



**2 years, 50+ meetings.  
Meaningful partnership.  
Real value, guaranteed.**

The Alliance of Cardiovascular Professionals

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**\$15,000**

Strategic Alliance

# IN YOUR ATTENDANCE FEE?

This is a question you should ask way more often. Often, the answer is just that: attendance. You just can't get guarantees or added value from associations without paying through the nose, right?

That's not the only way of doing business.

What if for the cost of attending one large meeting, you could attend unlimited smaller meetings around the country? What if you could have influence on where those meetings take place—could ask the organizers to reach out to particular markets? What if there were an association that did offer guaranteed, measurable ROI and value-added?

That association is ACVP. Welcome to the new meeting model.

For a **low, flat fee**, you can:

- Attend any of our 20+ regional meetings scheduled annually.
- Receive guest passes to invite leads for free education.
- Use ACVP's network and value proposition (free CEUs for Host staff) to gain access to any market.
- Improve organic and social media reach on channels producing thousands of unique impressions per week.



## WHAT'S INCLUDED...



Alliance of  
Cardiovascular  
Professionals



# ARE CURRENT AND FUTURE DECISION LEADERS



## **Seasoned and experienced.**

The typical ACVP member has been in the field for over 10 years.

## **Current and future leaders in Cardiovascular.**

ACVP is committed to enhancing and supporting our members' professional growth. Our members make it their mission to stay current on trends in treatment and technology, and how to improve efficiency in the areas that will positively impact on the bottom line.

## **Managers and Administrators.**

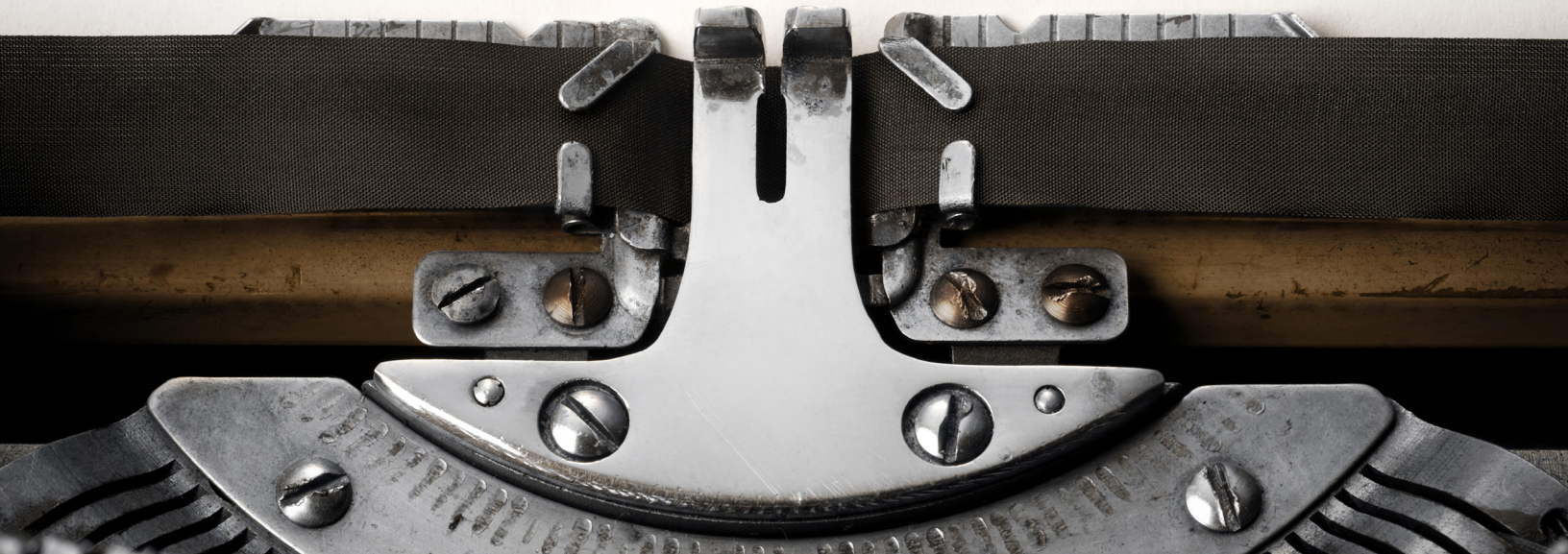
ACVP membership includes over 1000+ administrator level professionals, with responsibility for the full CV product line. Their up-line reports are usually the Executive VP, COO or even CEO in a hospital. Together, this is the decision-making team, and you have direct access.



## **Hospitals' product evaluators.**

These are the front-line professionals institutions turn to for feedback on new technology, equipment, and training. Think that doctors alone call the shots on purchasing new equipment? Ask a cardiovascular or hospital administrator. They want to hear from the end users. In cardiovascular, that's the CV tech, who is an ACVP member.

# OUR MEMBERS



# EXPAND YOUR REACH.

## Beyond the newsletter, ACVP delivers measurables.

- ACVP offers free CEUs via webinar on [cvceu.org](http://cvceu.org) which generates hundreds of click-throughs and impressions per month.
- Our email lists include 10,000+ CV professionals, and our emails boast click-to-open ratios well above industry averages.
- We publish CV Directions quarterly, the ONLY professional publication for cardiovascular allied health professionals.
- On our blog, Facebook, and LinkedIn, we produce hundreds of impressions per week with excellent click-through ratios.
- Our channels track and take advantage of sophisticated analytics, so you'll be able to see your ROI.

**Why does this matter?** ACVP understands and can help you improve your reach, both organically by providing links and trackbacks (improving your SEO), and through referral traffic. Our

excellent click-to-open and click-through ratios are indicative of the fact that our audience is specific and interested.

One Cath Lab manager told us recently that CV professionals are tech geeks. You're selling tech? *Our members want to know more.*

**Massive room to grow.** We expanded our communications capacity at the beginning of the year, and we're already seeing significant returns. That also means we have plenty of room to grow, even with a highly targeted audience.

The Alliance of Cardiovascular Professionals continues to innovate and offer members more value, and we'll be able to convert this value into more members and more impressions.

For you? This is purely value-added.

# OUR DISTRIBUTION





Marketing at association meetings seems more and more unsustainable. This will tell you why, and how the Alliance of Cardiovascular Professionals is here to help.

### **Create partnerships, not sponsorships.**

The relative effectiveness of content marketing has proven that good sales and lead generation requires the creation of relationships that are perceived as giving, not taking, and that's a fine line.

When you sponsor an event, do the attendees perceive you as a giver? Or are you simply standing at a booth, trying to take their time? The key to being perceived as a giver in a relationship, especially at an event, is to actually have a relationship with the organizers, not just pay an attendance fee.

The truth is, you don't need another sponsorship—another event you simply paid to attend—you need a partnership where the organizers are looking out for your interests. How many meetings have you attended without generating a single sale, or even a lead? There's got to be a better way to do business.

### **To grow your reach, not your costs.**

The status quo in healthcare association meetings is that cost and reach have a linear relationship. Each meeting you attend grows your reach by some percentage of attendees, and your costs by the fee of attending.

It's a simple model, but it seems outdated, doesn't it? Considering modern marketing techniques like SEO that generate organic reach with a potentially exponential relationship to cost, does business-as-usual attending meetings make sense any more? You've

probably been debating this point, but then there's the constant reminder that face-to-face contact still matters—more than ever.

So what do you do? Maybe you set a budget and spend your valuable time deciding which meetings will get you the most quality leads for the least cost. Or, you could work with an event organizer that understands your needs beyond the booth—one that advocates for ALL of its stakeholders, has a flexible, scale-able meeting model, and opportunities to distribute content and improve your SEO. At a flat fee.

### **And stay ahead of the curve.**

There's a reason that the meeting model seems so old-fashioned—there's a lot of old-fashioned associations out there. In the rapidly changing healthcare climate, their members' needs haven't changed—they still need information and education.

Plus, with regulations changing the way marketers can interact with medical professionals, you have little choice but to keep coming back. You're not in the best situation, and associations have yet to be forced to change. But some associations see this as an opportunity, not a moat.

### **With something to give.**

Even in the new regulatory environment, you still have something to offer—education. When the association you work with offers you guest passes, you can invite your leads to earn their CEUs for free. Real value.

This association does exist. It's ACVP. And you should be a partner in our **Strategic Alliance**.

# IT'S TIME FOR A NEW IDEA





# NOW AND IN THE FUTURE—ACVP.

## **The Primary Care Technician Will See You Now**

This was the name of a short article published by Bloomberg in November of 2013. Since then, the rapid rate of change in healthcare has only accelerated.

The article summarized a proposal for a new genre of allied health—what they called primary care technicians—but it spoke to general trends in healthcare toward hiring allied health workers to provide more quality care more cheaply.

Think about the trend towards Population Health—a lot of the new frameworks promote medical assistants into primary patient-related roles, and nurses into management roles.

Already, Doctors have less and less influence in more team-based approaches to healthcare.

## **The Doctor's Team Will See You Now**

Seeing a trend? This article was published in the Wall Street Journal in February, 2014. The gist? Team-based care is becoming more common, and it results in better, more cost-effective care.

Why? Many doctors do a lot of work that could be done by other members of the team. That means some systems are paying doctors' salaries for work that could be done by much cheaper allied health professionals and administrators.

Healthcare systems want to change that. How? Empowering allied health workers to take more control over every-day functions from the Lab to administration.

What does that mean for you? The decision-makers in your market are changing, potentially rapidly. You might need to change your definition of a quality lead.

## **Outpatient Surgery Centers**

Type these keywords into Google news and you'll be flooded with articles about large investments in outpatient infrastructure. This is probably a huge growth market for you, and a massive opportunity.

Outpatient Surgery Centers are more and more attractive to large health systems because they're cheaper, and they provide a ready-to-go team-based management structure with quality care.

## **How do you take advantage of these trends?**

Forge a partnership with an association with a large network and contacts in both in-patient and out-patient cardiovascular services—one that is home to current and emerging decision-makers in cardiovascular care.

That association is **ACVP**.

**AT THE HEART OF HEALTHCARE**

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## Fees for individual meeting registrations.

	<b>Partner</b>	Supplier
Tabletop at meeting	\$0	\$1,500
Infomercial	\$0	\$2,000
Panelist	\$0	\$2,500
Session sponsor	\$0	\$3,000
Meal/break sponsor	\$500	\$3,500
Focus group	\$500	\$5,000
Invitations for customers	\$0	\$500

Attending 8 meetings would cost a minimum of **\$12,000**.

## ACVP strategic alliance partnership fees.

**Platinum Partner** **\$15,000**  
**Two years, no meeting limit.**

**Gold Partner** **\$8,000**  
One year, 8 meetings.

Company: \_\_\_\_\_

Rep: \_\_\_\_\_

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

Phone: \_\_\_\_\_

**ACP-ONLINE.ORG**



**Return to**  
ACVP Partnership  
PO Box 2007  
Midlothian, VA 23113

### Payment Information

CC#: \_\_\_\_\_

Exp. Date: \_\_\_\_\_

Signature: \_\_\_\_\_