GENERAL ASSEMBLY OF NORTH CAROLINA SESSION 2011

S SENATE BILL 609

Short Title:	Facilitate Locum Tenens Physicians. (Public)
Sponsors:	Senators Rouzer and Rabon.
Referred to:	Health Care.
April 19, 2011	
A BILL TO BE ENTITLED	
AN ACT TO	AMEND THE INSURANCE LAWS IN ORDER TO FACILITATE THE USE
	UM TENENS PHYSICIANS TO ENSURE NORTH CAROLINA'S MEDICAL
	SIONALS ARE CAPABLE OF SERVING THE STATE'S EXPANDING
POPULA	
The General Assembly of North Carolina enacts:	
	ECTION 1. Article 3 of Chapter 58 of the General Statutes is amended by adding
a new section	
"§ 58-3-231. Payment under locum tenens arrangements.	
	s used in this section, the following definitions apply:
<u>(1</u>	-
	related service performed by a physician that is covered by the insurer.
<u>(2</u>	
<u>(3</u>	
	North Carolina that provides through contract locum tenens placement and
	administrative services for regular physicians, locum tenens physicians,
	medical groups, and hospitals.
<u>(4</u>	· · · · · · · · · · · · · · · · · · ·
	physician on a temporary basis and is not an employee of the regular
	physician.
<u>(5</u>	
	patient, including physician specialists and a physician who has left a group
4	practice for whom a locum tenens physician is retained.
	n insurer that provides a health benefit plan shall establish and maintain a process
-	tient's regular physician to submit a claim and, if the claim is accepted, receive
payment for covered visits that the regular physician or a locum tenens agency arranges to be	
	a locum tenens physician, provided the following are true:
<u>(1</u>	· · · · · · · · · · · · · · · · · · ·
	locum tenens physician is assisting the regular physician in providing visit
(2	<u>services.</u>
<u>(2</u>	
(2	the regular physician. The leaves tenone physician does not provide the visit services to insured
<u>(3</u>	
(1	patients of a single regular physician for more than 90 consecutive days.
<u>(4</u>	
	services meeting the requirements of this section by entering the proper code
	required by the insurer after the procedure code.



- (5) The regular physician pays for the locum tenens physician's services on a per diem or similar fee-for-time basis.
- (6) The regular physician maintains a record of each service provided by the locum tenens physician and makes this record available to the insurer upon request.
- (c) A medical group or hospital may submit claims for the services of a locum tenens physician substituting for a regular physician who is a member of the group or an employee of the hospital if the requirements of subsection (b) of this section are met. For purposes of these requirements, per diem or similar fee-for-time compensation that the group or hospital pays for the locum tenens physician is considered paid by the regular physician. A physician who has left the group and for whom the group has engaged a locum tenens physician as a temporary replacement may bill for the temporary physician for up to 90 consecutive days.
- (d) An insurer shall allow a locum tenens physician to substitute for a regular physician in accordance with this section without a statement of supervision if (i) the regular physician is a solo practitioner or (ii) there is not otherwise a regular physician who is able to provide a statement of supervision.
- (e) Locum tenens agencies may contract with regular physicians, medical groups, hospitals, and locum tenens physicians to provide placement and administrative services related to the locum tenens substitution, provided the following are true:
 - (1) The locum tenens agency charges fees that are reasonably related to the value of the services that the locum tenens agency provides.
 - (2) The locum tenens agency does not interfere with or attempt to influence the clinical judgment of a physician providing locum tenens services."

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

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