

## 23-Frequently Used Forms

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**Claim Reconsideration Request Form**

**Health Plan of Nevada I Speak Card**

**Health Plan of Nevada Provider Grievance Form**

**Health Plan of Nevada Referral Form**

**Health Plan of Nevada TOC\_COE 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**

**Primary Care Physician Change Form**

**Request for Allowables Form**

*Additional forms applicable to Southern Nevada providers only:*

**SMA Breast Pump Order Form**

**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**