>
<p><b>Medical Rebate Task Group</b>  <i>This task group maintains the Medical Rebate Data Submission Standard.</i></p>	WG7	Suzanne Kain IQVIA
<p><b>340B Task Group</b>  <i>This task group develops 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.</i></p>	WG9	<p>John Lynch, III CVS Health</p> <p>Sarah Sabetta Magellan Rx Management</p>
<p><b>Coordination of Benefits Contractor (COBC)/Benefits Coordination &amp; Recovery Center (BCRC) Task Group</b>  <i>This task group is a central point of contact in the industry for communication and problem-solving around challenges faced with Medicare Part D COB Other Health Information (OHI) data as well as a resource for submitting questions to CMS regarding clarification of the Benefits Coordination Recovery Center (BCRC) OHI record processes or recommendations for OHI process improvements.</i></p>	WG9	<p>Jamie Rush Express Scripts</p> <p>Steve Zlotkus MedImpact Healthcare Systems, Inc.</p> <p>Mary Perez MedImpact Healthcare Systems, Inc.</p>
<p><b>Government Programs Encounter Reporting Standards Task Group</b>  <i>The task group will review existing standards (Post Adjudication and Batch) and compare against the actual state requirements for Medicaid encounter data.</i></p>	WG9	<p>Krista Ward CareSource</p> <p>Lori Siuta OptumRx</p> <p>Rick Jennejahn Excellus Health Plan</p>
<p><b>Hospice Task Group</b>  <i>This task group identifies and proposes solutions to issues associated with the recognition and verification of Medicare Part A Hospice eligibility and Part D processing of possible Medicare Part A Hospice claims both point of sale and retrospectively.</i></p>	WG9	<p>Nancy Bridgman Remedi SeniorCare</p> <p>Mary Perez MedImpact Healthcare Systems, Inc.</p>
<p><b>Medicaid Frequently Asked Questions</b>  <i>This task group addresses questions that warrant consistent application of Medicaid policies across the industry where claims or other NCPDP transactions are involved (e.g., Medicaid Mega rule, Provider Enrollment, Implementation of the next HIPAA version of NCPDP standards, etc.).</i></p> <p><b>Medicaid Formulary Standard File Layout Sub-Task Group</b>  <i>This task group will develop a NCPDP standard file layout for State Medicaid agencies to use when providing their Medicaid formularies to Managed Care Organizations in markets where the State Medicaid agency mandates the State's formulary be used in Managed Care.</i></p>	WG9	<p>Krista Ward CareSource</p> <p>Patricia Pimentel CVS Health</p> <p>Anju Wilfred Express Scripts</p> <p>Bruce Wilkinson BenMedica</p>

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<p><b>Medicare Financial Information Reporting Task Group</b>  <i>The Financial Information Reporting is a process whereby a patient, under one plan sponsor, has changed from one benefit plan PBM to another benefit plan PBM and point-in-time financial information is moved from the previous PBM to the new PBM. The task group meets to discuss questions, guidance as it affects the standard. CMS questions will be addressed by CMS.</i></p>	WG9	<p>Annette Gabel ACAG Consulting</p> <p>Monique Irmen RelayHealth/McKesson</p>
<p><b>Medicare Part D FAQ Task Group</b>  <i>This task group reviews questions related to consistent application of Medicare Part D policy where claims or other applicable transactions are involved. When questions involve the Telecommunication Standard, the question and response will be sent to the Telecommunication FAQ Task Group for approval. When questions involve the coordination of benefits, the question and response will be sent to the Coordination of Benefits (COB) Task Group for approval.</i></p>	WG9	<p>Monique Irmen RelayHealth/McKesson</p> <p>Annette Gabel ACAG Consulting</p>
<p><b>Medicare Part D Multi-Payer Reconciliation Task Group</b>  <i>This task group will develop file layouts and documentation to assist with the process that occurs when transferring information between payers when a Part D plan adjusts a claim that impacts an Information Reporting transaction (Nx) from a supplemental payer and the method for reporting these changes to CMS. This task group will work with other task groups where these standards overlap.</i></p>	WG9	<p>Jamie Rush Express Scripts</p> <p>Monique Irmen RelayHealth/McKesson</p> <p>Bryan Esp MedImpact Healthcare Systems, Inc.</p>
<p><b>Medicare Prescription Drug Event (PDE) Task Group</b>  <i>This task group reviews PDE questions, recommends solutions based on CMS guidance or refers questions to CMS when appropriate.</i></p>	WG9	<p>Rikki Pham Prime Therapeutics</p> <p>Tammy Owens Humana Pharmacy Solutions</p> <p>Aimee Hannan Prime Therapeutics</p>
<p><b>Medicare Standardized Fraud, Waste and Abuse Training Attestation Task Group</b>  <i>This task group will standardize the CMS required Fraud, Waste and Abuse attestation process.</i></p>	WG9	<p>Craig DiNapoli, R.Ph. Innovatix, LLC</p>
<p><b>Prescription Drug Monitoring Programs Task Group</b>  <i>This task group will</i></p> <ol style="list-style-type: none"> <li>1. <i>Establish industry focus group for implementation of innovative, strategic and streamlined electronic solutions to reduce prescription drug abuse and improve patient safety.</i></li> <li>2. <i>Monitor ONC initiatives for PDMP interoperability</i></li> <li>3. <i>Maintain state PDMP tracking document</i></li> <li>4. <i>Collaborate with other NCPDP task groups in developing enhancements to the NCPDP standards to support the reporting, requesting and responding of PDMP prescription data.</i></li> </ol>	WG9	<p>Charlie Oltman Rx Integrated Solutions, LLC</p> <p>Karen Guinan Wegmans Food Market, Inc.</p> <p>Charlie Painter Albertsons Companies, Inc.</p> <p>Leann Lewis PDX-NHIN</p>
<p><b>Electronic Referral Task Group</b>  <i>The purpose is 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.</i></p>	WG10	<p>Pamela Schweitzer RADM (retired)</p> <p>Michele Davidson Walgreen Co.</p> <p>Mike Menkhaus Pro Rx Consulting</p> <p>Afton Wagner AMCP</p>

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<p><b>Identification of Social Determinants of Health Task Group</b>  <i>This task group will provide recommendations in terms of the information related to Social Determinants of Health (SDoH) used and collected by pharmacists and pharmacies so NCPDP can begin to work with HL7® to determine the content and rules around the collections and sharing SDoH data.</i></p>	WG10	<p>Lisa Schwartz National Community Pharmacists Association (NCPA)</p> <p>Ryan Perry Pharmetika</p> <p>Shelly Spiro Pharmacy HIT Collaborative</p> <p><b>*Kitty Krempin - liaison</b></p>
<p><b>mL White Paper Task Group</b>  <i>This task group will revise the initial mL white paper to reflect research and environmental changes surrounding use of mL for volumetric measure in medication orders, ePrescribing, and patient instructions and prescription labeling.</i></p>	WG10	<p>Gerald McEvoy Consultant</p> <p><b>*Leslie Carr - liaison</b></p>
<p><b>MTM and Pharmacist Clinical Services Task Group</b>  <i>This task group is working with pharmacy professionals and other stakeholder organizations, to enable adoption, enhance existing, or develop new standards for electronic communications amongst and between patients, payers and providers related to medication therapy management and other clinical services provided by pharmacists.</i></p>	WG10	<p>Shelly Spiro Pharmacy HIT Collaborative</p> <p>Adeeti Jindal CoverMyMeds</p> <p>Kelli Fordahl Cigna</p> <p><b>*Kitty Krempin - liaison</b></p>
<p><b>Universal Medication Schedule White Paper Task Group</b>  <i>This task group will update the white paper encompassing the proposal for a universal medication schedule as a best practice for enabling patient understanding and compliance with medication timing.</i></p>	WG10	<p>Laura Topor Granada Health</p>
<p><b>Dispensed Medication Reporting Task Group</b>  <i>This task group will develop a reporting standard based upon the SCRIPT related transactions.</i></p>	WG11	<p>Michele Davidson Walgreen Co.</p> <p>Tim Stollendorf Epic</p>
<p><b>ePrescribing Regulatory Issues Task Group</b>  <i>This task group will work with Legislative and Regulatory agencies to resolve inconsistencies with proposed or passed legislation/regulation and the SCRIPT Standard.</i></p>	WG11	<p>Ken Whittemore Surescripts, LLC</p> <p>Mike Menkhaus Pro Rx Consulting</p> <p>Tim Stollendorf Epic</p> <p>Tolu Akinwale Walgreen Co.</p> <p><b>*Paul Wilson - liaison</b></p>
<p><b>Formulary And Benefit Task Group</b>  <i>This task group supports the NCPDP Formulary And Benefit Standard and enhancements for the industry's use.</i></p>	WG11	<p>Bruce Wilkinson BenMedica</p>

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<p><b>Implementation of Structured and Codified Sig Task Group</b>  <i>The purpose of this task group is to develop tools and/or guidance to assist and promote the implementation of the Structured Sig in SCRIPT. Implementation may occur incrementally and may vary depending on the sending or receiving care setting. The guidance may include analysis and XML support and recommendations for the use of SNOMED. The task group will prioritize work based on prevalence of sigs currently being used and the impact on patient safety. The task group may identify and bring forward recommended changes to the Standard to support broader adoption.</i></p>	WG11	<p>Laura Topor Granada Health</p> <p>Mike Menkhaus Pro Rx Consulting</p> <p>Tatiana Cole PointClickCare</p>
<p><b>Prior Authorization Workflow-to-Transactions Task Group</b>  <i>This task group has facilitated industry analysis of the workflow and processes involved in prior authorization in order to suggest improvements. They have examined prior authorization requirements relayed to prescribers through the ePrescribing process through claims processing. They have suggested workflow improvements. They have brought forward electronic prior authorization transactions for the SCRIPT Standard. They are working on enhancements to the electronic prior authorization transactions.</i></p>	WG11	<p>Jocelyn Keagan Point of Care Partners</p> <p>Kim Diehl-Boyd CoverMyMeds, LLC</p>
<p><b>REMS Workflow to Transaction Task Group</b>  <i>This task group will create comments on the REMS Platform document once it is published and to identify gaps in the current standards.</i></p>	WG11	<p>Michele Davidson Walgreen Co.</p> <p>Mike Menkhaus Pro Rx Consulting</p>
<p><b>RxFill Task Group</b>  <i>This task group will review the RxFill message and provide additional guidance and enhancements to meet the needs of the industry.</i></p>	WG11/ WG14	<p>Mike Menkhaus Pro Rx Consulting</p> <p>Tatiana Cole PointClickCare</p>



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<p><b>SCRIPT Implementation Recommendations (SIR) Task Group</b>  <i>The task group will provide guidance to the industry for best practices in the implementation and use of electronic prescribing transactions. In addition, assure that message recipients receive all of the information required by regulations or clinical needs in all electronic prescribing messages.</i></p> <p><b>Alternate Response Sub-Task Group</b>  <i>The sub-task group will look at scenarios of when a request is not being address and/or deferred.</i></p> <p><b>Allergy and Adverse Event Sub-Task Group</b>  <i>The sub-task group will update the current guidance on the AllergyOrAdverseEvent element to create a common understanding on how to best utilize this element in V2017071. It will also evaluate the best way to transmit allergy or adverse events information in future standards.</i></p> <p><b>CancelRx Sub-Task Group</b>  <i>The sub-task group will review the CancelRx messages and provide guidance and best practices for their use.</i></p> <p><b>RxChange Guidance Review Sub-Task Group</b>  <i>The sub-task group will review the recommendations document and provide guidance for SCRIPT Version 2017071.</i></p>	WG11	<p>Mike Menkhaus Pro Rx Consulting</p> <p>Leann Lewis PDX-NHIN</p> <p>Ian VanKirk Allscripts</p> <p>Mike Menkhaus Pro Rx Consulting</p> <p>Samantha Ramberg Surescripts, LLC</p> <p>Mike Menkhaus Pro Rx Consulting</p> <p>Kori Eastman Surescripts, LLC</p> <p>Mike Menkhaus Pro Rx Consulting</p> <p>Purvi Mody CVSHealth</p> <p>Terri Brengman Surescripts</p> <p>Mike Menkhaus Pro Rx Consulting</p>
<p><b>SCRIPT Managed Updates Schedule Task Group</b>  <i>This task group will review the process to update the NCPDP External Code List (ECL) and XML schema based on concerns received and bring forward recommendations to the WG.</i></p>	WG11	<p>Ashley Maples Express Scripts</p> <p>Frank McKinney Frank McKinney Group, LLC</p> <p>Samantha Ramberg Surescripts, LLC</p>
<p><b>X12 270/271 version 7030 Review Task Group</b>  <i>This task group will review the X12 270/271 modifications made to the standard and provide comments if necessary.</i></p>	WG11	<p>Mary Perez MedImpact Healthcare Systems, Inc.</p> <p>Kenneth Foster Surescripts, LLC</p>
<p><b>XML Task Group</b>  <i>This task group provides review and guidance on the XML standards for NCPDP.</i></p>	WG11	<p>Tim McNeil Surescripts, LLC</p>
<p><b>Consultant Pharmacist Interoperability Task Group</b>  <i>This task group will facilitate standardized messages for consultant pharmacist software, facility EHR and pharmacy dispensing systems.</i></p>	WG14	<p>Gary Schoettmer NetRx, LLC</p> <p>Susan Rhodus GeriMed</p>

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<p><b>Long Term and Post Acute Care Billing Issues Task Group</b>  <i>This task group is working to address billing issues within LTC, such as post consumption, split billing, infusion billing after change in status, place of service codes, coordination of benefits, infusion therapy, compounding, Best Available Evidence, etc.</i></p>	WG14	<p>Kirsten Mello PharMerica</p> <p>Michael Fitzgerald CVS Health</p> <p>Nancy Bridgman Remedi SeniorCare</p>
<p><b>Long Term and Post Acute Care Electronic Communications Synchronization Opportunity Review (INSYNC) Task Group</b>  <i>This task group will provide synchronized guidance for the various LTPAC stakeholders using multiple standards for the purpose of interoperability. A collaborative effort to resolve some of the gaps and overlaps in the LTPAC industry that exist between various standards such as; HL7 and SCRIPT. Additionally, evaluate the need for guidance provided to LTPAC industry using solutions such as a transition of care document or other electronic communication. Harmonize with other LTPAC task groups in coordination of care guidance. Invite industry leaders to provide insights on the various projects promoting interoperability in LTPAC.</i></p>	WG14	<p>Deanna Cox PointClickCare</p> <p>Kori Eastman Surescripts, LLC</p> <p>Sonya Oetting PrescribersConnection, LLC</p> <p>Tatiana Cole PointClickCare</p>
<p><b>Long Term and Post Acute Care ePrescribing Task Group</b>  <i>This task group is advancing the adoption of ePrescribing in the Long-Term Care, Post-Acute Care and Hospice setting. Enhance the LTPAC ePrescribing process model to include three or more care providers at a minimum; the care providers to be included are the prescriber, the facility, and the pharmacy.</i></p> <p><b>Multi Communication Sub-Task Group</b>  <i>The sub-task group will provide guidance for multiparty communications within LTPAC settings using the current V2017071 SCRIPT Standard. Enhance the LTPAC ePrescribing process model to include three or more care providers at a minimum; the care providers to be included are the prescriber, the facility, and the pharmacy.</i></p> <p><b>Recertification Sub-Task Group</b>  <i>The sub-task group will review the Recertification message and related specification to provide additional guidance to meet the needs of the industry.</i></p>	WG14 With WG11	<p>Tatiana Cole PointClickCare</p> <p>Sonya Oetting PrescribersConnection, LLC</p> <p>Gary Schoettmer NetRx, LLC</p> <p>Kori Eastman Surescripts, LLC</p> <p>Kori Eastman Surescripts, LLC</p> <p>Sonya Oetting PrescribersConnection, LLC</p>
<p><b>Standardized Medication Profile Task Group</b>  <i>This joint WG14/WG10 task group will provide recommendations in terms of the information that goes into a standardized medication profile so NCPDP can begin to work with HL7® to determine the content and rules around a standardized medication profile.</i></p>	WG14 With WG10	<p>Shelly Spiro Pharmacy HIT Collaborative</p> <p><b>*Kitty Krempin - liaison</b></p>
<p><b>Future Development Needs for P&amp;C/WC Task Group</b>  <i>This task group will work across SDOs to address changes needed for adoption of the next versions of standards.</i></p>	WG16	<p>Mary Lynam SS&amp;C Health</p> <p>Jan Welch Express Scripts</p>
<p><b>P&amp;C/WC Monitoring, Billing and Education Task Group</b>  <i>This task group monitors and evaluates proposed public policies and billing and reporting requirements that impact the provision of pharmacy services related to Property and Casualty/Worker's Compensation. The task group also maintains and updates electronic and paper standards for the billing of Property and Casualty/Workers' Compensation pharmacy services.</i></p>	WG16	<p>Adam Fowler Optum</p>

Task Group	Work Group	Task Group Leader and Contact Information
<p><b>Benefit Coverage Identification Task Group</b>  <i>This task group was created to address the areas of opportunity related to determining if coverage is through the medical or pharmacy benefit.</i></p>	WG18	<p>Harold Barnes Shields Health Solutions</p> <p>Jason Reed CenterX</p>
<p><b>Facilitating Access To Specialty Products Task Group</b>  <i>The goal of this task group is to improve communication and access to information around specialty and/or limit distribution products from sources other than the payer. The task group will determine a course of action for each area of opportunity:</i></p> <ul style="list-style-type: none"> <li>• Specialty Product Distribution</li> <li>• Hub Services</li> </ul>	WG18	<p>Amy Konak Onco360 Oncology Pharmacy</p> <p>Elizabeth Gibson AmerisourceBergen   Lash Group</p> <p><b>*Teresa Strickland-liaison</b></p>
<p><b>Patient Consent Task Group</b>  <i>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).</i></p>	WG18	<p>Tammy Baxter Novocure</p> <p>Amy Konak Onco360 Oncology Pharmacy</p> <p>Sharon Gruttadauria CVS Health</p>
<p><b>Specialty Pharmacy Data Exchange Task Group</b>  <i>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.</i></p>	WG18	<p>Bryan Odegard NDEON Consulting</p> <p>Laura Topor Granada Health</p> <p><b>*Leslie Carr - Co-liaison</b></p>
<p><b>Specialty Requirements for ePrescribing Task Group</b>  <i>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 will be communicated between the prescriber's office and other entities using FHIR® messages.</i>  <i>The task group will address problem solving for specialty prescription processing needs. Electronic prior authorization requirements and claim processing are out of scope.</i></p>	WG18	<p>Michele Kidd Accredo Health</p> <p>Maggie Buchinger Surescripts</p> <p><b>*Paul Wilson - liaison</b></p>
<p><b>Stakeholder Outreach and Education Task Group</b>  <i>This task group will identify and provide outreach to Specialty Pharmacy Stakeholders in an effort to promote engagement within Specialty WG 18. Educational opportunities will be identified and facilitated based on input from stakeholders.</i></p>	WG18	<p>Michelle Wong Pharmetika</p> <p><b>*Paul Wilson - liaison</b></p>
<p><b>834/835 FAQ Task Group</b>  <i>This task group reviews FAQs received in regards to the X12 834 and 835 and will draft responses to new issues needing to be addressed by WG45.</i></p>	WG45	<p>Leann Lewis PDX-NHIN</p>
<p><b>Document Revisions Task Group</b>  <i>This task group is responsible for maintenance of various ASC X12 standard guidance which WG45 supports for NCPDP members and/or public guidance published on NCPDP.org.</i></p>	WG45	<p>Mary Lynam SS&amp;C Health</p>

Task Group	Work Group	Task Group Leader and Contact Information
<b>DSMO Change Request Task Group</b> <i>This task group reviews the DSMO Change Requests assigned to Work Group 45 and prepares responses to be presented to Work Group 45 for approval.</i>	WG45	Amy Craycraft Wal-mart Stores Inc.  Nancy Bridgman Remedi SeniorCare Pharmacy
<b>Pharmacy and/or Combination ID Card Implementation Guide Review Task Group</b> <i>This task group is responsible for maintaining the Pharmacy and/or Combination ID Card Implementation Guide.</i>	WG45	Alan Gardner RxResults, LLC
<b>API Task Group</b> <i>This task group will review the NCPDP Connectivity Guide and update to include information about APIs where appropriate.</i>	MC	Scott Robertson Kaiser Permanente  Joe Kirn Walmart  <b>*Paul Wilson-liaison</b>
<b>Definition and Use of Quantity and Day Supply Task Group</b> <i>This task group will evaluate the current definitions and use of the data elements related to quantity and days supply used throughout the NCPDP Standards. Where applicable, the task group will propose modifications to better align with industry use of the data elements and promote harmonization across the Standards.</i>	MC	Sharon Gibson Express Scripts  Karen Guinan Wegmans Food Market, Inc.  Mary Perez MedImpact Healthcare Systems, Inc.
<b>Digital Therapeutics Task Group</b> <i>This task group will evaluate and identify the existing NCPDP standards that will fully or partially support DTx participant data exchange and propose changes to existing standards or alternatively develop new standards to support DTx requirements. Through the task group work, electronic data exchange between DTx trading partners and patient access to digital therapeutics will be supported.</i>	MC	Cathy Graeff Consultant  Jeff Abraham Akili Interactive  Andy Molnar Cognoa
<b>ECL Task Group</b> <i>This task group will be responsible for cleaning up ECL values, enhancing the web-enabled ECL, providing guidance on ECL values, and harmonizing the ECL companion fields across different NCPDP Standards. The task group will also be available to review modifications to the ECL to promote harmonization of values and to prevent duplication.</i>	MC	Tara DeCosta CVS Health  Mary Perez MedImpact Healthcare Systems, Inc.
<b>Education, Legislation and Regulations Task Group</b> <i>This task group provides legislative, regulatory, policy, and court decisions updates which may affect the pharmacy industry.</i>	MC	Mary Lynam SS&C Health  Michele Davidson Walgreen Co.  <b>*Paul Wilson-liaison</b>
<b>Emergency Preparedness Task Group</b> <i>This task group was re-established to update the NCPDP Emergency Preparedness Information Guide.</i>	MC	Charlie Oltman Rx Integrated Solutions, LLC  Michele Davidson Walgreen Co. Anne Johnston Express Scripts  <b>*Paul Wilson-liaison</b>

Task Group	Work Group	Task Group Leader and Contact Information
<p><b>Gender Transition Task Group</b>  <i>This task group will review standards that contain sex/gender fields and ensure they accommodate individuals who are transitioning or have transitioned genders. We will be looking at all other standards to ensure we are harmonizing with those standards. Our scope is to review any standard that contains a sex/gender code that would be used in a NCPDP transaction.</i></p>	MC	<p>Andrea Kent CoverMyMeds, LLC</p> <p>Ryan Sunderman HealthPartners, Inc.</p> <p>Kelli Fordahl Cigna</p> <p><b>*Paul Wilson-liaison</b></p>
<p><b>Harmonization Formation Task Group</b>  <i>This task group will utilize the guidance provided through the Harmonization presentations given to the Work Groups at the May 2018 meetings to develop a set of recommendations for review by the Maintenance and Control Work Group. The recommendations will support the formation of a task group or committee and/or provide suggestions for task assignments to existing bodies to implement the needed harmonization.</i></p>	MC	<p>Sharon Gruttadauria CVS Health</p> <p>Patricia Pimentel CVS Health</p>
<p><b>NDC Scarcity Task Group</b>  <i>This task group will collaborate with the FDA and all stakeholders to create a short-term plan to conserve labeler codes and NDCs and a long-term plan for a structure change to the NDC.</i></p>	MC	<p>Anne Johnston Express Scripts</p> <p>Jennifer Nix IBM Watson Health</p>
<p><b>Patient Identification Task Group</b>  <i>This task group will address Standards related action items from the January 2020 Universal Patient Identifier (UPI) Stakeholder Action Group (SAG) meeting.</i></p>	MC	<p>Michele Davidson Walgreen Co.</p> <p>Kelli Fordahl Cigna</p> <p>Howard Sragow Express Scripts</p> <p>Darren Townzen, R.Ph, MBA Wal-Mart Stores, Inc.</p>

Task Group	Work Group	Task Group Leader and Contact Information
<p><b>Real-Time Prescription Benefit Standard Task Group</b>  <i>This task group will develop two standard formats and one implementation guide for the real-time exchange of data between Providers and processor/PBM/Adjudicators to:</i></p> <ol style="list-style-type: none"> <li>1. <i>Establish patient eligibility, product coverage, and benefit financials for a chosen product and pharmacy, and</i></li> <li>2. <i>Identify coverage restrictions, alternative products, and benefit alternatives when they exist.</i></li> </ol> <p><b>Consumer-Facing RTPB and Price Transparency Sub-Task Group</b>  <i>This sub-task group will define and prioritize the use cases applicable to consumer prescription benefit and price transparency needs. The sub-task group will identify, or develop if needed, a standard format for the real-time exchange of data between entities and a consumer to provide information:</i></p> <ul style="list-style-type: none"> <li>• <i>As it relates to a consumer’s prescription benefit:</i> <ul style="list-style-type: none"> <li>○ <i>Patient’s eligibility status, product coverage, benefit financials and cost-sharing data for a requested product and pharmacy, and</i></li> <li>○ <i>Coverage restrictions, alternative products, both on and off formulary, when available, benefit alternatives and alternative pharmacies when they exist.</i></li> </ul> </li> <li>• <i>As it relates to price transparency:</i> <ul style="list-style-type: none"> <li>○ <i>Available dispensers, price information (e.g. patient out-of-pocket costs) and alternative products.</i></li> </ul> </li> </ul> <p><i>If an existing format is identified as sufficient to support the real-time exchange of data, the sub-task group may write additional guidance to support the consumer-facing RTPB and price transparency use cases defined.</i></p>	MC	<p>Tim McNeil Surescripts, LLC</p> <p>Roger Pinnoneault Gemini Health</p> <p><b>*Teresa Strickland-co-liaison</b></p> <p>Andrea Kent CoverMyMeds, LLC</p> <p>Tricia Lee Rolle Point of Care Partners</p> <p>Kyle Tucker Express Scripts</p>
<p><b>X12 TR3 Comment Coordination Task Group</b>  <i>This task group will coordinate the review and comments for the X12 TR3 guides as they are released for public comment.</i></p>	MC	<p>Stephanie Denbow Express Scripts</p> <p><b>*Margaret Weiker-liaison</b></p>

## NCPDP Inactive Task Groups

Task Group	Work Group	Task Group Leader and Contact Information
<p><b>Point of Sale Patient Specific Denial Notice Task Group - CLOSED FEBRUARY 2020</b></p> <p><i>This task group will recommend solutions to accurately and timely provide individualized communication to the patient of the reason for the denial and the action items necessary to obtain the medication when the claim has rejected. The mechanisms should be global to address different lines of business (commercial, Medicare, Medicaid), methods of patient communication (paper, electronic, etc.) and provide additional information of appeal rights as required by federal and/or state law. The capacities to be created need to meet the requirements applicable to Medicaid payers, including payer-generated individualized written notice issued at the point of sale.</i></p>	WG1	
<p><b>Part D Supplemental Payment Reporting Task Group – CLOSED NOVEMBER 2018</b></p> <p><i>This task group is for Part D plans and supplemental payers to track Information Reporting transaction performance and effectiveness. Need to identify the reports, data elements, frequency, and then report requests to CMS. CMS would need to approve requests with contractors.</i></p>	WG1	
<p><b>Upstream Reporting of Copay Assistance Task Group – CLOSED AUGUST 2018</b></p> <p><i>This task group will explore options for providing a record of payment made by supplemental payers in order for primary/prior payers to maintain accurate accumulator values.</i></p>	WG1	
<p><b>Attachments Task Group – CLOSED FEBRUARY 2017</b></p> <p><i>Explore the use and implementation of attachments within the Telecommunication Standard as defined by the Task Group.</i></p>	WG1	
<p><b>Transaction ID Task Group – CLOSED NOVEMBER 2015</b></p> <p><i>This task group is examining a unique transaction identifier for reversals, for use in duplicate logic, and edited transactions.</i></p>	WG1	
<p><b>Vaccine Services Task Group – CLOSED MAY 2015</b></p> <p><i>This task group has identified some of the barriers slowing the adoption and expansion of vaccine administration services in pharmacy. They developed “best practice” recommendations for vaccine administration services, including pharmacy benefit billing &amp; processing. The task group is working on medical benefit eligibility verification and billing, to assess the impact of vaccine regulatory requirements on pharmacy operations and services, and to develop data communication and process standards supporting the advancement of vaccine administration services by pharmacies and health departments.</i></p>	WG1	
<p><b>Safe Use Processing (FDA REMS) Task Group – CLOSED AUGUST 2014</b></p> <p><i>This task group is on hold pending transaction standard needs based on the Food &amp; Drug Administration and their REMS recommendations impact on pharmacy claims processing.</i></p>	WG1	
<p><b>Service Billing Task Group – CLOSED NOVEMBER 2013</b></p> <p><i>This task group will examine the re-joining of the Service transaction functions into the Claim transaction functions (pre-version D.0 structure) to support the combined processing of product and services.</i></p>	WG1	
<p><b>Demographic Field Length Task Group – CLOSED AUGUST 2012</b></p> <p><i>This task group is taking the recommendations from the MC Demographic Field Length Task Group and bringing forward DERFs to modify the WG1 and WG9 standards appropriately.</i></p>	WG1	
<p><b>Diagnosis Codes Task Group – CLOSED MAY 2012</b></p> <p><i>This task group will review the current values allowed for Diagnosis Codes in NCPDP standards and determine what is needed for use, and whether any subsets of the selected code sets should be cited for use. This task</i></p>	WG1	

<b>Task Group</b>	<b>Work Group</b>	<b>Task Group Leader and Contact Information</b>
<i>group was created based on discussion of DERF 1030.</i>		
<b>4Rx Reporting Spreadsheet to Pharmacies Task Group – CLOSED MAY 2012</b> <i>This task group will create a spreadsheet of payers can send to pharmacies with correct 4Rx information prior to the 04/01/2012 effective date.</i>	WG1	
<b>3% Withholding Task Group – CLOSED FEBRUARY 2012</b> <i>This task group will analyze Section 3402(t) Withholding and % withholding rule for government payments to contractors.</i>	WG1, WG45	
<b>Tax Advantage Task Group – CLOSED FEBRUARY 2012</b> <i>This task group is addressing the standards needs of tax advantage accounts, especially as they affect the pharmacy industry.</i>	WG1	
<b>Information Reporting Transition to Version D.Ø Task Group – CLOSED NOVEMBER 2011</b> <i>This task group discusses the claims conversion to Version D.Ø and this impact to the Information Reporting transactions used for Medicare Part D processing.</i>	WG1	
<b>Patient Location/Patient Residence Task Group – CLOSED MAY 2010</b> <i>This task group is building industry guidance for the consistent use of these fields and their values during the conversion from Version 5.1 to D.Ø.</i>	WG1	
<b>Controlled Substance Reporting Task Group – CLOSED NOVEMBER 2009</b> <i>This task group's goals are to standardize the data elements and definitions across all states and federal government to meet the needs of reporting controlled substances (prescription or non-prescription), while protecting the HIPAA implied privacy of the purchaser, which will assist in retailer compliance.</i>	WG1	
<b>Prior Authorization Transfer Task Group – CLOSED MAY 2009</b> <i>This task group has created a standard format for transferring prior authorizations between Pharmacy Benefit Managers (PBMs). This format is to be used when clients change PBMs/Claims Processors and request that their prior authorizations transfer from their previous PBM/Claim Processor to their new PBM/Claim Processor. This group is on hiatus pending the ballot.</i>	WG1	
<b>Post-Adjudicated Pharmacy Reporting Task Group – CLOSED MARCH 2006</b> <i>This task group has submitted a standard to allow the exchange of Patient claim history from one payer to another when the business moves from one business to another, or for payers to share information with their clients after claims have been processed (for example payer to payer, or payer to medical group) for auditing, retrospective DUR, and fee evaluations. They are working on the implementation guide. A draft of this document may be used in Medicare Part D to report post-adjudicated claims. The standard will be Ballot WG010027.</i>	WG1	
<b>Proposal Patient Validation Standard Task Group – CLOSED AUGUST 2005</b> <i>This task group has worked with pilot companies to exchange claims without patient name (as appropriate). The task group will now submit situational verbiage for the patient name for the Protocol Document and will then disband.</i>	WG1	
<b>Reject Codes Task Group- CLOSED AUGUST 2004</b> <i>This task group is reviewing the use of the "Missing/Invalid" Reject Codes and whether new Reject Codes of "Not Supported" should be created for business needs. They will also be reviewing other Reject Codes needs.</i>	WG1	
<b>Coupon Task Group – CLOSED MAY 2007</b> <i>This task group is building clarification of coupon processing in the claims processing arena. The Task Group submitted Data Element Request Form (DERF) 0000716 and received modifications. DERF000775 was approved for inclusion into Telecom D.Ø. (On hold at this time.)</i>	WG1	
<b>Eligibility Transaction Task Group – CLOSED MAY 2007</b> <i>This task group is modifying the Eligibility transaction for Part D purposes to determine if and what additional information could be provided in the</i>	WG1	



Task Group	Work Group	Task Group Leader and Contact Information
<i>response to uniquely identify the plans and patients within the Part D environment. DERF 000774 was approved for inclusion into Telecom D.Ø. (On hold at this time.)</i>		
<b>Pre-Determination of Benefits Task Group – CLOSED MAY 2007</b> <i>The purpose of the proposed Project is to create a facility whereby a pharmacy or prescriber may submit a claim record to an adjudicator and receive response without also causing the adjudicator to process a payment. This transaction would serve the purpose of a “benefits inquiry.” This transaction(s) may be used for high-cost or specialty medications so the prescriber can effectively plan the course of treatment with the patient. This task group has submitted DERF 000762 was approved for inclusion into Telecom D.Ø. (On hold at this time.)</i>	WG1	
<b>Protocol Capture Task Group – CLOSED MAY 2007</b> <i>They are on hiatus waiting for any capture-related comments from the Telecom D.Ø ballot.</i>	WG1	
<b>Protocol Data Dictionary Task Group – CLOSED MAY 2007</b> <i>They are on hiatus waiting for any Data-Dictionary-related comments from the Telecom D.Ø ballot.</i>	WG1	
<b>Protocol Example Task Group – CLOSED MAY 2007</b> <i>They are on hiatus waiting for any Example-related comments from the Telecom D.Ø ballot. (On hold at this time.)</i>	WG1	
<b>Protocol Information Reporting Task Group – CLOSED MAY 2007</b> <i>They are on hiatus waiting for any Information Reporting-related comments from the Telecom D.Ø ballot. (On hold at this time.)</i>	WG1	
<b>Protocol Rebill Task Group – CLOSED MAY 2007</b> <i>They are on hiatus waiting for any Rebill-related comments from the Telecom D.Ø ballot.</i>	WG1	
<b>Protocol Review Fields Task Group – CLOSED MAY 2007</b> <i>They are providing consistency review of segments and fields within transactions for Telecom D.Ø. (On hold at this time.)</i>	WG1	
<b>DSMO CRS 1062 X12 270/271 Task Group – CLOSED AUGUST 2007</b> <i>This task group will review the DSMO Change Request 1062 which requests the ASC X12 270/271 transactions version 5010 move forward in HIPAA. The Task Group will create a recommendation for the August 2007 work group meeting.</i>	WG1/ WG11	
<b>Payer-to-Payer Task Group – CLOSED AUGUST 2010</b> <i>This task group addresses manual guidance and electronic transaction solutions for coordination of information between Medicare Part D payers.</i>	WG1	
<b>Synchronization/Trial Supply/Short Cycle Fill Task Group – CLOSED NOVEMBER 2012</b> <i>This task group will examine Telecom FAQ Question D-Eighty, DERF 001045, and review the WG1 standards for impact for these topics. This task group will coordinate with WG9 and WG14.</i>	WG1	
<b>Appendix G Task Group – CLOSED NOVEMBER 2013</b> <i>This task group will examine Appendix G Two Way Communication to Increase the Value of On-Line Messaging in the Telecom Imp Guide and recommend updates for a future version.</i>	WG1 with WG14	
<b>Audit Task Group – CLOSED MAY 2014</b> <i>This task group has created an electronic audit standard for both ‘desk-top’ and ‘in-store’ audit requests. They are discussing implementation and enhancements of the standard.</i>	WG1	
<b>Compound Billing Solutions Task Group – CLOSED February 2015</b> <i>This task group is developing solutions and recommendations for the correct billing and adjudication of compound claims</i>	WG1 With WG10	
<b>Structured Product Labeling Activities Task Group – CLOSED NOVEMBER 2019</b> <i>This task group is monitoring the Federal Drug Administration’s work on the Structured Product Labeling to offer suggestions for improvement/changes.</i>	WG2	
<b>SPL REMS Requirements Task Group – CLOSED AUGUST 2019</b>	WG2	

Task Group	Work Group	Task Group Leader and Contact Information
<p>This task group continues work to allow electronic submission of REMS drugs for a central repository within the FDA's Structured Product Labeling system. The FDA published a Federal Register Notice 9-23-2014 announcing the 4 priority projects proposed for REMS authorized under PDUFA V. NCPDP's proposal that REMS be codified and standardized as one of those priorities was adopted by FDA as Priority Project 3: Pharmacy Systems under REMS, Standardizing REMS Information for Inclusion into Pharmacy Systems Using Structured Product Labeling (SPL) under REMS. Implementation strategies and timelines are being considered by WG1, WG2 and WG11</p>		
<p><b>Dates Associated with Pharmaceutical Products Task Group –CLOSED AUGUST 2018</b>  <i>This task group is to investigate definition inconsistencies, involve government agencies to make them aware of the issues, and education on the importance via a white paper or other means.</i></p>	WG2	
<p><b>Product Service Identifier (PSID) Expansion Task Group – CLOSED FEBRUARY 2017</b>  <i>This task group will evaluate Product/Service ID (PSID) field length to determine the appropriate potential expansion size to accommodate existing and new codes for current and future eHealth Care transactions.</i></p>	WG2	
<p><b>503B Guidance Task Group – CLOSED NOVEMBER 2016</b>  <i>The task group will research how 503B products will be identified within the NCPDP standards. They will determine if there are identifiers in the current NCPDP standards that apply and if there are none, recommend an identification method for 503B products.</i></p>	WG2	
<p><b>NCPDP Product Identifiers Standard Task Group– CLOSED NOVEMBER 2015</b>  <i>This task group has created a standard for Product Identifiers to be used as guidance by industry and by the FDA as it develops regulations around the assignment and use of Product Identifiers. The task group will follow changes approved and to be balloted through the ballot process and provide assistance with review of any comments received on the ballot to determine if additional changes to the standard are required.</i></p>	WG2	
<p><b>Review of Appendix B Reference Code Qualifiers Task Group – CLOSED AUGUST 2015</b>  <i>This task group completed the review of definitions for existing product identifiers, submitted a DERF with modifications to Appendix B. The DERF was approved and changes will be incorporated into the ECL of July 2015.</i></p>	WG2	
<p><b>Evaluation of BUS's Billing Units Task Group – CLOSED MAY 2014</b>  <i>This task group will gain an understanding of the issues by looking at the unique attributes of these products, identify any challenges in the current BUS, review billing and reimbursement processes for these products, identify similarities amongst these products and review past work on these products by WG2 and WG7.</i></p>	WG2	
<p><b>UDI Definition– CLOSED MAY 2014</b>  <i>This task group will define the UDI as it applies to all applicable NCPDP standards and assist the Maintenance and Control task group applying the UDI to existing product identifiers used in the NCPDP standards for accuracy.</i></p>	WG2	
<p><b>NCPDP Comments to FDA on Biosimilars Task Group– CLOSED AUGUST 2012</b>  <i>This task group will draft a letter of recommendations to the FDA regarding future policies on biosimilar drugs.</i></p>	WG2	
<p><b>Billing Unit Standard Marketing Task Group (previously the Manufacturer Form Review Task Group) – CLOSED FEBRUARY 2012</b>  <i>This task group's focus is to promote and market the NCPDP BUS to the drug delivery industry concentrating on the education of the pharmaceutical manufacturers. Objectives are the creation of marketing materials, the introduction of the "NCPDP Decision Tree", the billing unit library as well as representation on behalf of NCPDP at industry</i></p>	WG2	

Task Group	Work Group	Task Group Leader and Contact Information
<i>conferences.</i>		
<b>Medical Devices Task Group – CLOSED AUGUST 2011</b> <i>This task group will work with the FDA to assure that the Unique Device Identifier (UDI) can work in commercial practices (either as they are today or with necessary changes) within the NCPDP BUS standard in order to maintain patient continuity of care.</i>	WG2	
<b>Billing Unit Descriptor Task Group – CLOSED NOVEMBER 2006</b> <i>This task group is investigating the development of a standard billing unit descriptor to help pharmacy providers utilize the correct number of Billing Units when submitting a claim.</i>	WG2	
<b>Billing Unit Standard IG Generalization Task Group – CLOSED MAY 2006</b> <i>This task group is reviewing the BUS Implementation Guide for reference to specific drug products to determine if the reference should be generic and FAQ developed for the specific drugs.</i>	WG2	
<b>Change in Existing/New Products Review Task Group – CLOSED AUGUST 2008</b> (work to be done by the Standard Exception Review Task Group that was renamed to the Product Review and Billing Unit Exception Task Group) <i>The process where the compendia ask before they make changes/additions was formalized to provide consistency in the application. This Task Group will do pre QUIC Form reviews prior to the WG review of the form.</i>	WG2	
<b>HL7 Billing Unit Question Task Group – CLOSED AUGUST 2008</b> <i>This task group is to assist and provide content expertise to the HL7 group that is starting to model for the inclusion of billing units into the Structured Product Label (SPL).</i>	WG2	
<b>RxNorm Guidance Task Group-CLOSED MARCH 2005</b> <i>This task group will create testimony to NCVHS on RxNorm usage in the pharmacy industry.</i>	WG2	
<b>Standardization of UPC and HRI Task Group-CLOSED MARCH 2005</b> <i>This task group is reviewing the formats of the Universal Product Codes and the Health Related Item codes to determine if they need to be standardized.</i>	WG2	
<b>Standard Reporting Package Size Task Group – MERGED with the Billing Unit Standard Marketing Task Group – NOVEMBER 2007</b> <i>This task group was formed to create a standard reporting package size methodology between manufacturers and wholesalers (distributed product/shipping unit); to allow the conversion of units to package size and back again). The OIG Report released in July 2006 reveals concerns about government reporting of package size versus pharmaceutical industry reporting of package size <a href="http://oig.hhs.gov/oei/reports/oei-05-02-00073.pdf">http://oig.hhs.gov/oei/reports/oei-05-02-00073.pdf</a></i>	WG2 and WG7	
<b>Structure Product Label (SPL) Task Group-CLOSED MAY 2005</b> <i>This task group will collaborate with HL7 on the Structured Product Label (SPL) for use in the pharmacy industry.</i>	WG2	
<b>Structured Product Labeling Task Group – CLOSED MAY 2009</b> <i>This task group is monitoring the Federal Drug Administration’s work on the Structured Product Labeling to offer suggestions for improvement/changes.</i>	WG2	
<b>Non-Matched NDC CMS List Task Group – CLOSED NOVEMBER 2009</b> <i>This task group will build an issues paper on the CMS initiative to reject Part D Claims when the NDC is not listed with the FDA and to use this paper to education the NCPDP members.</i>	WG2	
<b>Package Size Task Group – CLOSED NOVEMBER 2009</b> <i>This task group will examine and identify discrepancies among the compendium on different methods/policies for defining package size and offer corrective action to the work group.</i>	WG2	
<b>Product Service Identifier (PSID) Expansion Task Group – CLOSED</b>	WG2	

Task Group	Work Group	Task Group Leader and Contact Information
<b>FEBRUARY 2017</b> <i>This task group will evaluate Product/Service ID (PSID) field length to determine the appropriate potential expansion size to accommodate existing and new codes for current and future eHealth Care transactions.</i>		
<b>Health Plan ID (HPID) Task Group – CLOSED FEBRUARY 2016</b> <i>This task group will review prior recommendations and determine if there is still a need for HPID in NCPDP transactions (other than Telecommunication).</i>	WG3	
<b>Pharmacy ID Card Operating Rules Task Group – CLOSED AUGUST 2014</b> <i>This task group is developing Operating Rules for the Pharmacy ID Card.</i>	WG3	
<b>Health Plan Identifier Task Group – CLOSED MAY 2014</b> <i>This task group will review all standards for fields that would associate with HPID; look at field lengths, etc. for identified fields and determine next steps.</i>	WG3	
<b>NCPDP Data Services Task Group – CLOSED MAY 2013</b> <i>This task group is providing oversight in the development and maintenance of the NCPDP databases.</i>	WG3	
<b>Provider Enrollment Task Group- CLOSED NOVEMBER 2012</b> <i>This task group is identifying data elements necessary for electronic provider enrollment.</i>	WG3	
<b>State of States/Letter to States Task Group – CLOSED AUGUST 2011</b> <i>This task group tracks pending or existing legislation at the state level regarding any actions that directly impacts the work groups goals and activities. This task group will also create a NCPDP response letter for states that have legislation regarding implementation of the NCPDP standard ID card, the use of the DEA for claims transactions, the use of the Social Security number as a cardholder identifier, etc.</i>	WG3	
<b>Prescription Label Task Group – CLOSED AUGUST 2009</b> <i>This task group will work in collaboration with the NABP Task Force charged to examine the states' current label requirements and possible changes/modifications.</i>	WG3	
<b>Response to Texas Legislation Task Group – CLOSED FEBRUARY 2008</b> <i>This task group will address Texas H.B. 3064, relating to registration and regulation of certain discount health plans, requesting acknowledgement of NCPDP as a legitimate, accredited, source of BIN numbers for all Health Care business, including Consumer Cards.</i>	WG3	
<b>Processor/Pharmacy Entity Relationship Issues Task Group - CLOSED MAY 2007</b> <i>This task group will review the issue of multiple relationship codes and how it impacts electronic claims submission, the Pharmacy Database v2.0 and NPI.</i>	WG3	
<b>Health Care Identification Card Pharmacy ID Card Imp Guide Revision Task Group - CLOSED MAY 2007</b> <i>This task group will review the revised ANSI INCITS standard and recommend the necessary changes to the NCPDP Health Care Identification Card Pharmacy ID Card Implementation Guide v1.9.</i>	WG3	
<b>Combination Card Task Group— CLOSED NOVEMBER 2006</b> <i>This task group will investigate the development of a standard Combination Card.</i>	WG3	
<b>Affiliation Codes Task Group-CLOSED MAY 2005</b> <i>This task group is created to review the Affiliation Code that resides on the NCPDP Provider File and make recommendations to make the file more useful/ complete for purchasers by correctly reflecting the relationships between individual pharmacies, chain pharmacies, and buying groups.</i>	WG3	
<b>Mapping 270 to the ID Card Task Group-CLOSED MAY 2005</b> <i>As part of the NCVHS recommendations on ePrescribing, this task group will provide guidance to users of the X12N 270 eligibility transaction for how to use the Pharmacy ID Card. The task group will provide a guidance document. A status is to be provided to NCVHS by December on this work.</i>	WG3	

Task Group	Work Group	Task Group Leader and Contact Information
<i>Updates will be given by March 2005.</i>		
<p><b>NPI Task Group – CLOSED MARCH 2005 (updates will continue to be provided on the NCPDP SNIP Liaison Special Committee)</b>  <i>This task group will monitor developments related to the implementation of the NPI. It will coordinate NPI recommendations with the NCPDP SNIP Liaison Special Committee, participate in the WEDI PAG efforts and report back to the group on issues addressed from that forum.</i></p>	WG3	
<p><b>Payer ID Task Group-CLOSED MARCH 2005</b>  <i>This task group will explore the feasibility of NCPDP getting involved in enumerating payers. The task group will provide Pros and Cons and provide that feedback as well as a recommendation.</i></p>	WG3	
<p><b>274 White Paper Task Group- CLOSED AUGUST 2004</b>  <i>This task group is created to review issues of provider enrollment in government programs and to provide recommendations. These issues and recommendations will be turned into a White Paper.</i></p>	WG4	
<p><b>834 Member Enrollment Task Group– CLOSED (until new information is available) MAY 2005</b>  <i>This task group will review the original mapping document and compare it to the current X12 Guide, and determine if there are any missing data elements. As a result, change requests could be submitted to X12 for the next implementation guide. The group may also provide a crosswalk document for pharmacy</i></p>	WG4	
<p><b>Provider Enrollment Task Group- CLOSED FEBRUARY 2007</b>  <i>This task group is developing a white paper to examine the laborious and non-standard pharmacy enrollment process in State Medicaid programs as well as Medicare. The purpose of the white paper will be to suggest alternatives and to provide CMS awareness of this issue.</i></p>	WG4	
<p><b>FAQ 834 task group – CLOSED MAY 2008 (Moved to WG45)</b>  <i>This task group will develop FAQs on how to use the ASC X12 834 to resolve more challenging member identification issues. The task group will also address questions and concerns of version 4010.</i></p>	WG4	
<p><b>Current Documents Review—CLOSED MARCH 2006</b>  <i>This task group is taking the existing mapping documents that were developed by the WG for Version 4010 and updating them to map to the 4050 Version of the 835.</i></p>	WG5	
<p><b>DSMO 1042 Task Group—CLOSED NOVEMBER 2006</b>  <i>This task group will review and comment (if necessary) on DSMO 1042 which submitted X12 5010 Implementation Guide (TR3) designated 005010X221 835 Health Care Claim Payment / Advice as a version upgrade/replacement for the 835 HIPAA transaction, which is currently adopted and implemented using version 004010A1.</i></p>	WG5	
<p><b>Frequently Asked Questions About Billing and Payment/ Reconciliation Files – CLOSED MAY 2007 (Moved to WG45)</b>  <i>This task group will review Work Group 5 FAQ's and draft responses to new issues needing to be addressed by the work group</i></p>	WG5	
<p><b>X12 835 Liaison Task Group – CLOSED MAY 2007 (Moved to WG45)</b>  <i>This task group will establish contact with X12 regarding clarification of X12 835 standards, discuss DSMO requests for additional fields and additions to external code set.</i></p>	WG5	
<p><b>Medicaid Drug Rebate Program Task Group – CLOSED AUGUST 2019</b>  This task group works to promote the adoption and use of various existing NCPDP standards of interest to State Programs, in particular those relating to Medicaid Drug Rebate Programs, and the development of new standards which may improve efficiency and accuracy of state program operations.</p>	WG7	

Task Group	Work Group	Task Group Leader and Contact Information
<p><b>Medicare Part D Coverage Gap Discount Program Implementation Task Group – CLOSED MAY 2014</b>  <i>This task group is working with CMS and the TPA to assist with up-front implementation items to ensure a successful launch of the program. The task group is also an educational resource and will recommend revisions to the Manufacturer Rebate Standard as necessary.</i></p>	WG7	
<p><b>Formulary-E-Prescribing &amp; Tracking Task Group- CLOSED FEBRUARY 2014</b>  <i>This task group is investigating and creating blue-print ways that formulary rules are applied to e-prescribing technologies and how these rules are later managed in the rebate claims process between trading partners.</i></p>	WG7	
<p><b>Manufacturer Rebates Standard Implementation Task Group – CLOSED AUGUST 2009</b>  <i>The team is developing a new survey guide to aid in understanding current utilization of the standard by the industry, perceived gaps/limitations of existing standards and key obstacles for implementation and future industry needs to maximize the rebate standard value.</i></p>	WG7	
<p><b>340B Pharmacies/Manufacturer Rebates Task Group – CLOSED AUGUST 2009</b>  <i>This task group will address the challenges associated with the 340B program and the Medicaid Exclusion Files.</i></p>	WG7	
<p><b>Coordination of Benefits Task Group - CLOSED AUGUST 2007</b>  <i>This task group will work with WG1 to understand Medicare Part D and determine if it will impact WG7 and manufacturer rebates.</i></p>	WG7 with WG1	
<p><b>Commercial Implementation of Manufacturer Rebates Survey Task Group- CLOSED NOVEMBER 2004</b>  <i>This task group has created an Implementation Survey tracking the use of the Manufacturer Rebates Standards and is working to disseminate the survey.</i></p>	WG7	
<p><b>Regulatory Tracking/Pedigree – CLOSED AUGUST 2016</b>  <i>This task group monitors the development of state and federal regulations for use of pedigree and track and trace technology.</i></p>	WG7	
<p><b>Formulary Management Survey Task Group – CLOSED November 2017</b>  <i>This task group will develop and conduct a survey to understand the current scope, process and challenges for both the manufacturers and payer/processors in formulary management and validation.</i></p>	WG7	
<p><b>Medicare Card Project Task Group – CLOSED FEBRUARY 2020</b>  <b>This task group will identify the impact of this initiative throughout the NCPDP standards where HICN is used today, provide recommendations, and receive/respond to questions.</b></p>	WG9	
<p><b>Medicaid Subrogation FAQ Task Group – CLOSED MAY 2019</b>  <i>This task group is reviewing questions received about implementation of the Medicaid Subrogation Standard v3.0. The task group will build responses to the questions, which will then be reviewed with WG9 for approval and publication.</i></p>	WG9	
<p><b>OIG Report OEI-05-12-00540 Task Group – CLOSED MAY 2019</b>  <i>The task group will develop recommendations to address the observations and conclusions in the OIG report specifically referencing Medicare Part D as a result of the focus of the executive summary with recommended estimated implementation timelines where available. The task group will identify any assistance needed from CMS or OIG and the task group will communicate progress to OIG through the task group's CMS representative. If necessary this task group will address any proposed or new guidance as appropriate.</i></p>	WG9	
<p><b>Standardized Pharmacy Dispenser Data Task Group – CLOSED November 2018</b>  <i>Create an industry standard for the capturing, storing and transferring of data attributes necessary to credential a pharmacy provider as needed to participate in the associated services offered by the program.</i></p>	WG9	

Task Group	Work Group	Task Group Leader and Contact Information
<b>Supplemental Payer Medicare Part D Reconciliation Standardization Task Group - CLOSED MAY 2018</b> <i>This task group will help develop file layouts and documentation to assist with information transfer when a Part D plan adjusts a claim that impacts a supplemental payer.</i>	WG9	
<b>Medicaid Best Practices Using NCPDP Standards to Implement Reimbursement Methodology – CLOSED February 2017</b> <i>This task group will develop a white paper that will provide Best Practices for AAC/FFUL/NADAC Implementation to Ensure Accuracy in Reimbursement.</i>	WG9	
<b>Medicare/Medicaid Claim Billing Issues – CLOSED MAY 2017</b> <i>This task group will respond to Frequently Asked Questions about Medicaid Claims Processing.</i>	WG9	
<b>Health Insurance Exchange/Marketplace FAQ Task Group – CLOSED NOVEMBER 2016</b>  This task group will review questions that warrant consistent application across the industry of Health Insurance Marketplace (HIM) policy, where pharmacy claims or other applicable transactions are involved.	WG9	
<b>Medicare Part B Claim Billing for Dual Eligibles – CLOSED AUGUST 2015</b> <i>This task group is defining a consistent process across all state Medicaid plans to allow for the electronic processing of claims for Part B covered products that are secondary to the dual eligible recipient’s Medicare Advantage plan.</i>	WG9	
<b>H1N1 Vaccine Billing Tracking – CLOSED AUGUST 2010</b> <i>This task group was formed to track the H1N1 vaccine billing process being used by each State Medicaid Program.</i>	WG9	
<b>DSMO CRS 1044 Task Group—CLOSED NOVEMBER 2006</b> <i>This task group will review the X12N 005010837x222 Health Care Claim: Professional Implementation Guide proposed for HIPAA adoption. And prepare comments and recommendations for use in the development of the NCPDP response to the DSMO request.</i>	WG9	
<b>Mapping of 5.1 to 837 Task Group—CLOSED MARCH 2006</b> <i>This task group will map the data elements from the V5.1 Telecommunication Standard to the X12N 837.</i>	WG9	
<b>Medicaid Subrogation Task Group—CLOSED NOVEMBER 2006</b> <i>The purpose of the task group is to review the new fields in Telecom and the potential impact on Medicaid Subrogation. They have submitted DERF 000763 (pending).</i>	WG9	
<b>Medicaid Subrogation Sections in the Protocol Document Task Group—CLOSED MARCH 2006</b> <i>The purpose of the task group is to go through the Medicaid Subrogation Sections of the Protocol Document and identify any situational fields in that segment that need a situation when you use that field.</i>	WG9	
<b>New CMS Task Group – CLOSED MARCH 2005 (this task group merged with the Payer-to-Payer task group formed in WG1)</b> <i>This task group is working to provide business needs and clarify requests to add new fields and segments to the Telecommunication Standard for Certificates of Medical Necessity (CMN) and Medicare Claims processing. A new task was added to look at payer-to-payer scenarios and either update existing implementation guides or create a new one. Payer-to-payer transfer of claim data is not addressed in either the Telecommunication or Batch Implementation Guides</i>	WG9	
<b>HIT (Home Infusion Therapy) Task Group- CLOSED NOVEMBER 2004</b> <i>This task group is creating a white paper to provide information regarding the billing of home infusion therapy (HIT) drugs and services and the impact on providers and payers of changing the current industry billing practices.</i>	WG9	
<b>Medicare Prescription Benefit NPRM Task Group- CLOSED NOVEMBER</b>	WG9	

Task Group	Work Group	Task Group Leader and Contact Information
<p><b>2004</b>  <i>This task group will provide a response from NCPDP to the sections in the Medicare NPRM that is soliciting comments from the industry. WG3 will be looking at the ID card sections, WG11 will be looking at the e-prescribing sections, WG9 will be looking at the Medicare, Medicaid, government programs sections, and WG12 will volunteer any educational information. The comments are due back to CMS by the first of October.</i></p>	<p>lead, with assistance from WG3, 11, and 12</p>	
<p><b>Balancing and Pricing Task Group – CLOSED MAY 2007</b>  <i>This task group is reviewing balancing issues related to the patient's responsibility amounts. Scenarios are to include pricing as reported to and responded by primary and secondary payers. They have submitted DERF 000750 (approved), 000759 (approved), 000767 (approved), 000768 (pending).</i></p>	<p>WG9 with assistance from WG1</p>	
<p><b>Payer-To-Payer Task Group – CLOSED MAY 2007</b>  <i>This task group will review the Medicaid Subrogation Implementation Guide to determine its use in payer-to-payer communication. They completed recommendations for additions to the Telecommunication Standard Implementation Guide and/or Batch Standard Implementation Guide to more fully explain the payer-to-payer model (DERF 000767).</i></p>	<p>WG1/ WG9</p>	
<p><b>Review State of the States Document Format – CLOSED MAY 2007</b>  <i>This task group will review the format and content of WG9's State of the States document.</i></p>	<p>WG9</p>	
<p><b>State of the States (SOS) Outreach Task Group – CLOSED MAY 2008</b>  <i>This task group will reach out to the State Medicaid Programs to request information for the SOS tracking document.</i></p>	<p>WG9</p>	
<p><b>Tamper-Resistant Prescription Pad Task Group – CLOSED NOVEMBER 2008</b>  <i>This task group will collect and review the various State requirements for Tamper-Resistant Prescription Pads in order to develop a TRPP Standard that could be utilized by the industry.</i></p>	<p>WG9</p>	
<p><b>Required Information Outreach To States – CLOSED FEBRUARY 2009</b>  <i>This task group will evaluate the current State of the States document for content and will assist in future outreach to the States.</i></p>	<p>WG9</p>	
<p><b>Medicaid Communication Process Task Group – CLOSED AUGUST 2011</b>  <i>This task group is developing a process for communicating with State Medicaid Programs to keep them informed of NCPDP actions/recommendations that affect their business processes.</i></p>	<p>WG9</p>	
<p><b>Medigap ID Field Task Group – CLOSED MAY 2013</b>  <i>This task group is clarifying how and when Field 359-2A Medigap ID should be used and developing an example for inclusion in the Editorial Document.</i></p>	<p>WG9</p>	
<p><b>WG9/WG2 Unbreakable Packages Joint Task Group – CLOSED AUGUST 2016</b>  <i>This task group will determine how the industry should identify/define an unbreakable package based on package type(including smallest package size) and dispensing setting; communicate the issues to CMS and obtain clear guidance for each dispensing instance where unbreakable package type is applicable according to CMS intent.</i></p>	<p>WG9/ WG2</p>	
<p><b>Acetaminophen Best Practices Task Group – CLOSED NOVEMBER 2016</b>  <i>This task group has drafted a white paper that promotes best practices for the labeling of prescription drugs containing acetaminophen. The task group will market the white paper to Stakeholders throughout the industry.</i>   <i>Hospital Sub Task Group is defining best practices as they relate to hospital safe use of acetaminophen and other dose restricted medications.</i></p>	<p>WG10</p>	
<p><b>Scope and Goals Modernization Task Group- CLOSED NOVEMBER 2016</b>  <i>This task group will identify changes need to reflect the increasing role of</i></p>	<p>WG10</p>	



Task Group	Work Group	Task Group Leader and Contact Information
<i>the pharmacist as a healthcare service provider, the focus on patient engagement and patient safety and cross SDO activities.</i>		
<b>mL White Paper Task Group – CLOSED AUGUST 2014</b> <i>This task group will develop a white paper in support of the use of mL for volumetric measure in medication orders, ePrescribing, and patient instructions and prescription labeling.</i>	WG10	
<b>Prescribable Medication Information at Point of Care to Support Patient Safety Task Group. – CLOSED AUGUST 2014</b> <i>This task group will create a white paper to document the process involved in making prescribable medication information available to the provider at the point of care and identify patient safety impacts. Recommend appropriate steps to resolve gaps and blind spots in the process.</i>	WG10	
<b>Specialty and Compounding Pharmacy Services Task Group – CLOSED MAY 2014</b> <i>This task group will define operational tools for electronic communication between various parties that provide specialty pharmacy services, including PBM, Payers, Providers (including MD), Manufacturers and Quality Care Associations and directions of future specialties. They are coordinating work with the appropriate WG1 Task Group and WG11 Specialty Requirements for ePrescribing Task Group.</i>	WG10	
<b>DUR Rejection Review Task Group – CLOSED NOVEMBER 2013</b> <i>This This task group will review and update as needed Appendix G of the Telecommunications Standard Section on DUR Rejections</i>	WG10	
<b>Universal Medication Schedule White Paper Task Group – CLOSED NOVEMBER 2013</b> <i>This task group will develop a white paper encompassing the proposal for a universal medication schedule as a best practice for enabling patient understanding and compliance with medication timing.</i>	WG10	
<b>Structured and Codified Sig Task Group – CLOSED AUGUST 2012</b> <i>This task group created a structured and codified format for the Sig (instructions) on electronic prescriptions with other organizations and industry participants. They are enhancing the format and implementation guidance based on industry feedback.</i>	WG10	
<b>LTC MTM Sub Task Group of MTM Communications Task Group – CLOSED MAY 2012</b> <i>Identify LTC specific MTM requirements and recommend changes to the Specialized Standard and/or MTM CDA IG</i>	WG10	
<b>Allergy Value Set Task Group – CLOSED AUGUST 2011</b> <i>This task group was formed is create a sustainable medication allergy value set comprised of interoperable terminologies.</i>	WG10	
<b>Medication Therapy Management Task Group – CLOSED MAY 2010</b> <i>This task group is discussing whether there is a need for a standard for the submission of Medication Therapy Management claims for Medicare.</i>	WG10	
<b>Structured and Codified Sig Format Implementation Guide Analysis Sub-Task Group - CLOSED February 2019</b> <i>This task group will review the Structured and Codified Sig Format Implementation Guide to determine if updates are required and report findings to WG10 Professional Pharmacy Services.</i>	WG11	
<b>NCPDP-HL7 Pharmacist/Pharmacy Provider Functional Profile Task Group – Closed February 2019</b>  <b>This task group scope is to write a guidance document about the Pharmacist HL7 EHR Functional Profile and the value for the pharmacy industry of adopting the HL7 EHR-S Functional Profile: Meaningful Use, Release 1 - US Realm (MU EHR-S FP).</b>	WG11, WG10	
<b>Biologic and Biosimilar Access and Traceability Task Group – CLOSED MAY 2018</b> <i>This task group will develop use cases for the sending and receiving of this information using the NCPDP SCRIPT RxFill and medication history transactions.</i>	WG11	

Task Group	Work Group	Task Group Leader and Contact Information
<p><b>Integrate S&amp;I PDMP Guidance into SCRIPT Task Group – CLOSED MAY 2018</b>  <i>This task group will take the guidance created by the S&amp;I Framework PDMP initiative and determine where the associated guidance should be integrated into SCRIPT.</i></p>	WG11	
<p><b>SCRIPT Managed Updates Schedule Task Group – CLOSED FEBRUARY 2018</b>  <i>This task group will review the proposal to update the NCPDP SCRIPT Standard on a more predictable basis and the NCPDP External Code List (ECL) proposals and bring forward recommendations to the WG.</i></p>	WG11	
<p><b>Meaningful Use and NIST Test Methods for ePrescribing Task Group – CLOSED MAY 2017</b>  <i>This task group will provide feedback to NIST on their electronic prescribing test procedures for EHR Certification and for industry testing of transactions.</i></p>	WG11	
<p><b>Drug Description Task Group – CLOSED FEBRUARY 2016</b>  <i>This task group has provided guidance for the use of the Drug Description and code sets. The task group is working with the National Library of Medicine on enhancements to RxNorm prescribing names. This task group requests input from prescribing vendors.</i></p>	WG11 with WG2	
<p><b>Medication History Task Group – CLOSED NOVEMBER 2014</b>  <i>This task group will be discussing pended DERF 001222 to analyze a batch medication history transaction for the NCPDP SCRIPT Standard.</i></p>	WG11	
<p><b>ePA XML Sub Task Group – CLOSED AUGUST 2014</b>  <i>The sub task group is providing the technical data analysis of the transaction sets for prior authorization for the SCRIPT Implementation Guide and the XML schema.</i></p>	WG11	
<p><b>Prescription Delivery Task Group – CLOSED MAY 2014</b>  <i>This task group will discuss pended DERFs 001162 (hospital delivery) and 001163 (patient residence use).</i></p>	WG11	
<p><b>Pharmacy to Pharmacy Prescription Transfer Task Group – CLOSED MAY 2014</b>  <i>This task group built transactions for a pharmacy to pharmacy prescription transfer which are included in the SCRIPT Standard.</i></p>	WG11	
<p><b>RxFill Task Group – CLOSED MAY 2014</b>  <i>This task group is evaluating the current guidance available for the use of the RXFILL transaction and bringing forward any updates.</i></p>	WG11	
<p><b>Electronic Signature Guidance Task Group - CLOSED FEBRUARY 2014</b>  <i>This task group will provide guidance on issues that are coming up in many states requiring an electronic signature in eprescribing. Note the SCRIPT transaction (prior to 2013) does not contain a specific "electronic signature" field. The task group will provide guidance information.</i></p>	WG11	
<p><b>Central Fill Task Group – CLOSED AUGUST 2013</b>  <i>This task group is examining the needs of central fill sites in electronic prescribing and will bring forward requests for modifications to the SCRIPT Standard.</i></p>	WG11	
<p><b>Clinical Information Exchange Task Group – CLOSED NOVEMBER 2012</b>  <i>This task group focuses to evaluate the exchange of Patient Clinical information such as patient allergies, conditions, prescription profiles, lab results, clinical outcomes etc., between pharmacies and prescribers, and other entities.</i></p>	WG11	
<p><b>Expanded Character Set Task Group – CLOSED MAY 2012</b>  <i>This task group is examining impact to using an expanded character set in NCPDP standards due to business needs of non-English exchanges.</i></p>	WG11	
<p><b>FMT Code List Mapping Task Group – CLOSED MAY 2012</b>  <i>This task group will review the original mapping of NCPDP old proprietary code sets for 4 fields to FMT, to provide mapping consistency when needed.</i></p>	WG11	

Task Group	Work Group	Task Group Leader and Contact Information
<b>Demographic Field Length Task Group – CLOSED NOVEMBER 2012</b> <i>This task group is taking the recommendations from the MC Demographic Field Length Task Group and bringing forward DERFs to modify the WG11 and WG10 standards appropriately.</i>	WG11	
<b>Ordering Rx Task Group - CLOSED AUGUST 2011</b> <i>This task group will review and bring forward any updates based on requested consideration for “grouping” prescriptions.</i>	WG11	
<b>RxNorm Task Group – CLOSED FEBRUARY 2011</b> <i>This task group is reviewing RxNorm and building a list of questions/problems seen, to review the use of drug identifiers in all NCPDP standards and recommend whether RxNorm is appropriate for the use cases.</i>	WG11	
<b>Prior Authorization Workflow-to-Transactions Task Group –CLOSED NOVEMBER 2010 Reopened see above</b> <i>This task group has facilitated industry analysis of the workflow and processes involved in prior authorization in order to suggest improvements. They have examined prior authorization requirements relayed to prescribers through the ePrescribing process through claims processing. They have suggested workflow improvements and areas where transaction processing can offer improvements. They have created an XML solution and are examining a pilot environment to test.</i>	WG11	
<b>ePA Legislative Outreach Sub Task Group – CLOSED JULY 2013</b> <i>The sub task group will create a short document providing educational information to legislators in states that are considering uniform PA forms. The education will cover the new ePA transactions, concerns about the ineffectiveness of uniform PA forms, and other recommendations.</i>	WG11	
<b>Consent Task Group– CLOSED AUGUST 2010</b> <i>This task group is examining the Consent indicator in Medication History and evaluation of other NCPDP transactions.</i>	WG11	
<b>Sample Standard Task Group – CLOSED MAY 2010</b> <i>This task group is refining a new transaction in SCRIPT for sample reporting.</i>	WG11	
<b>RxNorm into SCRIPT Task Group – CLOSED MAY 2010</b> <i>This task group is reviewing the recommendations from the RxNorm Task Group and will build a request for modifications to the SCRIPT Standard.</i>	WG11	
<b>EPrescribing Guidance Task Group – CLOSED MAY 2005</b> <i>This task group will create the NCPDP response to the HHS Notice of Proposed Rule Making (NPRM) on electronic prescribing expected in late 2004. They will also create bulleted items companies can elect to use in their responses to the NPRM.</i>	WG11	
<b>Field Usage Task Group – CLOSED MAY 2005</b> <i>This task group will complete the work requested of DERF 000696 to list in the SCRIPT Standard, guidance for the field usage within each transaction (mandatory, conditional, etc) and to suggest situations for usage for fields as appropriate.</i>	WG11	
<b>Formulary and Benefit Task Group – CLOSED MAY 2005</b> <i>This task group will be creating a standard for the transmission of formulary and benefit information from a PBM/payer to a prescriber for use in e-prescribing functions.</i>	WG11	
<b>Provider Broadcast Task Group CLOSED AUGUST 2005</b> <i>This task group will create a directory standard for use in identifying what participants are able to receive electronic transactions.</i>	WG11	
<b>RXFILL Notification Task Group - CLOSED MARCH 2005</b> <i>This task group will be providing further guidance to the use of the RXFILL (Fill Status Notification) transactions in the NCPDP SCRIPT Standard when used in e-prescribing functions.</i>	WG11	

Task Group	Work Group	Task Group Leader and Contact Information
<p><b>Prescription Transfer Task Group – CLOSED FEBRUARY 2008</b>  <i>This task group is building a standard for the transfer of prescriptions from one pharmacy to another in batch mode, from mail service pharmacy or retail pharmacy environment, or within a pharmacy when converting software systems. They are monitoring feedback from the WG110029 Ballot.</i></p>	WG11	
<p><b>Sig Incorporation Into SCRIPT Task Group – CLOSED NOVEMBER 2007</b>  <i>This task group is taking the guidance built by WG10 Industry Sig Task Group and incorporating standardized patient instruction fields into the SCRIPT Standard Implementation Guide. They have built the structure for SCRIPT and will monitor feedback from WG110031 Ballot and WG100004 Ballot.</i></p>	WG11	
<p><b>Compound Prescription Task Group – CLOSED FEBRUARY 2009</b>  <i>Analyzing the support of compound prescriptions in SCRIPT and recommending changes needed to support business requirements. This group is on hiatus pending the outcome of the ballot.</i></p>	WG11	
<p><b>E-signature Task Group - CLOSED MARCH 2005</b>  <i>This task group is creating a paper on Electronic Signature needs of the pharmacy industry.</i></p>	WG12	
<p><b>Eprescribing Outreach Task Group – CLOSED MAY 2006</b>  <i>This task group was formed based on Project 000023 “CafeRx” for removing the barriers to adoption and utilization of ePrescribing solutions as a pathway to comprehensive clinical automation with the goal to improve the quality of patient care. The task group is writing a document to be used by people not currently using electronic prescribing.</i></p>	WG11	
<p><b>RFI for NHIN Task Group - CLOSED MARCH 2005</b>  <i>This task group is responding to the Request for Information (RFI) from HHS on the National Health Information Network. (NHIN). Numerous questions presented in the RFI might pertain to the NCPDP and will be considered for comment from this Work Group.</i></p>	WG12	
<p><b>Best Available Evidence (BAE) Form Automation Task Group – CLOSED AUGUST 2017</b>  <i>This task group was re-established review recommendations to the form/process.</i></p>	WG14	
<p><b>Long Term and Post Acute Care Utilization Reporting – CLOSED AUGUST 2012</b>  <i>This task group is developing and maintaining industry guidance for CMS required reporting on Long Term Care.</i></p>	WG14	
<p><b>Long Term and Post Acute Care Hospice Task Group – CLOSED AUGUST 2012</b>  <i>This task group is identifying the needs for hospice relative to billing, electronic prescribing and reporting; and determining what if any enhancements or additions are required to the existing standards.</i>  <b>Pended November 2011 waiting guidance from CMS.</b></p>	WG14	
<p><b>Long Term and Post Acute Care Return Reporting Task Group – CLOSED MAY 2012</b>  <i>This task group is addressing the return credit processing that exists in the Long Term Care arena.</i></p>	WG14	
<p><b>Long Term and Post Acute Care Consultant Pharmacists Task Group– CLOSED FEBRUARY 2011</b>  <i>This task group will create a standard for the Consultant Pharmacist and their software that would interface with the electronic prescribing and adjudication systems.</i></p>	WG14	
<p><b>Long Term Care eMAR Task Group - CLOSED MAY 2010</b>  <i>This task group examines the communication of eMAR information, defines use cases, identifies required elements; and analyzes the current HL7 ADT and Orders messages (v2) and CDA along with the NCPDP SCRIPT Standard as communication vehicles to the end of developing an implementation guide.</i></p>	WG14	

Task Group	Work Group	Task Group Leader and Contact Information
<b>Long Term Care Definition – CLOSED AUGUST 2005</b> <i>This task group will define the entity Long Term Care Pharmacy.</i>	WG14	
<b>LTC HIT White Paper Review Task Group – CLOSED MARCH 2006</b> <i>This task group will review the NCPDP/NMEH White Paper on Home Infusion Therapy to determine if there is any impact to the LTC arena that was not outlined in that paper and report their findings to WG9 Government Programs.</i>	WG14	
<b>Long Term Care Medicare Part D Transaction Task Group-MERGED MAY 2005 with LTC Current Billing Issues Task Group</b> <i>This task group is working on specific LTC Pharmacy transaction issues surrounding the Medicare Prescription Benefit 2006.</i>	WG14	
<b>Infusion Therapy and Compounding Task Group – MERGED FEBRUARY 2007 with LTC Current Billing Issues Task Group</b> <i>This task group will discuss how to enhance the billing process in Telecommunication Standard Version 5.1.</i>  <i>Folded into the Billing Issues TG</i>	WG14	
<b>Long Term Care Pharmacy Rebate Reporting RENAMED MAY 2009 to Long Term Care Pilot Reporting TG</b> <i>This task group will develop a standard method for reporting Long Term Care rebates.</i>	WG14	
<b>Long Term Care Pilot Reporting RENAMED AUGUST 2009 to Long Term Care Utilization Reporting</b> <i>This task group will develop a standard method for reporting Long Term Care rebates.</i>	WG14	
<b>Best Available Evidence (BAE) Form Automation Task Group – CLOSED NOVEMBER 2012</b> <i>This task group has performed analysis to determine the possibility of automating the gathering and dissemination of the information contained on the BAE form.</i>	WG14	
<b>Evaluation of the Universal Claim Form (UCF) for Medicare Part D Processing Task Group – CLOSED FEBRUARY 2013</b> <i>This task group will prepare guidance on how to use the current Universal Claim Form (UCF) for Medicare Part D processing requirements effective January 1, 2013 and updating the current D.O UCF to support necessary data elements.</i>	WG14 with WG1	
<b>Automated Dispensing in the LTPAC Setting Task Group – CLOSED FEBRUARY 2013</b> <i>This task group has performed a gap analysis of current and proposed technology standards, including NCPDP, HL7, and other proprietary implementations in order prepare recommendations for dispensing automation standards in the LTPAC setting focusing on the automation used for packaging, labeling, and distributing medications, including central fill and remote dispensing technologies, and will keep into consideration any upstream and/or downstream technologies, such as e-Prescribing and e-MAR, that may have an impact.</i>	WG14	
<b>Review of Telecommunication Standard Appendix G Task Group – CLOSED NOVEMBER 2013</b> <i>This task group will review the current Appendix G in the Telecommunication Implementation Guide to provide updates.</i>	WG14 with WG1	
<b>Goals Review Task Group—CLOSED AUGUST 2007</b> <i>This task group will review the 2006 WG15 goals in order to provide actionable items for the 2007 goals.</i>	WG15	
<b>Physical Samples, Etc. Task Group – MERGED AUGUST 2006</b> <i>This task group will:</i> <ul style="list-style-type: none"> <li>• Define sample types</li> <li>• Develop a grid of information requirements and financial implications</li> <li>• Develop a flow of information on physical samples</li> <li>• Research an identification for physical samples (NDC or similar)</li> </ul>	WG15	

Task Group	Work Group	Task Group Leader and Contact Information
<p><b>Alternate Distribution Task Group - MERGED AUGUST 2006</b>  <i>This task group will:</i></p> <ul style="list-style-type: none"> <li>• <i>Ensure that the information for vouchers and coupons can be transmitted in the SCRIPT Standard</i></li> <li>• <i>Examine the data flow for samples and ensure that all the information can be captured by the electronic prescribing system</i></li> </ul> <p><i>This task group and the Physical Samples, Etc. TG were merged into one task group at the February 2007 meeting. See Medication History Transaction Review and Sample Identifier Task Group.</i></p>	WG15	
<p><b>Scope and Goals/Regulations/Sample Transaction Flow Prioritization - RENAMED AUGUST 2006</b>  <i>This task group will:</i></p> <ul style="list-style-type: none"> <li>○ <i>Develop the WG15 Scope and Goals</i></li> <li>○ <i>Look at regulatory and accreditation issues</i></li> </ul> <p><i>From the process flow, prioritize the business transactions that the WG should start developing and draft data elements for the initial transaction identified</i></p>	WG15	
<p><b>Sample Medication Codification Identification – CLOSED MAY 2008</b>  <i>This task group will determine what methods are currently used by the industry to identify how sample drugs are codified (product identification).</i></p>	WG15	
<p><b>Medication History Transaction Review and Sample Identifier Task Group (This Task Group has been suspended pending the outcome of the Outreach Task Group) Closed MAY 2009</b>  <i>This task group is the result of two merged task groups: Physical Samples, Etc. Task Group and Alternate Distribution Task Group. Its goals are to</i></p> <ul style="list-style-type: none"> <li>• <i>review the Medication History Transaction set to determine what is lacking (this would include the Manifest that is a list of what is needed to communicate the physical sampling event),</i></li> <li>• <i>review the SCRIPT Implementation Guide to provide verbiage to describe this event,</i></li> <li>• <i>and to suggest an appropriate product identifier for the sample.</i></li> </ul> <p><i>Suspended awaiting outcome of the Sample Medication Codification Identification Task Group findings.</i></p>	WG15	
<p><b>Outreach Task Group CLOSED MAY 2009</b>  <i>This task group will:</i></p> <ul style="list-style-type: none"> <li>• <i>Collaborate with other NCPDP WGs on sampling related items</i></li> <li>• <i>Interactions with AHRQ, regulators</i></li> <li>• <i>Perform outreach for additional participants</i></li> <li>• <i>Draft Proposal for Sample Communication/Identification Process and Pilot</i></li> </ul>	WG15	
<p><b>Billing and State Reporting Task Group - Closed February 2019</b>  <i>This task group evaluates proposed billing and reporting requirements; maintains and updates electronic and paper standards for the billing of workers' compensation and property &amp; casualty pharmacy services.</i></p>	WG16	
<p><b>Legislative/Regulatory Monitoring and Education Task Group – Closed February 2019</b>  <i>This task monitors and reports on proposed public policies that potentially impact provision of pharmacy services related to issues pertinent to property and casualty/workers' compensation industries.</i></p>	WG16	
<p><b>Webinar Task Group CLOSED MAY 2012</b>  <i>This task is outlining potential webinars to inform the healthcare industry of issues effecting Workers' Compensation with the goal of creating the selected webinars.</i></p>	WG16	
<p><b>Billing Task Group CLOSED AUGUST 2009 – merged with State Reporting TG</b>  <i>This task group will evaluate, develop and maintain electronic and paper standards for the billing of workers' compensation and property &amp; casualty pharmacy services.</i></p>	WG16	

<b>Task Group</b>	<b>Work Group</b>	<b>Task Group Leader and Contact Information</b>
<b>Education Task Group CLOSED AUGUST 2009</b> – merged with Legislative and Regulatory TG <i>This task group will develop and present educational materials related to issues pertinent to Property and Casualty/ Workers' Compensation industries.</i>	WG16	
<b>Annual Conference Presentation Task Group CLOSED MAY 2012</b> <i>Collaborate with WG2 and WG7 to create content for Annual Conference Presentation</i>	WG17	
<b>Pedigree/Track &amp; Trace Education Task Group - CLOSED AUGUST 2011</b> <i>Provide outreach and education on all aspects of pedigree and traceability to the work group, NCPDP, the pharmacy sector and other interested participants in health care.</i>	WG17	
<b>Pharmacy Serialization Infrastructure - CLOSED AUGUST 2011</b> <i>Focus on how to leverage existing infrastructures to support serialization. Adapt to existing workflows with an eye toward longer term values. Meet current and anticipated legislative/regulatory requirements. Core principal is improving patient safety (Consumer protection).</i>	WG17	
<b>Product Identifier - CLOSED AUGUST 2011</b> <i>Evaluate the possible product identifiers and make recommendations as to the best choice for the pharmacy sector.</i>	WG17	
<b>Grandfathering – CLOSED AUGUST 2011</b> <i>Examine handling on non-pedigreed in-stock drugs and recommend solutions.</i>	WG17	
<b>DIR 835 Reporting Task Group - CLOSED November 2019</b> <i>This task group will identify use cases of DIR fees to provide visibility into the financial impact and develop guidance for recommended reporting on the X12 835.</i>	WG45	
<b>X12N 7030 834/835 TR3 Review Task Group - CLOSED November 2019</b> <i>This task group will review the X12 7030 Implementation Guides and prepare comments for NCPDP, including the 834, 835.</i>	WG45	
<b>F2 835 Needs Sub- Task Group - CLOSED November 2018</b> <i>This task group will create a tracking document and assign priority recommendations for the Document Revisions Task Group in relation to F2 changes.</i>	WG45	
<b>CAQH CORE Task Group – CLOSED NOVEMBER 2016</b> <i>This task group provides NCPDP representatives with information and pharmacy directive on CORE initiatives.</i>	WG45	
<b>Provider Enrollment Task Group – CLOSED NOVEMBER 2014</b> <i>This task group will review the CORE efforts and X12 Standards (274) to determine the need for additional field for an electronic provider enrollment standard.</i>	WG45	
<b>Central Pay for the ASC X12 5010 835 Task Group – CLOSED NOVEMBER 2014</b> <i>This task group will review the v4010 solution updating to meet the ASC X12 835 5010 requirements</i>	WG45	
<b>ASC X12N 6020 TR3 Review Task Group – CLOSED MAY 2012</b> <i>To review the 6020 version of the ASC X12N 834 and 835 and prepare comments for NCPDP.</i>	WG45	
<b>WEDI EFT NPI Utilization Issues Brief Task Group – CLOSED FEBRUARY 2012</b> <i>To review the WEDI issue brief and prepare comments from NCPDP.</i>	WG45	

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<p><b>FAQ 834 Task Group – CLOSED FEBRUARY 2011</b>  <i>This task group will develop FAQs on how to use the ASC X12 834 to resolve more challenging member identification issues. The task group will also address questions and concerns of version 4010.</i>  <b>Combined with 835 Task Group.</b></p>	WG45	
<p><b>NET Retro-Eligibility Task Group– CLOSED FEBRUARY 2011</b>  <i>Define the Business Case for Retro Eligibility that will cause the Medicaid to “Back-out” payment for claims already paid. Define the data flow in the ASC X12 835 defining the fields that will denote that the claim was a “Black-out and Chase” situation.</i></p>	WG45	
<p><b>X12 835 Liaison Task Group CLOSED AUGUST 2007</b>  <i>This task group will establish contact with X12 regarding clarification of X12 835 standards, discuss DSMO requests for additional fields and additions to external code set.</i></p>	WG45	
<p><b>HIR 592 Task Group – CLOSED MAY 2008</b>  <i>This task group will develop recommendations for the pharmacy industry regarding the reporting of missing/invalid NDC in the ANSI X12 835.</i></p>	WG45	
<p><b>835 Audit Reporting Task Group – CLOSED AUGUST 2008</b>  <i>This task group will identify the available mechanisms for reporting audit information and recommend the best business practice for the process resulting from a payer audit of paid claims.</i></p>	WG45	
<p><b>835 White Paper Task Group – CLOSED AUGUST 2008</b>  <i>This task group will review the WEDI 835 White Paper for variances to practices in the pharmacy realm and develop an NCPDP White Paper to clarify those variances.</i></p>	WG45	
<p><b>HIPAA II NPRM Task Group – CLOSED NOVEMBER 2008</b>  <i>This task group will review the NPRM and comment on those X12 Implementation Guides used in the Pharmacy Sector.</i></p>	WG45	
<p><b>DSMO 1070 Task Group – CLOSED NOVEMBER 2008</b>  <i>This task group will review the X12N 277 Health Care Claim Acknowledgments and make recommendation regarding its adoption for HIPAA.</i></p>	WG45	
<p><b>External Organization Rapid Response Task Group – CLOSED FEBRUARY 2009</b>  <i>This task group will provide rapid response to the Co-Chairs’ or Standardization Co-Chairs’ referrals regarding actions taking place in government entities or other industry organizations where responses are needed prior to NCPDP WG Meetings.</i></p>	WG45	
<p><b>Withholding Tax Task Group – CLOSED NOVEMBER 2010</b>  <i>This task group will investigate the IRS Tax Law 3402(t) to determine effects on the ASC X12 835.</i>  <i>Inactive November 2010</i></p>	WG45	
<p><b>835 Version 5010 White Paper Guidance Task Group – CLOSED NOVEMBER 2011</b>  <i>This task group is creating a white paper providing guidance on issues related to the creation of the ASC X12 835 Version 5010.</i></p>	WG45	
<p><b>Central Pay Task Group– CLOSED NOVEMBER 2011</b>  <i>This task group is reviewing the issues related to central pay and develop guidance for reporting on the ASC X12 835.</i></p>	WG45	
<p><b>Medicare Part D Low Income Cost Sharing/Low Income Subsidy (LICS/LIS) Adjustment Task Group – CLOSED NOVEMBER 2012</b>  <i>To review the current guidance and provide a consistent solution for identifying retro-active LICS/LIS adjustments to pharmacies via the ASC X12N 835 version 5010. Also update current Payment Guidance Document and 835 White Paper as necessary.</i></p>	WG45	
<p><b>Interim Final Rule for Adopting Operating Rules for EFT and ERA Task Group – CLOSED NOVEMBER 2012</b>  <i>This task group will review the Interim Final Rule for EFT and ERA to determine if guidance is need for the pharmacy industry and provide recommendations to the Work Group.</i></p>	WG45	



<b>Task Group</b>	<b>Work Group</b>	<b>Task Group Leader and Contact Information</b>
<b>Audit Adjustment/Recoupment on 835 Task Group – CLOSED NOVEMBER 2012</b> <i>To review the v4010 835 Audit Adjustment/Recoupment Examples and update for v5010.</i>	WG45	
<b>EFT Final Rule Review Task Group – CLOSED FEBRUARY 2013</b> <i>This task group will review the EFT Final Rule to determine if guidance is need for the pharmacy industry and provide recommendation to the Work Group.</i>	WG45	
<b>ASC X12 835 5010 Adjustment Task Group - CLOSED AUGUST 2013</b> <i>This task group will review any member requested business cases for adjustments and create guidance and/or examples.</i>	WG45	
<b>Harmonization Formation Task Group - CLOSED FEBRUARY 2020</b> <i>This task group will utilize the guidance provided through the Harmonization presentations given to the Work Groups at the May 2018 meetings to develop a set of recommendations for review by the Maintenance and Control Work Group. The recommendations will support the formation of a task group or committee and/or provide suggestions for task assignments to existing bodies to implement the needed harmonization.</i>		
<b>Patient Identification Task Group – CLOSED AUGUST 2019</b> <i>This task group will create the priority business use cases to enable the sharing of universal patient identifier(s), throughout the NCPDP standards, to improve interoperability, patient matching and workflow throughout the healthcare industry. If necessary, the task group may request modifications to existing standards to support the defined business cases.</i>	MC	
<b>Specialty Task Group – CLOSED AUGUST 2018</b> <i>This task group will be responsible for coordinating the other established specialty related task groups (WG7 and WG11) and provide communications and website development to position NCPDP as relevant in regards to specialty pharmacy.</i>	MC	
<b>2D Barcode Implementation Task Group – CLOSED FEBRUARY 2018</b> <i>This task group will work with manufacturers to determine how and when product packaging is being changed to comply with the Drug Supply Chain Security Act (DSCSA).</i>	MC	
<b>Real-Time Pharmacy Benefit Inquiry Task Group – CLOSED MAY 2016</b> <i>This task group will define the Use Cases and Business Requirements of a Real-Time Benefit Check.</i>	MC	
<b>Unique Device ID (UDI) Task Group – CLOSED AUGUST 2017</b> <i>This task group will be reviewing the NCPDP Standards and incorporating the Unique Device Identifier (UDI) as appropriate.</i>	MC	
<b>MC Prior Authorization Harmonization Task Group – CLOSED MAY 2016</b> <i>This task group will review the NCPDP Standards and make recommendations for the harmonization of the Prior Authorization Number.</i>	MC	
<b>PDMP White Paper Task Group – CLOSED AUGUST 2015</b> <i>This task group will develop a white paper based on discussions held on PDMP issues and recommendations provided at the focus group meeting.</i>	MC	
<b>Sig In Transactions – CLOSED FEBRUARY 2015</b> <i>This task group will determine the value of including the Sig in NCPDP transactions. If value is found they will recommend which standards should incorporate and how the Sig should be implemented.</i>	MC	
<b>ECL Implementation Review Task Group– CLOSED AUGUST 2013</b> <i>This task group is reviewing the current implementation process of the External Code List to determine if changes are needed.</i>	MC	
<b>Ordering of Diabetic Supplies Task Group – CLOSED AUGUST 2014</b> <i>This task group will develop a regulatory process for the ordering of diabetic supplies with outreach to all impacted entities.</i>	MC	

Task Group	Work Group	Task Group Leader and Contact Information
<p><b>Demographic Field Length Task Group – CLOSED FEBRUARY 2013</b>  <i>This task group reviewed lengths for demographic fields commonly used amongst all NCPDP standards and has proposed like field lengths. This task group has spawned task groups in WG1, WG7, and WG11 to review their specific standards. They are reviewing recommendations coming out of the other work group task groups to resolve any discrepancies.</i></p>	MC	
<p><b>Modeling and Methodology Task Group – CLOSED NOVEMBER 2012 – Updates of staff work will continue at MC meetings</b>  <i>The NCPDP Modeling and Methodology (M&amp;M) Task Group is responsible for creating and maintaining any NCPDP sponsored Unified Modeling Language (UML) information models for the purposes of information model comparisons and collaborations with external organizations. Participants: Members and NCPDP recognized project participants with modeling experience or participation in large scale modeling projects. Knowledge of the Unified Modeling Language (UML) would also be beneficial.</i></p>	MC	
<p><b>Pharmacy Transport Task Group - CLOSED AUGUST 2012</b>  <i>This task group is meeting with the MC Modeling and Methodology Task Group to explore looking into service based connectivity or other options for connectivity across all of healthcare.</i></p>	MC	
<p><b>Standards/Trading Partner Decision Task Group - CLOSED AUGUST 2011</b>  <i>This task group is to develop guidance to use in determining whether any question/issue brought to any task group or entity within NCPDP that is objected to is standards-based or trading partner-based.</i></p>	MC	
<p><b>DEA Response to Controlled Substances Task Group - CLOSED AUGUST 2006</b>  <i>The task group will review questions from the DEA and HHS regarding e-prescriptions for controlled substances to determine if NCPDP should answer those questions prior to the deadline. If it is determined that NCPDP should respond to any of the questions, a letter will be drafted.</i></p>	MC	
<p><b>Entities Task Group - CLOSED AUGUST 2007</b>  <i>This task group will compare the entities identified and defined on two documents, the Entities and the Business Model Documents, and get them in sync with one another. A final document was approved at the May 2007 WG meeting but the task group will remain on hold in order to provide maintenance to the document should it be requested.</i></p>	MC	
<p><b>Federal Medication Terminologies/ECL Analysis Task Group – CLOSED NOVEMBER 2008</b>  <i>This task group would analyze the Federal Medication Terminologies against the currently used codes and vocabularies in NCPDP standards and other documents to determine the potential implications of any changes. Representatives from the WG1 Post Adjudication Task Group and entities interested in compound processing will join this effort.</i></p>	MC WG1	
<p><b>Federal Medication Terminologies Task Group – CLOSED NOVEMBER 2009</b>  <i>This task group will complete the work of the task group closed last year to apply the Federal Medication Terminologies for compound processing fields.</i></p>	MC	
<p><b>HIPAA Regulatory Timelines Task Group- CLOSED NOVEMBER 2004</b>  <i>This task group is creating a white paper to educate on the steps involved in naming standards or code sets in HIPAA. The paper is being created in collaboration with X12N and HL7 representatives.</i></p>	MC	
<p><b>Values Definitions Task Group – CLOSED MAY 2008</b>  <i>This task group is defining the values with no definitions in Data Dictionary and External Code List. Participants with knowledge of NCPDP standards and their application are needed.</i></p>	MC	