

Listening Session Questions

1. Mechanisms for capturing the types of services typically furnished during the global period
 - What information would help improve the accuracy of valuation of the range of services paid for through global packages, including the pre-surgical and post-surgical care?
 - Which of these elements might be provided on a claim if reporting on activities for which no separate payment is made was required? What coding changes would be needed for such data to be provided on claims?
 - What methods other than claims-based reporting could CMS use to capture the activities typically provided during the global period?
 - What other data collection, if any, should occur concurrently with claims reporting?
 - Which of the activities are most difficult to measure and report?
 - How much consistency is there among patients in terms of the services provided pre- and post-operatively? What factors cause a variation in the services/activities that occur?
2. Determining the representative sample for the claims-based data collection
 - How could a representative sample be determined?
 - What are the advantages/disadvantages with requiring reporting only by a representative sample?
3. Determining whether CMS should collect data on all surgical services or which services should be sampled
 - If it is determined that data cannot be collected on all surgical services, how should CMS prioritize the services or kinds of services for which data will be collected?
 - Are there administrative burdens/advantages associated with reporting claims-based data on a specified subset of services within global periods?
4. Potential for designing data collection elements to interface with existing infrastructure used to track follow-up visits within the global period
 - What mechanisms, including those associated with billing systems, are currently used by providers to track activities (including visits) that are furnished but are not separately billed?
 - How could the data collection most effectively align with the ways this data is currently collected by providers?
5. The law allows Medicare to withhold 5% of a physician payment's payment until the request information is furnished.
 - Would compliance with the requirement to report be enhanced if the 5% withhold authorized in the statute was used?
 - What are the advantages and disadvantages of using the 5% withhold?
 - How would we link the post-operative visit/activities reporting to the original surgery?