**QUIT NOW Referral Network** 

Preferred Provider Enrollment Form



The QUIT NOW Referral Network was developed by Indiana Tobacco Prevention and Cessation (ITPC) to assist healthcare 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 upto-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<sup>®</sup> 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
Practice or Organization Name
Type of Practice or Organization
Address
CityState 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!