Ohio Administrative Code
Rule 5160-1-80 Substitute practitioners (locum tenens).
Effective: January 1, 2020

(A) Definitions.

(1) "Practitioner," for purposes of this rule, is a collective term for the following professionals:

(a) Doctor of medicine or osteopathy;

(b) Advanced practice registered nurse;

(c) Dentist;

(d) Optometrist;

(e) Podiatrist; or

(f) Chiropractor.

(2) "Regular practitioner" is a practitioner enrolled in the Ohio medicaid program who regularly takes care of an individual's health care needs.

(3) "Substitute practitioner" is a practitioner who generally does not maintain an individual practice and who works in place of a regular practitioner when the regular practitioner is absent;

(B) Coverage and limitations.

(1) Payment may be made for services rendered by a substitute practitioner only when the following conditions are met:

(a) Both the regular practitioner and the substitute practitioner are professionals listed in paragraph
(A)(1) of this rule;

(b) The regular practitioner is expected to be absent for a period of not longer than sixty days unless there are extenuating circumstances (e.g., active duty in the armed forces, pregnancy, extended illness);

(c) The substitute practitioner has the status of an independent contractor rather than of an employee;

(d) The substitute practitioner meets the applicable provider screening requirements described in rule 5160-1-17.8 of the Administrative Code;

(e) The substitute practitioner has not been sanctioned under medicare, medicaid, or Title XX and is not otherwise prohibited from providing services to medicare, medicaid, or Title XX beneficiaries; and

(f) The substitute practitioner receives payment from the regular practitioner as a fixed amount per diem or on a similar fee-for-time basis.

(2) Payment for a substitute practitioner is not available if a regular practitioner is a member of a practice arrangement involving more than one practitioner of the same scope or specialty.