

GENERAL ASSEMBLY OF NORTH CAROLINA  
SESSION 2011

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HOUSE DRH50242-ME-68 (03/18)

Short Title: Facilitate Locum Tenens Physicians.

(Public)

Sponsors: Representative Justice.

Referred to:

1 A BILL TO BE ENTITLED  
2 AN ACT TO AMEND THE INSURANCE LAWS IN ORDER TO FACILITATE THE USE  
3 OF LOCUM TENENS PHYSICIANS TO ENSURE NORTH CAROLINA'S MEDICAL  
4 PROFESSIONALS ARE CAPABLE OF SERVING THE STATE'S EXPANDING  
5 POPULATION.

6 The General Assembly of North Carolina enacts:

7 SECTION 1. Article 3 of Chapter 58 of the General Statutes is amended by adding  
8 a new section to read:

9 "**§ 58-3-231. Payment under locum tenens arrangements.**

10 (a) As used in this section, the following definitions apply:

11 (1) "Covered visit services" means all office visits, emergency visits, and any  
12 related service performed by a physician that is covered by the insurer.

13 (2) "Insurer" has the same meaning as in G.S. 58-3-167(a).

14 (3) "Locum tenens agency" means a company authorized to conduct business in  
15 North Carolina that provides through contract locum tenens placement and  
16 administrative services for regular physicians, locum tenens physicians,  
17 medical groups, and hospitals.

18 (4) "Locum tenens physician" means a physician who substitutes for a regular  
19 physician on a temporary basis and is not an employee of the regular  
20 physician.

21 (5) "Regular physician" means the physician that is normally scheduled to see a  
22 patient, including physician specialists and a physician who has left a group  
23 practice for whom a locum tenens physician is retained.

24 (b) An insurer that provides a health benefit plan and that credentials providers for its  
25 networks shall establish and maintain a process to allow a patient's regular physician to submit  
26 a claim and, if the claim is accepted, receive payment for covered visits that the regular  
27 physician or a locum tenens agency arranges to be provided by a locum tenens physician  
28 credentialed by the insurer, provided the following are true:

29 (1) The regular physician is unavailable to provide the visit services.

30 (2) The insured patient has arranged or seeks to receive the visit services from  
31 the regular physician.

32 (3) The locum tenens physician is credentialed by the insurer prior to  
33 substituting for the regular physician.

34 (4) The locum tenens physician does not provide the visit services to insured  
35 patients of a single regular physician for more than 90 consecutive days.



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1           (5)    The regular physician identifies the services as locum tenens physician  
2           services meeting the requirements of this section by entering the proper code  
3           required by the insurer after the procedure code.

4           (6)    The regular physician pays for the locum tenens physician's services on a per  
5           diem or similar fee-for-time basis.

6           (7)    The regular physician maintains a record of each service provided by the  
7           locum tenens physician and makes this record available to the insurer upon  
8           request.

9           (c)    A medical group or hospital may submit claims for the services of a locum tenens  
10          physician substituting for a regular physician who is a member of the group or an employee of  
11          the hospital if the requirements of subsection (b) of this section are met. For purposes of these  
12          requirements, per diem or similar fee-for-time compensation that the group or hospital pays for  
13          the locum tenens physician is considered paid by the regular physician. A physician who has  
14          left the group and for whom the group has engaged a locum tenens physician as a temporary  
15          replacement may bill for the temporary physician for up to 90 consecutive days.

16          (d)    An insurer shall allow a locum tenens physician credentialed with that insurer to  
17          substitute for a regular physician in accordance with this section without a statement of  
18          supervision if (i) the regular physician is a solo practitioner or (ii) there is not otherwise a  
19          regular physician who is able to provide a statement of supervision.

20          (e)    Locum tenens agencies may contract with regular physicians, medical groups,  
21          hospitals, and locum tenens physicians to provide placement and administrative services related  
22          to the locum tenens substitution, provided the following are true:

23               (1)    The locum tenens agency charges fees that are reasonably related to the  
24               value of the services that the locum tenens agency provides.

25               (2)    The locum tenens agency does not interfere with or attempt to influence the  
26               clinical judgment of a physician providing locum tenens services."

27          **SECTION 2.** Insurers shall establish within 180 days after the effective date of this  
28          act the process required by G.S. 58-2-231, as enacted by this act.

29          **SECTION 3.** This act becomes effective October 1, 2011.