

Endorsed Vendor Proposal

New Mexico Dental Association
Membership Services Committee



A. Company Information	
1. Company name.	
2. Company website address.	
3. Provide a brief description of your company, including a history of your company's experience.	
4. List the principals of your company and provide a brief bio of each person.	
5. Provide the location and contact information for your corporate office and US branches, if any.	
6. Does your company have affiliations/relationships with, or endorsement from, any associations or organizations? If so, please list, including contact name / address / telephone number.	
7. What sets your company apart from other companies?	
8. Is your company thoroughly familiar with federal, New Mexico, county and local laws/regulations regarding patient privacy?	
B. Service	
1. List the type of services/products your company provides and include all of the options available with each offering?	
2. What other services does your company provide?	
3. What is your primary business function?	
4. List all of the industries your company services and if you specialize in a particular one.	
5. What percentage of your business would you estimate is with the dental profession?	
6. What type of training is provided to a new client that retains your services?	

7. Do you provide reports to your clients? If so, are they available electronically? (Provide samples, if applicable.)	
8. Is a contract required in order to secure your services? If yes, can the contract be broken and what type of notice is required?	
C. System Requirements	
1. [List questions pertinent to the program that is being researched.	
2.	
3.	
4.	
5.	
D. Fees & Discount	
1. Please list all of the fees associated with your service.	
2. Would your company offer a discount rate to NMDA members? If so, how would the discount compare to the fees listed above in item D-1.	
3. What other fees are associated with your service that is not included in item D-1 above.	
E. Customer Service	
1. Is your company able to provide services to NMDA members on a statewide basis?	
2. During what hours of operation is your customer service area available?	
3. Would you provide a toll-free number for members to contact your company for sales and service?	

<p>4. Does your company have online services? If so, please describe.</p>	
<p>5. Does your company have a newsletter or an electronic publication that is sent to its customers? If so, please provide a sample.</p>	
<p>6. Please provide at least three customer references (dental, if possible). Please include name, address and telephone number.</p>	
<p>7. Do you offer any kind money back or customer satisfaction guarantee?</p>	
<p>8. What is the average return on investment for customers that use your services?</p>	
<p>F. Marketing</p>	
<p>1. Would your company provide marketing as follows:</p> <ul style="list-style-type: none"> a. Exhibit at the annual trade shows? (Approximately \$700/booth space rental per show.) b. Purchase ad space in the NMDA Journal, Annual Directory and Annual Session Program(s)? (~\$2000 per year depending on ad size) c. Provide collateral material containing our logo? d. Conduct a direct mailing to announce the program to members? e. Conduct one direct mailing each year for the program? 	<p>(Yes or No)</p>
<p>2. Describe additional, on-going marketing and communications support your company would provide?</p>	

G. Endorsement	
1. Would your company provide a single point-of-contact person for this program?	
2. Would your company provide remuneration to the Association? If so, please describe.	
3. Would your company provide monthly/quarterly/yearly participation and revenue reports?	
4. If selected as an endorsed program provider, would your company be willing to provide: a. Its last two-year financials for review? b. A tour of your facility and review of your company's operation?	



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