

QUIT NOW Referral Network

Preferred Provider
Enrollment Form



1-800-QUIT NOW
Indiana's Tobacco Quitline

FAX 317.234.1786

www.IndianaTobaccoQuitline.net

The QUIT NOW Referral Network was developed by Indiana Tobacco Prevention and Cessation (ITPC) to assist health-care providers with providing proven, professional resources to help patients kick their addiction to tobacco. As a Preferred Provider with the QUIT NOW Referral Network, you will receive exclusive tobacco cessation services and materials.

QUIT NOW Referral Network Privileges

The program includes ongoing **QUIT NOW** communications to keep you up-to-date with the latest tobacco issues and research data available. **Direct Access to a Cessation Specialist** for one-on-one advice and consultation.

QUIT NOW Fax Referral Forms to directly refer patients to the Indiana Tobacco Quitline, which offers specially trained Quit Coaches® to develop individualized quit plans for people who are ready to quit.

The QUIT NOW Referral Toolkit includes:

- QUIT NOW Fax Referral Forms
- Indiana Tobacco Quitline Brochures
- Pharmacotherapy Chart
- Insurance Code Guide for Reimbursement
- Tobacco Cessation Counseling Materials
- Tobacco Cessation Posters

Please enroll me in the QUIT NOW Referral Network. There is no charge for this service.

Individual Provider's Name MCE/MHS

Practice or Organization Name _____

Type of Practice or Organization _____

Address _____

City _____ State _____ ZIP _____

County _____

E-Mail Address _____

Phone (____) _____ - _____ Fax (____) _____ - _____

Please return this form by e-mail to: ITPCQuitLineReferral@itpc.IN.gov
or fax the form to **317.234.1786**

Partnering together to combat tobacco addiction!