



Department of Business and Industry

# Nevada Division of Insurance

1818 E. College Pkwy, Suite 103, Carson City, Nevada 89706-7942 Phone: (775) 687-0700 Web: doi.nv.gov

## Application for Certificate of Registration for Utilization Review

Certification as an agent for Utilization Review expires on March 1 of each year. There is no grace period. To obtain or continue your registration, you must complete and return this form with the required attachments. Fees are payable by EFT, check, or money order to the Nevada Division of Insurance.

New Application:  Renewal:  Nevada License/Certificate No. (renewal only): \_\_\_\_\_

Organization Name: \_\_\_\_\_

FEIN: \_\_\_\_\_ Business Telephone: \_\_\_\_\_

Business Email: \_\_\_\_\_

Principal Business Address (physical): \_\_\_\_\_

Business Mailing Address (if different): \_\_\_\_\_

Normal Business Hours: \_\_\_\_\_

Name of the Medical Director of the applicant and the state(s) in which licensed to practice medicine or dentistry. \_\_\_\_\_

Contact Person Printed Name: \_\_\_\_\_

Direct Telephone Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

I certify under penalty of perjury that I have read the foregoing application and know the contents thereof; that each statement therein made is full, true and correct. I acknowledge that any material change in the information provided herein must be filed with the Commissioner within 30 days after the change occurs.

Name(s): \_\_\_\_\_

Signature(s): \_\_\_\_\_

Attachments:

- Summary of the plan for utilization review, including a summary of procedures for the appeals process
- Registration fee - \$310 (nonrefundable)