All applicants must answer a series of questions aimed at identifying adverse history and other areas of potential concern that are required for the review of an application. A “YES” answer to one or more of these “red flag” questions may require the applicant to submit certain information, including an explanation of the specific event or documentation. Any supporting documentation can be uploaded at the end of the section. Failure to provide accurate answers or requested documentation could result in delays or, in the most serious cases, fines or regulatory action.

Glossary

**Complaint** includes, but is not limited to, any instance where any person or organization has raised a concern regarding you or your practice regardless of the outcome.

**Investigation** includes, but is not limited to, an inquiry into (in person or otherwise), examination or inspection of, or gathering of evidence or information regarding you or your practice regardless of the outcome. This also includes requests to meet with or appear before a professional licensing board or agency, formally or informally.

**Registration** includes, but is not limited to, a number, alphanumeric, or other unique identifier assigned to a healthcare provider allowing them to prefer specific medical acts (such as the DEA registration number issued by the US Drug Enforcement Administration allowing healthcare providers to issue prescriptions for controlled substances).

**Inquiry** includes, but is not limited to, a request for information related to a concern regarding you or your practice regardless of the outcome.

1. Are you aware of any complaint or investigation or inquiry, ever, regarding you that has been received or conducted by any of the following:
   - Professional licensing board or agency (NCMB actions do not need to be included)?
   - Military service?
   - Medical or professional organization/association?
   - Local, state, federal, or other governmental agency?
   - Private or governmental insurance company or payor?
   - Hospital or other healthcare organization?
   - Professional certifying board?

2. Have you ever:
   - Withdrawn a license or registration application?
   - Been denied a license or registration?
   - Surrendered a license or registration?
   - Had a license or registration restricted or limited in any way?
   - Placed a license or registration on inactive status while under investigation?

3. In the past five (5) years, have you used or consumed any controlled substance or other prescription drug that you obtained through illegal or improper means? (If you are an anonymous participant in the NC Professionals Health Program and are in compliance with your agreement, you may answer "no" to this question.)
4. In the past five (5) years, have you used or consumed any illicit or illegal drugs including, but not limited to cocaine, heroin, ecstasy, LSD, mescaline, psilocybin, PCP and/or marijuana? (If you are an anonymous participant in the NC Professionals Health Program and are in compliance with your agreement, you may answer "no" to this question.)

5. In the past five (5) years, have you used alcohol or other substances in a manner that could in any way impair or limit your ability to practice medicine with reasonable skill and safety or have you been told you were impaired by your use of alcohol or other substances in a manner that could impair or limit your ability to practice medicine with reasonable skill and safety? (If you are an anonymous participant in the NC Professionals Health Program and are in compliance with your agreement, you may answer "no" to this question.)

6. Have you ever had a professional liability insurance policy cancelled, denied, or not renewed?

7. Have you ever been separated or discharged other than honorably from the U.S. military, Veteran's Administration, or public health service? You will be asked to agree by checking a box.

Public Notice Statement - Required by N.C. Gen. Stat. § 143-764(a)(5), effective December 31, 2017. Any worker who is defined as an employee by N.C. Gen. Stat. §§ 95-25.2(4)(NC Department of Labor), 143-762(a)(3)(Employee Fair Classification Act), 96-1(b)(10)(Employment Security Act), 97-2(2)(Workers’ Compensation Act), or 105-163.1(4)(Withholding; Estimated Income Tax for Individuals) shall be treated as an employee unless the individual is an independent contractor. Any employee who believes that the employee has been misclassified as an independent contractor by the employee’s employer may report the suspected misclassification to the Employee Classification Section within the North Carolina Industrial Commission.

Employee Classification Section
North Carolina Industrial Commission
1233 Mail Service Center
Raleigh, NC 27699-1233
Telephone: (919) 807-2582
Fax: (919) 715-0282
Email: emp.classification@ic.nc.gov

Employee misclassification is defined as avoiding tax liabilities and other obligations imposed by Chapter 95, 96, 97, 105, or 143 of the North Carolina General Statutes by misclassifying an employee as an independent contractor. [N.C. Gen. Stat. § 143-762(5)].

8. In the past five (5) years, have you been investigated for employee misclassifications as defined in the public notice statement above? If yes, please list the result of each occurrence.