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Renewal Questions for License Number 15015



License Type	Sort Name	Question	Answer	Date
Physician	Knolla, Michelle Sue, MD	(1) Inactive: Have you selected Inactive Status? Inactive means you cannot practice your profession after the expiration date of your credential, but may represent yourself as having an inactive credential.	N	9/4/2012
Physician	Knolla, Michelle Sue, MD	(2) Name Change: Are you requesting a name change or correction to your name?LL	N	9/4/2012
Physician	Knolla, Michelle Sue, MD	(3) Were you convicted a misdemeanor or felony in any jurisdiction between 10/2/10 and 10/1/12?	N	9/4/2012
Physician	Knolla, Michelle Sue, MD	(4a) Have you held a credential that was issued by another jurisdiction(s) to provide health services, health-related services, or environmental services? (If you answer "No" to 4a, answer "No" to 4b)	N	9/4/2012
Physician	Knolla, Michelle Sue, MD	(4b) Has such credential been denied, refused renewal, or disciplined between 10/2/10 and 10/1/12? (If NOT credentialed in another jurisdiction answer "No")ULL	N	9/4/2012
Physician	Knolla, Michelle Sue, MD	(5a) I am a citizen of the United States. (Neb. Rev. Stat. 38-129) NOTE: If you are a US citizen please answer "No" to 5b and c.	Y	9/4/2012
Physician	Knolla, Michelle Sue, MD	(5b) I am an alien lawfully admitted into the United States who is eligible for a credential under the Uniform Credentialing Act. (Neb. Rev. Stat. 38-129)	N	9/4/2012
Physician	Knolla, Michelle Sue, MD	(5c) I am a non immigrant lawfully present in the United States and who is eligible for a credential under the Uniform Credentialing Act. (Neb. Rev. Stat. 38-129)	N	9/4/2012
Physician	Knolla, Michelle Sue, MD	(6) Continuing Competency Waiver-Military: I have served full-time duty in the active military service of the United States, or a National Guard call to active service for more than 30 consecutive days, or active service as a commissioned officer of the Public Health Service or the National Oceanic and Atmospheric Administration during part of the 24 months immediately preceding the biennial licensure renewal date (10/2/10 and 10/1/12). If you meet this exemption, you are not required to pay the renewal fee.	N	9/4/2012

Physician	Knolla, Michelle Sue, MD	(7) Continuing Competency Waiver-Initial License: I was first licensed in Nebraska within the 24 months immediately preceding the licensure renewal date (10/2/10 and 10/1/12).	N	9/4/2012
Physician	Knolla, Michelle Sue, MD	(8) Continuing Competency: Have you completed one of the following immediately preceding the licensure renewal date (October 2, 2010 through October 1, 2012): <ul style="list-style-type: none"> • 50 hours of Category 1 continuing education approved by the Accreditation Council for Continuing Medical Education (ACCME) or the American Osteopathic Association (AOA). A licensee who has earned more than the 50 hours required for license renewal for the previous 24 month renewal period is allowed to carry over up to 25 hours to the next 24 month renewal period; OR • One year of participation in an approved graduate medical education program; OR • The AMA Physician's Recognition Award or the AOA CME certification (awarded within the 24 months immediately preceding the expiration date of your license). NOTE: If you answer "Yes" to question 8, you should answer "No" to the CE Waiver questions 6 or 7. If you answer "No" to question 8, you MUST answer "Yes" to at least one of the CE Waiver questions 6 or 7.	Y	9/4/2012
Physician	Knolla, Michelle Sue, MD	1. Are you Board Certified through an American Board of Medical Specialties (ABMS) board or an American Osteopathic Association (AOA) specialty board? (If No, skip to question 5)	Y	9/4/2012
Physician	Knolla, Michelle Sue, MD	2. If Yes to question 1, please select your primary board certification from the drop-down list of ABMS and AOA specialty boards.	AOA – Obstetrics and Gynecology	9/4/2012
Physician	Knolla, Michelle Sue, MD	3. Do you participate in Maintenance of Certification through your ABMS specialty board or in Osteopathic Continuous Certification through your AOA specialty board? (If Yes, skip to question 5)	N	9/4/2012
Physician	Knolla, Michelle Sue, MD	4. If No to question 3, do you have a lifetime certificate?	Y	9/4/2012
Physician	Knolla, Michelle Sue, MD	5. How many more years do you plan to actively practice medicine?	1-5 years	9/4/2012
Physician	Knolla, Michelle Sue, MD	6. How would you describe your primary practice setting?	Clinical, office based	9/4/2012
Physician	Knolla, Michelle Sue, MD	7. What is the zip code of your primary practice location?	68022	9/4/2012