

119<sup>TH</sup> CONGRESS  
2<sup>D</sup> SESSION

# H. R. 7686

To recognize the importance of clinical roles of locum tenens physicians,  
and for other purposes.

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## IN THE HOUSE OF REPRESENTATIVES

FEBRUARY 25, 2026

Mr. CARTER of Georgia introduced the following bill; which was referred to the Committee on Education and Workforce, and in addition to the Committees on Energy and Commerce, Oversight and Government Reform, and House Administration, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

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## A BILL

To recognize the importance of clinical roles of locum tenens  
physicians, and for other purposes.

1       *Be it enacted by the Senate and House of Representa-*  
2       *tives of the United States of America in Congress assembled,*

3       **SECTION 1. SHORT TITLE.**

4       This Act may be cited as the “Rural and Underserved  
5       Health Care Staffing Act”.

1 **SEC. 2. FEDERAL RECOGNITION OF LOCUM TENENS CLIN-**  
2 **ICAL ROLES.**

3 (a) CLASSIFICATION OF LOCUM TENENS PHYSI-  
4 CIANS.—

5 (1) IN GENERAL.—Subject to paragraph (2),  
6 for the purposes of a Federal law or program de-  
7 scribed in subsection (b), with respect to health serv-  
8 ices performed by an individual who is a qualified  
9 locum tenens physician or advanced care practi-  
10 tioner—

11 (A) such individual shall not be considered  
12 an employee of the entity on behalf of which the  
13 services are performed, including any con-  
14 tracting agency or payor;

15 (B) such entity shall not be considered an  
16 employer of such individual; and

17 (C) any remuneration paid or received for  
18 such services shall be treated as remuneration  
19 for services performed by an independent con-  
20 tractor.

21 (2) EXCEPTION FOR EXPRESS EMPLOYER-EM-  
22 PLOYEE RELATIONSHIP.—Paragraph (1) shall not  
23 apply with respect to any services for which an indi-  
24 vidual and a health care facility (or a contracting  
25 agency acting on behalf of a health care facility) ex-

1       pressly agree, in a written contract, to enter into an  
2       employer-employee relationship.

3       (b) FEDERAL LAWS AND PROGRAMS DESCRIBED.—

4       The Federal laws and programs described in this sub-  
5       section are the following:

6               (1) The Fair Labor Standards Act of 1938 (29  
7       U.S.C. 201 et seq.).

8               (2) The National Labor Relations Act (29  
9       U.S.C. 151 et seq.).

10              (3) Title VII of the Civil Rights Act of 1964  
11       (42 U.S.C. 2000e et seq.).

12              (4) The Americans with Disabilities Act (42  
13       U.S.C. 12101 et seq.).

14              (5) The Family and Medical Leave Act (29  
15       U.S.C. 2601 et seq.).

16              (6) The Employee Retirement Income Security  
17       Act of 1974 (29 U.S.C. 1001 et seq.).

18              (7) The Public Health Service Act (42 U.S.C.  
19       201 et seq.).

20              (8) Any program administered by the Depart-  
21       ment of Health and Human Services, to the extent  
22       that such program requires a determination of  
23       whether an individual is an employee of a health  
24       care facility (or a contracting agency acting on be-

1 half of a health care facility) for program participa-  
2 tion, certification, or compliance purposes.

3 (c) DEFINITIONS.—In this section:

4 (1) QUALIFIED LOCUM TENENS PHYSICIAN OR  
5 ADVANCED CARE PRACTITIONER.—The term “quali-  
6 fied locum tenens physician or advanced care practi-  
7 tioner” means an individual who—

8 (A) provides temporary medical or clinical  
9 services on a locum tenens basis at a single site  
10 for a period not exceeding 1 continuous year;

11 (B) is—

12 (i) a doctor of medicine, osteopathy,  
13 dental surgery, or dental medicine legally  
14 authorized to practice in the State in  
15 which the individual performs such serv-  
16 ices;

17 (ii) a doctor of podiatric medicine or  
18 optometry legally authorized to practice in  
19 the State in which the individual performs  
20 such services;

21 (iii) a physician, as defined in—

22 (I) section 1861(r) of the Social  
23 Security Act (42 U.S.C. 1395x(r)); or

24 (II) section 8101(2) of title 5,  
25 United States Code; or

1 (iv) a nurse practitioner, physician as-  
2 sistant, or certified registered nurse anes-  
3 thetist; and

4 (C) performs such services pursuant to a  
5 written agreement between the individual and a  
6 health care facility (or a contracting agency act-  
7 ing on behalf of a health care facility).

8 (2) STATE.—The term “State” means each of  
9 the several States, the District of Columbia, and the  
10 territories and possessions of the United States.

11 (d) RULE OF CONSTRUCTION.—Nothing in this Act  
12 shall be construed to—

13 (1) affect or preempt State laws governing pro-  
14 fessional licensure or scope of practice;

15 (2) alter the application of the Internal Rev-  
16 enue Code of 1986 (26 U.S.C. 1 et seq.), including  
17 the imposition, collection, or calculation of taxes  
18 under subtitle C of such Code (such as taxes under  
19 the Federal Insurance Contributions Act or Federal  
20 Unemployment Tax Act and related withholding) or  
21 under chapter 2 of subtitle A of such Code (self-em-  
22 ployment tax);

23 (3) alter the definition or treatment of the  
24 terms “wages” or “self-employment income”, or the

1 calculation of benefits, under title II of the Social  
2 Security Act (42 U.S.C. 401 et seq.);

3 (4) affect eligibility for, benefit computation  
4 under, or contributions to any Federal or State un-  
5 employment compensation program; or

6 (5) alter eligibility for participation or reim-  
7 bursement under—

8 (A) the Medicare program under title  
9 XVIII of the Social Security Act (42 U.S.C.  
10 1395 et seq.);

11 (B) the Medicaid program under title XIX  
12 of such Act (42 U.S.C. 1396 et seq.); or

13 (C) any other federally supported health  
14 program.

15 (e) ADMINISTRATION.—This section shall be imple-  
16 mented, as applicable, by the heads of the Federal depart-  
17 ments and agencies responsible for administering the Fed-  
18 eral laws and programs described in subsection (b). The  
19 Secretary of Health and Human Services shall implement  
20 this section with respect to the programs described in sub-  
21 section (b)(8).

22 (f) EFFECTIVE DATE.—This section shall only apply  
23 to services performed on or after the date of enactment  
24 of this Act. Nothing in this section shall affect the inter-

1 pretation of any applicable law with respect to services  
2 performed before such date of enactment.

3 (g) SEVERABILITY.—If any provision of this section,  
4 or the application of such provision to any person or cir-  
5 cumstance, is held to be unconstitutional, the remainder  
6 of this section, and the application of the remaining provi-  
7 sions, shall not be affected.

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