

23-Frequently Used Forms

Claim Reconsideration Request Form
Health Plan of Nevada Complaint Form
Health Plan of Nevada I Speak Card
Health Plan of Nevada Medicaid and Nevada Check Up Member Grievance Form
Health Plan of Nevada Provider Grievance Form
Health Plan of Nevada Referral Form
Health Plan of Nevada TOC_COC Form
Maternity Risk Screen Form
Nevada Universal Prior Authorization Form
Oncology Step Therapy Exception Prior Authorization Form
Online Provider Center Forms

- **Penalties for Violations of Terms of Use**
- **Terms of Use Acknowledgement Form**

Request for Allowables Form

Additional forms applicable to Southern Nevada providers only:

SMA Imaging Services Exam Request Form
SMA Imaging Services Expectation Sheet
SMA Imaging Services Expectation Sheet-CT
SMA Imaging Services Expectation Sheet-Dexa Bone Density
SMA Imaging Services Expectation Sheet-FLOURO
SMA Imaging Services Expectation Sheet-HSG
SMA Imaging Services Expectation Sheet-IVP
SMA Imaging Services Expectation Sheet-Mammogram
SMA Imaging Services Expectation Sheet-Myelogram
SMA Imaging Services Expectation Sheet-Ultrasound