

4. The differences in experience or expertise among health care practitioners, including recognition of relative preeminence in the practitioner's field or specialty and the cost of education and continuing professional education;
5. The geographic variations in practice costs;
6. The reasonable staff and office expenses deemed necessary by the Commission to deliver health care services;
7. The costs associated with a faculty practice plan affiliated with a teaching hospital; and
8. Any other factors deemed appropriate by the Commission.

(3) In making a determination under subsection (b)(3)(ii) of this section concerning the value of a health care service relative to other health care services, the Commission shall consider:

- (i) The relative complexity of the health care service compared to that of other health care services;
- (ii) The cognitive skills associated with the health care service;
- (iii) The time and effort that are necessary to provide the health care service; and
- (iv) Any other factors deemed appropriate by the Commission.

(4) Except as provided under subsection (d) of this section, a conversion modifier shall be:

- (i) A payor's standard for reimbursement;
- (ii) A health care practitioner's standard for reimbursement; or
- (iii) Arrangements agreed upon between a payor and a health care practitioner.

(d) (1) (i) The Commission may make an effort, through voluntary and cooperative arrangements between the Commission and the appropriate health care practitioner specialty group, to bring that health care practitioner specialty group into compliance with the health care cost goals of the Commission if the Commission determines that:

1. Certain health care services are significantly contributing to unreasonable increases in the overall volume and cost of health care services;
2. Health care practitioners in a specialty area have attained unreasonable levels of reimbursable services under a specific code in comparison to health care practitioners in another specialty area for the same code;
3. Health care practitioners in a specialty area have attained unreasonable levels of reimbursement, in terms of total compensation, in comparison to health care practitioners in another specialty area;