



# Virtual Grand Rounds

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## EMERGING PUBLIC HEALTH ISSUES

Southern California Wildfire Response – What Clinicians Need to Know

January 29, 2025





# Rita Nguyen M.D. – Moderator

**Assistant Health Officer,  
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**Population Health Director,  
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# Disclosure

- + The following speakers disclose no relevant financial relationships with ineligible companies: Rita Nguyen, M.D.; Dan Southard; and Cyrus Rangan, M.D., FAAP, FACMT.
- + All other planners, staff and others involved with this activity have reported no relevant financial relationships with ineligible companies whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients.
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- + Wildfire Impacts on health, what Clinicians Should Know
  - Cyrus Ranga, M.D., FAAP, FACMT
- + Department of Managed Health Care (DMHC) Response to the Southern California Wildfires
  - Dan Southard
- + Q&A

# Continuing Medical Education (CME) Offered



## Learning Objectives:

- + Describe the physical effects of wildfire on an urban community.
- + Direct patients to recovery and support resources.
- + Employ flexibility on health plan requirements during this disaster.
- + Identify keys to diagnosis and treatment of patients exposed to smoke.
- + Discriminate direct and indirect clinical impacts during and after fire events.





# Cyrus Rangan, M.D., FAAP, FACMT

**Assistant Deputy Director,  
California Department of  
Public Health Center for  
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Medical Toxicologist, Children's  
Hospital Los Angeles (CHLA)**



# Wildfire Smoke in California: Health Risks and Mitigation



# Disclosures

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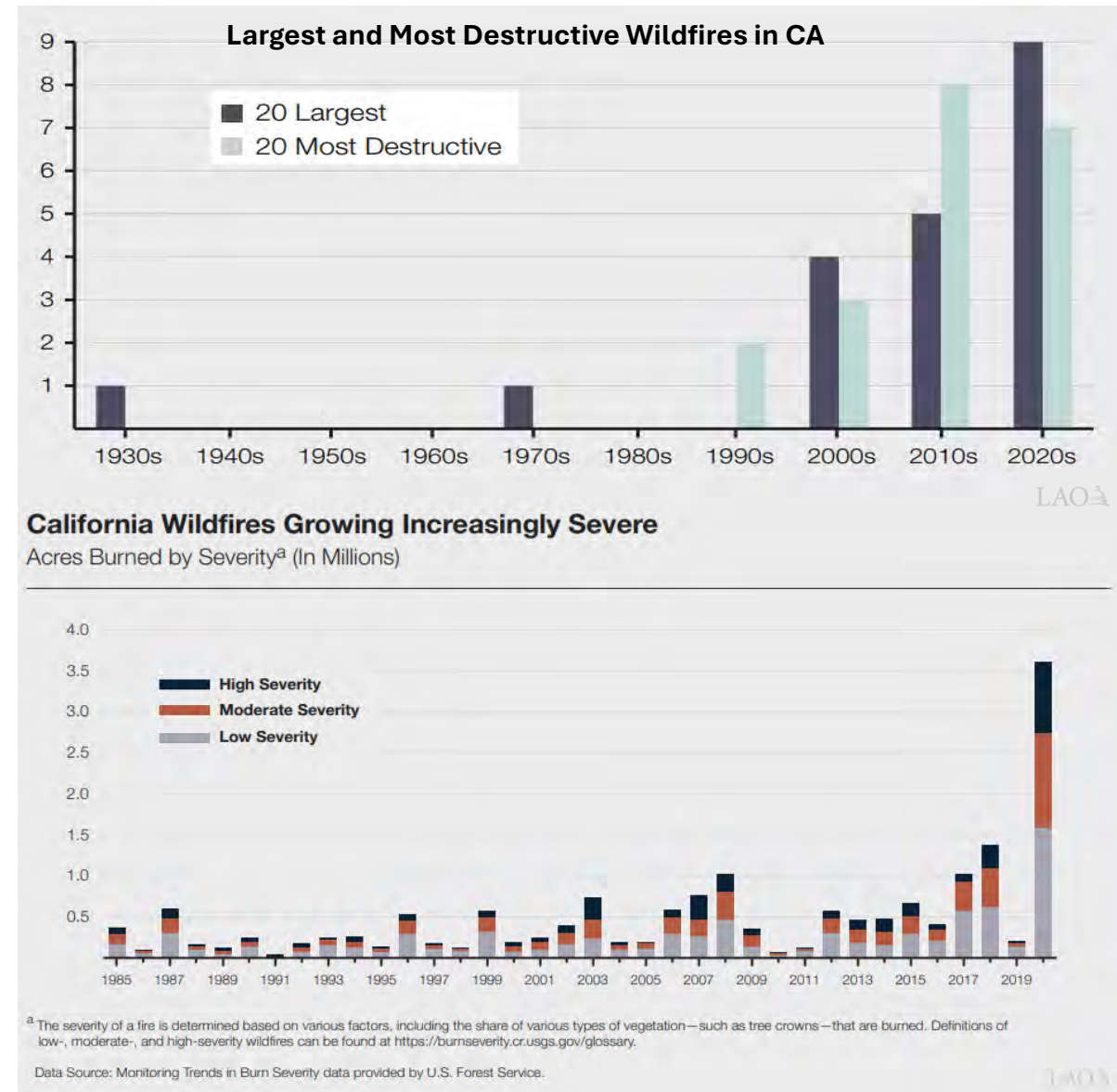


# Outline

- Background: Wildfire Trends and Patterns in California
- Air Quality Impacts of Wildfire Smoke
- Wildland-Urban Interface (WUI): A Growing Risk
- Health Effects of WF Smoke: Disproportionate Impacts Among Subpopulations
- Mitigation Strategies to Reduce Health Risks
- CDPH Programs and Activities Focused on Wildfire Smoke and Public Health

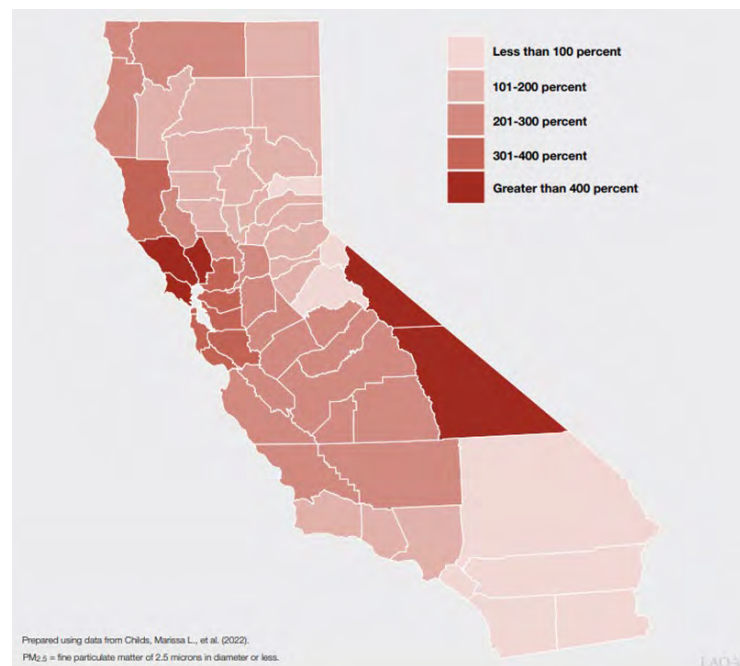
# Background

- Acres burned per year by wildfires (WF) have significantly increased nationally
- WF in CA have intensified in frequency, severity, and duration in the last two decades
- Large areas of landscape burning at high intensity produce smoke emissions near source and potentially far from fire location



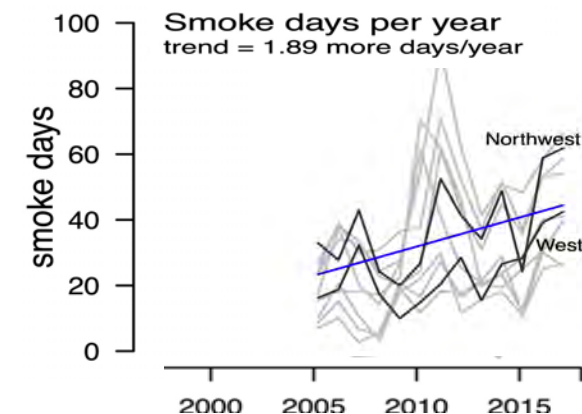
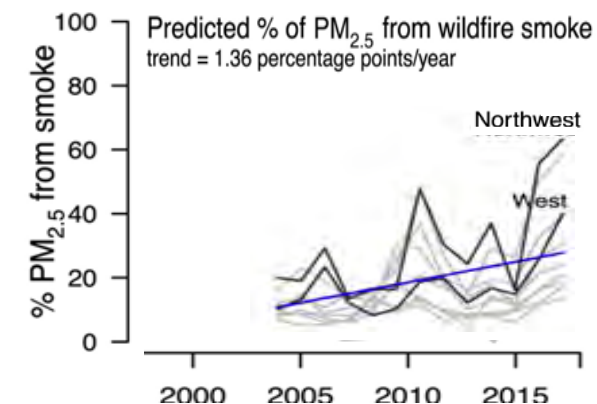
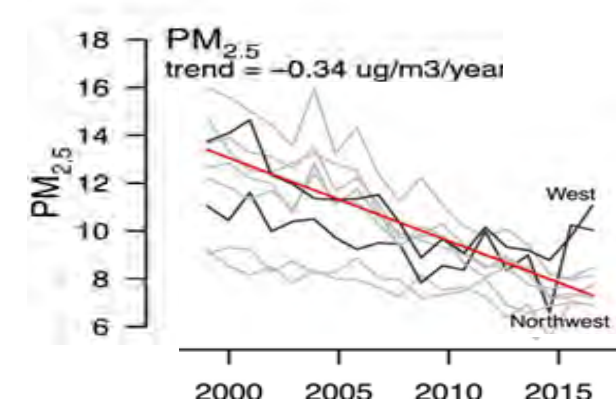
# Air Quality

- Gains made in improving air quality are being countered by WF smoke events
- Number of smoke days has increased in Western U.S.
- WF smoke accounts for up to 50% of concentrations of fine particulate matter (particles less than 2.5 micron in diameter,  $PM_{2.5}$ ) in Western U.S.
- Most of CA has experienced large increases in WF-driven air pollution



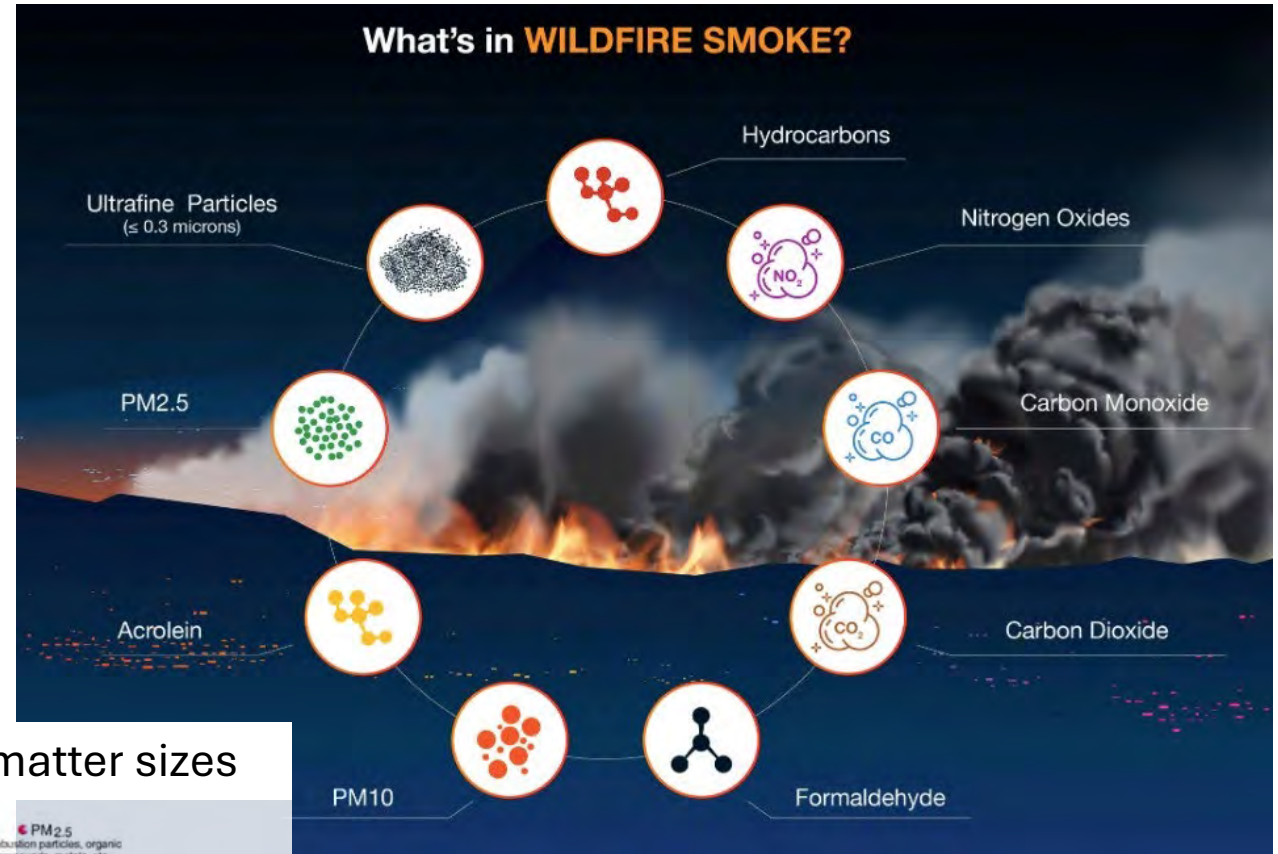
Percent increase in estimated annual average  $PM_{2.5}$  from wildfires between 2007-2013 & 2014-2020

([LAO](#)) (2022)



# Wildfire Smoke Composition

- Biomass combustion (e.g., vegetation/wood) emits particles into the air
  - Coarse particles ( $PM_{10}$ ) (Ash/soot)
  - Fine particles ( $PM_{2.5}$ ) (Soot/organic matter)
  - Ultrafine/nano particles (UFP  $<0.1 \mu m$ )
  - Gaseous pollutants – carbon dioxide, carbon monoxide, nitrogen oxides, formaldehyde, benzene
  - Volatile organic compounds (VOCs)
  - Metals
- Fuels and burn conditions can impact both the composition and toxicity of smoke emissions
  - Vegetation type
  - Moisture/Wind/Temperature
  - Flaming vs. smoldering
  - Soil composition



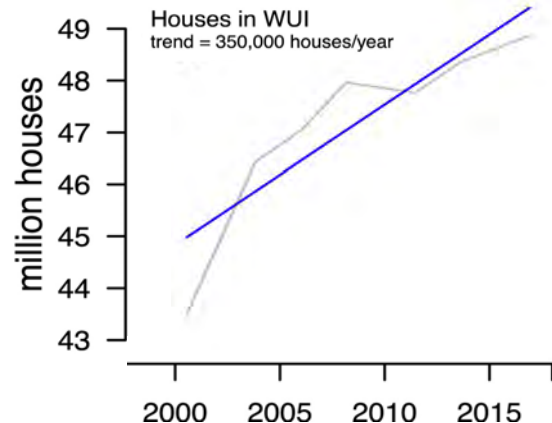
Particulate matter sizes



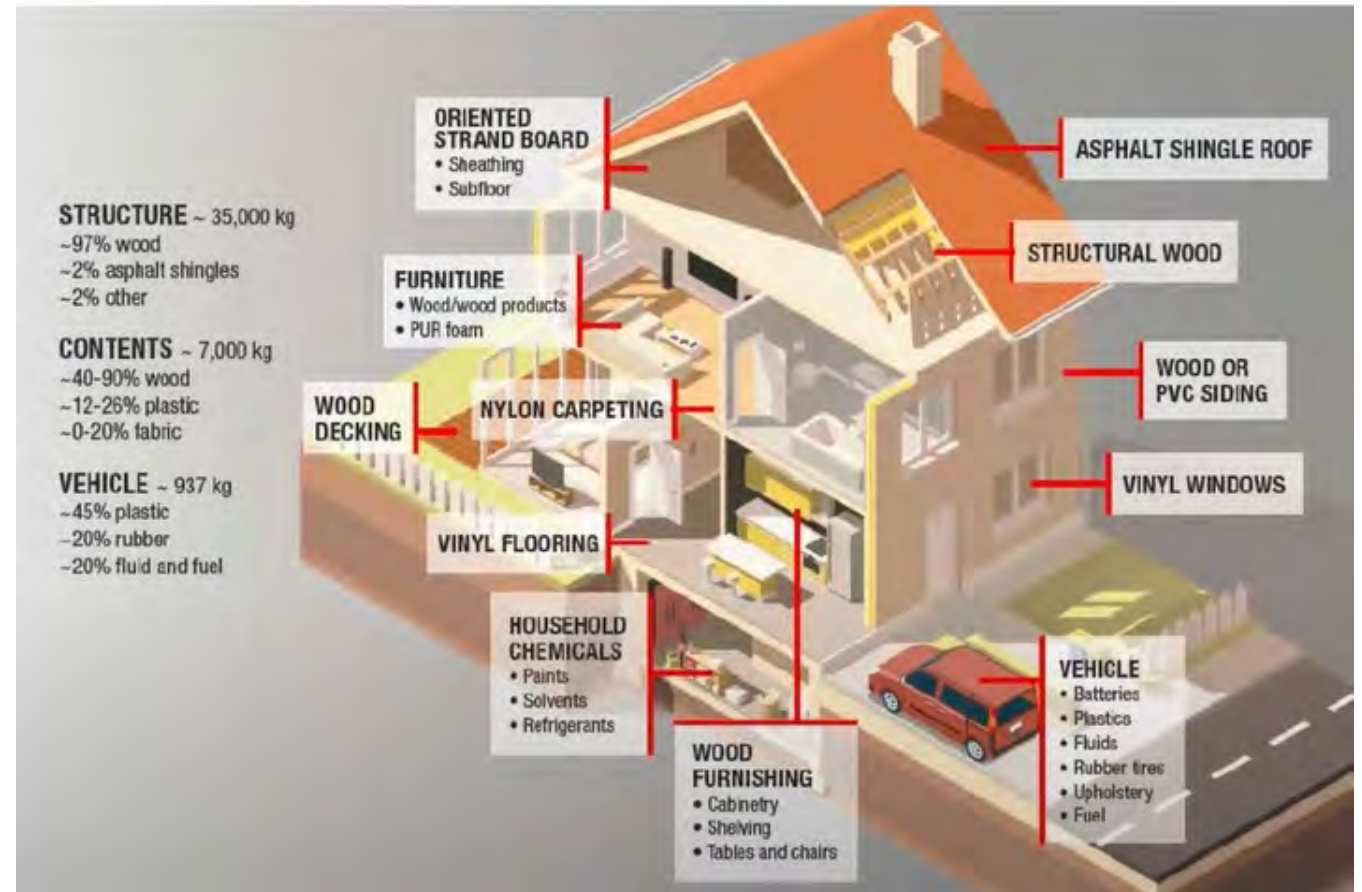
US EPA, IQAir

# Wildland-Urban Interface (WUI)

- CA has the greatest number of houses in WUI
- 5 million housing units (45% of CA's total housing) are in WUI (Li et al., 2022)
- Expansion of homes in WUI brings structures and populations in closer proximity to WF-prone areas
- Smoke from treated wood used in structures generate toxic fumes



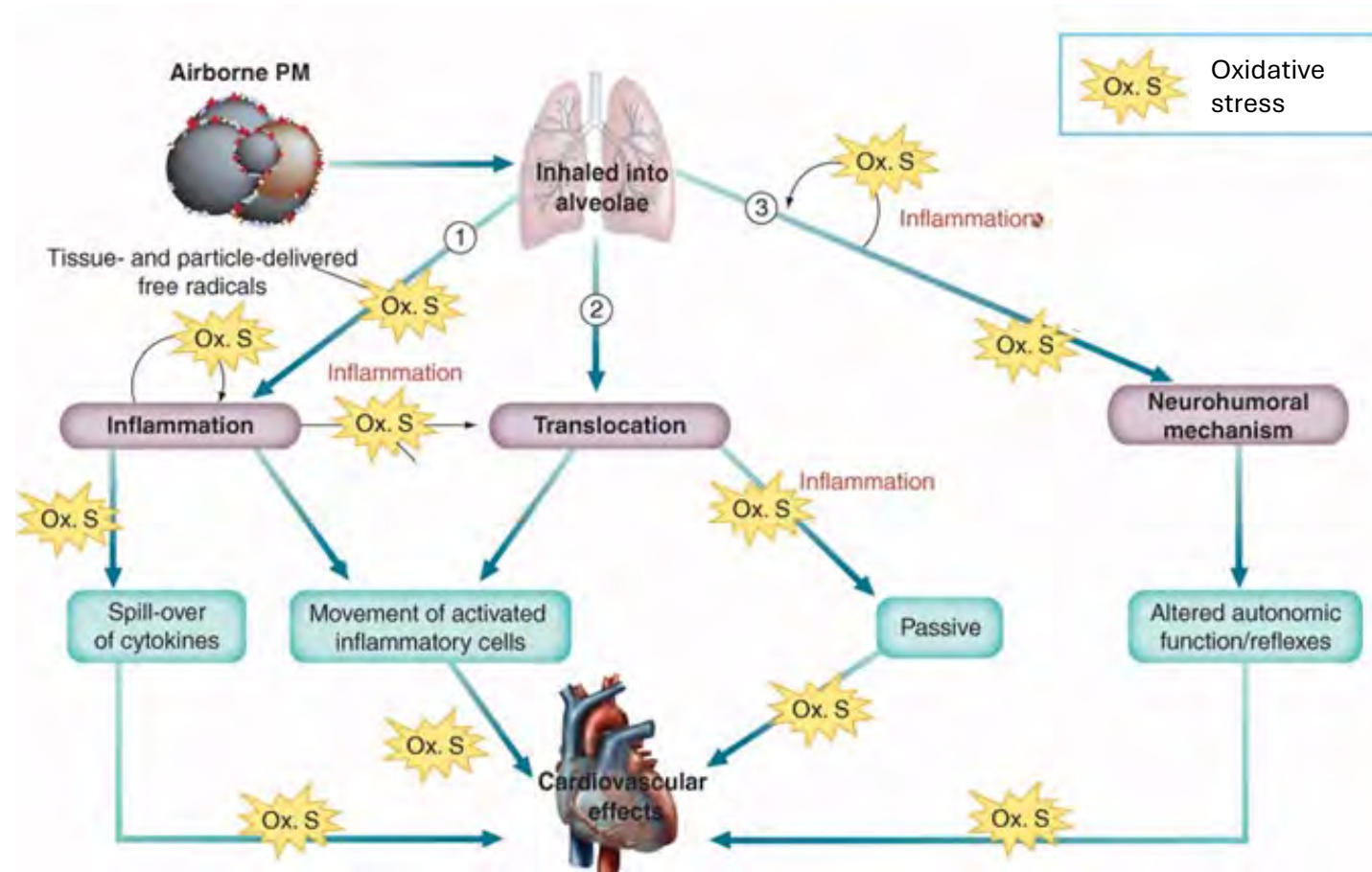
Burke et al. (2020)



Averett et al. (2024)

# Health Effects of Wildfire Smoke

- PM<sub>2.5</sub> is generally the largest fraction of WF smoke and a key pollutant of health concern
- **Acute Symptoms:** eye irritation, sore throat, wheeze, cough, chest pain
- **Health outcomes** associated with WF smoke exposure:
  - Mortality (all-cause, cause-specific)
  - Morbidity (asthma exacerbation, COPD, cardiovascular events etc.)
  - Pregnancy/birth outcomes (hypertensive disorders, preterm birth, low birth weight)
  - Cognitive impairment
  - Mental health (anxiety, depression, stress)



US EPA

# Health Effects of Wildfire Smoke

	Infectious Disease	Toxic contaminants	Physical
GI	<ul style="list-style-type: none"> <li>• Damaged food (power outage)</li> <li>• Mass feeding at shelters: unsafe food handling, storage, donated food prepared at home</li> <li>• Food prep with contaminated water</li> <li>• Contaminated drinking water (private wells)</li> <li>• Sewage leaks</li> <li>• Vector-borne</li> </ul>	<ul style="list-style-type: none"> <li>• Fire damaged food (refrigerated food, contaminated agricultural/backyard produce)</li> <li>• Drinking water (municipal systems/private wells) – VOCs from burnt pipes, external contaminants.</li> </ul>	
Dermal	<ul style="list-style-type: none"> <li>• Infectious agents in shelters</li> </ul>	<ul style="list-style-type: none"> <li>• <a href="#">wildfire smoke</a>, exposure to corrosives</li> <li>• Skin dryness/irritation</li> </ul>	Burns, fire debris, sharps including metal and glass
Respiratory	<ul style="list-style-type: none"> <li>• Shelters – overcrowding/vulnerable people</li> <li>• Occupational – Valley fever in fire fighters</li> </ul>	Air pollutants in wildfire smoke, particularly PM 2.5 + metals, VOCs, etc.	

# Health Effects of Wildfire Smoke

	Infectious Disease	Toxic contaminants	Physical
Cardiovascular		Air pollutants in wildfire smoke, particularly PM 2.5	
Cancer		Air, water, food, soil contaminants from multiple sources: combustion byproducts including VOCs, heavy metals, POPs, asbestos, formaldehyde and other construction material-associated toxics; Industrial releases	Radiological release
Pregnancy		Miscarriages, LBW, preterm birth	
Lead Exposure		Potential exposure to lead in air and soil	



# Mental and Other Impacts, Resources

- Community mental Health – due to health impacts, lost property and community, evacuation, places of work and worship
- Responder mental Health – particularly responders who live(d) in impacted areas
- Easier access to drugs and illicit substances in abandoned homes
- Easier access to firearms
- Resource for pediatric healthcare providers (includes mental health resources): <https://wrap-em.org/>
- [Health Facility Evacuations](#)
- [Emergency Prescription Assistance Program \(EPAP\)](#)
- Prevention of [Norovirus](#) and [Respiratory Viruses](#) in Shelters
- [Food safety after fire damage](#)
- [Mental Health](#) and [CalHOPE](#)
- [California WIC](#)
- LA County Health and safety: <http://publichealth.lacounty.gov/eh/safety/returning-home-after-fire.htm>
- [AirNow Fire and Smoke Map](#)
- [CDPH Wildfire Smoke: Considerations for California's Public Health Officials](#)

# Disproportionate Impacts

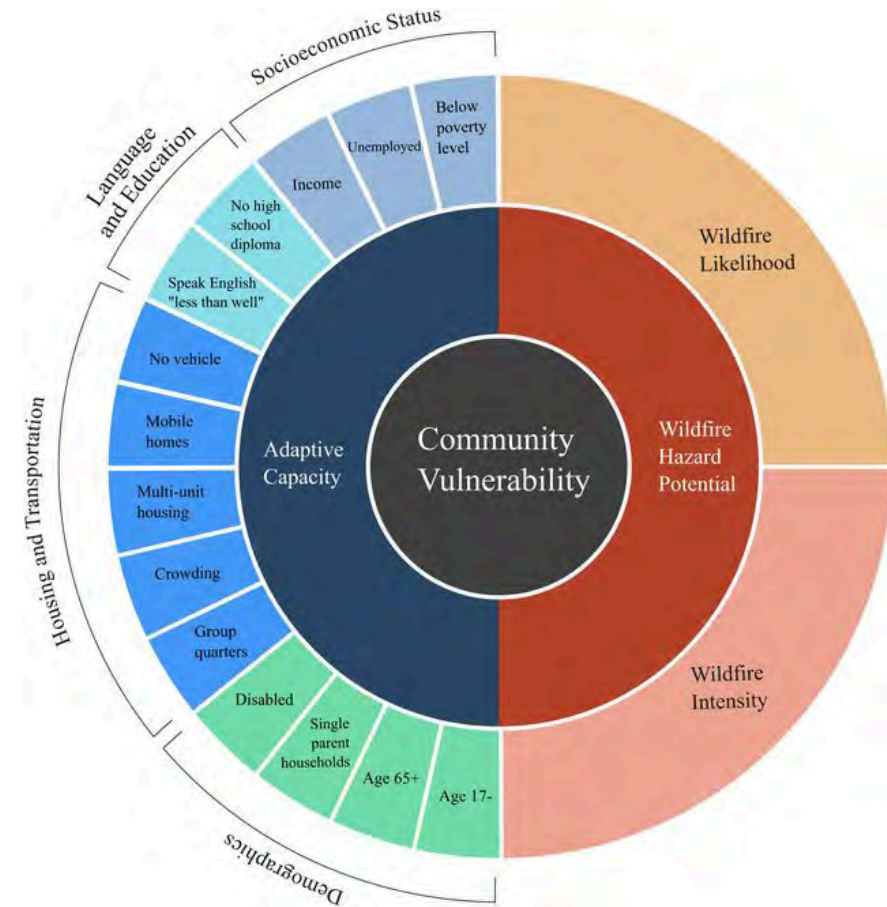
Who is most at risk to wildfire smoke inhalation?

## Sensitive Populations



## Demographic, Socioeconomic, Geographic Factors

- Low-income, communities of color, indigenous communities
- Areas with high air pollution and/or high baseline morbidity
- Environmental justice communities
- Outdoor workers
- Unhoused populations
- Rural/WUI communities



# Los Angeles County Resources

- If you've been affected by the wildfires, [this link](#) provides answers to common questions about accessing and replacing medications. It also explains the disaster response rules for pharmacies and insurers. Public Health wants to know if their rules are being followed. If you were charged more than your usual copay or experienced other issues, please report it by clicking [here](#).



## 1. I lost my medications. How can I get them replaced?

If you have been affected by the wildfire emergency, there are several different options to get your medications replaced. You do not need to have your prescriptions or your prescription bottles. Note, if your medication is a controlled substance, such as a strong painkiller, see question 2.

- **Go to a pharmacy:**
  - If possible, call or visit the pharmacy where you originally filled your prescription.
  - If your pharmacy is part of a chain, but is closed or you can't access it, go to any pharmacy in the same chain. They can look up your records in their system. If you cannot get to your pharmacy or pharmacy chain, you can go to any pharmacy that is open. They can transfer your prescriptions. If they can't reach your regular pharmacy or your doctor, they may be able to give you enough medicine to use until you can get your regular supply. This is allowed in emergencies like the LA fires, see [pharmacy.ca.gov/licensees/state\\_of\\_emergency\\_la.pdf](https://pharmacy.ca.gov/licensees/state_of_emergency_la.pdf)

Note: During this emergency, wherever you get your prescription filled, you should only have to pay your usual copay. This applies even if it is too early for a regular refill or if you go to a pharmacy that is not in your network. For more information, see [dmhc.ca.gov/Resources/Newsroom/PressReleases/january9\\_2025.aspx](https://dmhc.ca.gov/Resources/Newsroom/PressReleases/january9_2025.aspx).

- **Call your insurance company:** During an emergency, insurance companies can send your prescriptions to a pharmacy and allow early refills. They can also help with your medical supplies and equipment. This includes Medicare and all Medicare Advantage plans.
  - *Information for L.A. Care members:* <https://www.lacare.org/members/health-news-advisories/los-angeles-wildfires-2025-member-services-updates>
  - *Information for Health Net members:* [https://www.healthnet.com/content/healthnet/en\\_us/news-center/news-releases/2025-01-08-health-net-providing-special-assistance-members-affected-palises-fires.html](https://www.healthnet.com/content/healthnet/en_us/news-center/news-releases/2025-01-08-health-net-providing-special-assistance-members-affected-palises-fires.html)
  - *Information for Medicare members:* [cms.gov/files/document/dme-emergency-provider-response-support-tool.pdf](https://cms.gov/files/document/dme-emergency-provider-response-support-tool.pdf)
- **Contact your doctor:** If you can reach your healthcare provider or clinic, tell them you need an emergency prescription refill.
- **Use a telehealth service** if none of the above work or if you need a new prescription. See questions 4 and 5.

# Los Angeles County Resources

## **HEALTH INSURANCE COVERAGE FOR WILDFIRE DISASTER VICTIMS**

California residents can enroll in health coverage through Covered California until Jan. 31, 2025, by either visiting [CoveredCA.com](https://CoveredCA.com) or by calling Covered California at [\(800\) 300-1506](tel:8003001506). FEMA-emergency-affected individuals will have up to 60 days from the end of the FEMA-designated incident period to select a new Marketplace plan or make changes to their existing Marketplace plan. They must contact the Marketplace Call Center at [1-800-318-2596](tel:18003182596) or TTY at [1-855-889-4325](tel:18558894325) and indicate they were eligible for an enrollment window but were unable to complete their enrollment due to a FEMA-designated emergency or disaster.




For more information, please visit: [https://www.cms.gov/ccio/resources/regulations-and-guidance/fema\\_sep](https://www.cms.gov/ccio/resources/regulations-and-guidance/fema_sep) and <https://www.cms.gov/newsroom/news-alert/cms-announces-resources-and-flexibilities-assist-public-health-emergency-state-california>.

# Los Angeles County Resources

## LA County Wildfires- Resources for Schools

Environmental Health and Safety

### LA County Resources for Schools

Title (Publishing Agency)	Thumbnail	Description
<p><b>Memo: Get Smart about Wildfire Smoke-Guidelines for Schools and Wildfire Smoke (California Department of Education)</b></p>	 <p><a href="#">Click Thumbnail</a></p>	<ul style="list-style-type: none"> <li>• State guidance for schools during wildfire season. Includes:               <ul style="list-style-type: none"> <li>○ Air Quality Index &amp; Activity Recommendations</li> <li>○ Resources for tracking Air Quality Information</li> <li>○ Information about masks and recommendations</li> <li>○ Recommendations for ensuring cleaner air at school</li> <li>○ Considerations for districts before closing a school</li> </ul> </li> </ul>
<p><b>During Wildfires When to Take Precautions (South Coast AQMD)</b></p>	 <p><a href="#">Click Thumbnail</a></p>	<ul style="list-style-type: none"> <li>• One pager visually highlighting when to take precautions during wildfires</li> </ul>
<p><b>Healthy Indoor Air Quality in Schools (United States Environmental Protection Agency)</b></p>	 <p><a href="#">Click Thumbnail</a></p>	<ul style="list-style-type: none"> <li>• Framework for Effective School Indoor Air Quality (IAQ) Management</li> <li>• IAQ Tools for Schools Action Kit</li> <li>• IAQ Tools for Schools Preventative Maintenance Guidance Document</li> <li>• On-Demand Training Webinars</li> </ul>

LA County Wildfires- Resources for Schools  
1/16/2025

# Los Angeles County Resources

## Clean-Up After a Fire

### Clean-Up After a Fire – Frequently Asked Questions

January 15, 2025

ENVIRONMENTAL HEALTH



The Los Angeles County, Department of Public Health, Environmental Health Division, is here to provide guidance and support as you recover after a fire. Please note. Even after a fire is out, hazards may persist, and precautions should be taken for the health and safety of you, your family, and your community. Below are frequently asked questions and answers to help guide you in your clean-up efforts.

1. **What should I wear when returning to inspect and clean-up my property in an impacted area?**

**Wear proper protective equipment, highly recommended, including:**

- **N95 or P100 respirator mask:** Filters out harmful particles from the fires from the air you breath.
- **Gloves:** Protect hands from cuts and harmful ash, dust, dirt, and chemicals during inspection and clean-up.
- **Long-sleeved shirt and long pants:** Shield arms and legs from ash, dust, dirt, sharp objects, and other potential hazards.
- **Sturdy closed-toe shoes:** Keep feet safe from debris, sharp objects, and other potential hazards.
- **Safety Goggles:** Protect eyes from harmful ash, dust, and dirt that may be stirred up during inspection and clean-up.

2. **Can I wear a wet cloth over my nose and mouth instead of a respirator mask while I clean up?**

**Wearing a wet cloth, instead of a respirator mask, is not recommended. A wet cloth is not as effective as a respirator mask. While it can block larger particles, it won't protect against fine particles resulting from smoke and stirred up ash. Use a properly fitted N-95 or P-100 respirator mask with no gaps around the edges for better protection.**

# Mitigation

## Indoor air quality solutions:

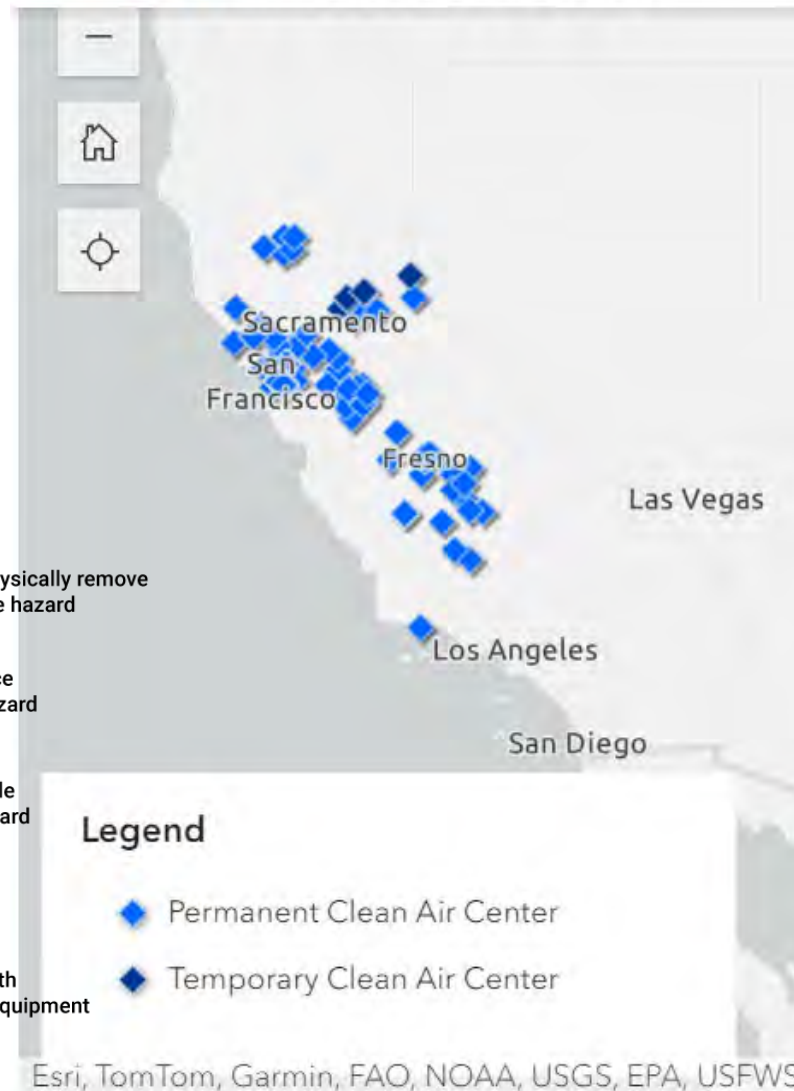
- Access Clean Air Centers (AB 836)
- MERV 13 or higher rated filters
- Air conditioning/portable air cleaner
- Create clean air rooms/spaces in homes
- Weather stripping, foam taping windows and doors

## Risk mitigation/personal interventions:

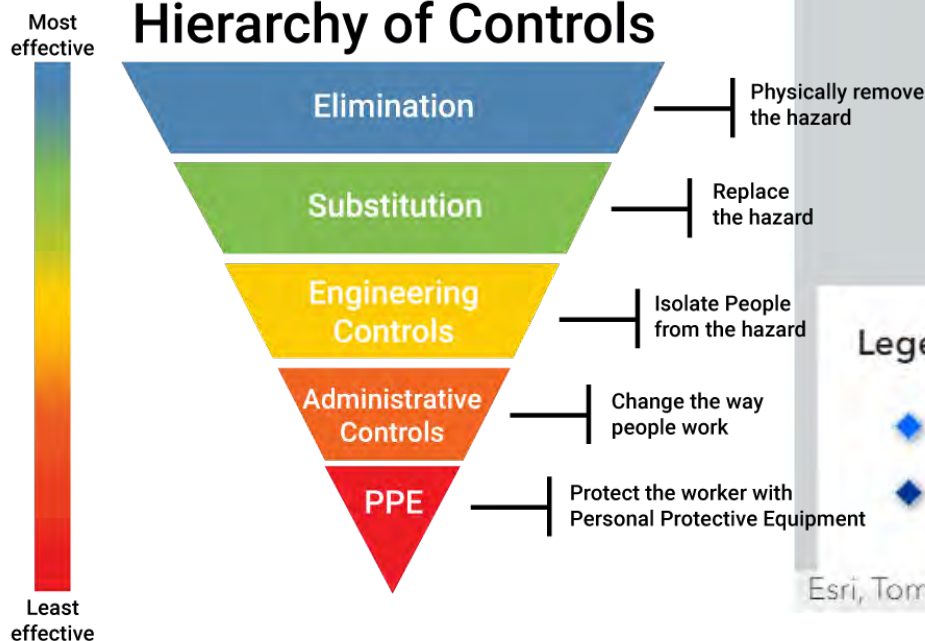
- Stay indoors
- Reduce activity
- Limit infiltration

## Personal Protective Equipment (PPE):

- Properly fitted N95 respirators



## Hierarchy of Controls



# Mitigation

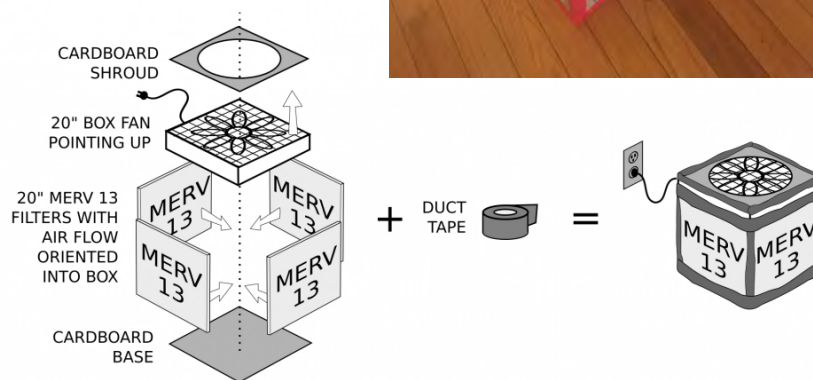
- How to build a DIY air filter with a box fan, tape, and MERV13 filters – CorsiRosenthal Box

[20 inch \(standard size\) Box fan](#)

[20x20x1 or 20x20x2 MERV 13 furnace filters](#) (1, 2, 4 or 5 filter designs available)

[Duct tape or packing tape](#)

[DIY box-fan instructional video](#)



## HOW TO BUILD A CORSI-ROSENTHAL BOX

The Corsi-Rosenthal Box is an affordable DIY air-cleaning system made with simple materials found in hardware stores. The box fan pulls air through the filters on the sides and blows out clean air. It is proven to reduce indoor exposure to airborne particles, including those containing the virus that causes COVID-19. The box can also decrease the levels of other particles in the air, such as dust or wildfire smoke.

**THE MATERIALS**

- Filters can last up to a year
- Keep away from walls and corners
- 4 Filters: 3M MPR 1900 (20" x 20" x 1" or 20" x 25" x 1") or MERV 13 (20" x 20" x 2" or 20" x 20" x 1" or 20" x 25" x 2" or 20" x 25" x 1" [2-inch preferred])
- Lasko or Mainstays 20-inch Box Fan
- Scissors, Utility Knife, Duct Tape

**THE CUBE**

- Arrange the filters to create a symmetrical structure
- Ensure the arrows are pointing inwards
- Duct tape the four edges
- Vertical orientation of the pleats is preferred

**THE BASE**

- Use one side of the fan's cardboard box
- Cut the cardboard to fit the base of the cube
- Duct tape it on all four sides

**THE FAN**

- Place the fan on top of the cube (air must blow upward)
- Seal all sides, including corners
- Ensure any holes on the side of the fan are sealed off with duct tape

**THE SHROUD**

- Cut the other cardboard sheet to fit the top of the fan
- Cut a circular hole (Diameter: 15" for Lasko and 16" for Mainstays)
- Place the shroud on the fan and tape it on all four sides
- The shroud increases efficiency and decreases the noise level

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Illustrator: Marija Mladenović Creator: Shiven Taneja



# CDPH Environmental Health Laboratory Branch (EHLB) Filtration for Respiratory Exposure to Wildfire Smoke from Swamp Cooler Air (FRESSCA-Mujeres Project)



Swamp cooler filters



Air sampling & low-cost sensors

- Assessing smoky air + heat stress inside CA farmworker homes
- Community-led team to evaluate exposures & solutions
  - Farmworker women participants were **provided swamp cooler DIY filters + indoor air cleaners**
  - **Low-cost sensors + measurements** of 52 airborne chemicals (particles & gases), indoors vs. outdoors
  - **Urine & saliva measurements** of chemicals & biomarkers of stress
  - **Results return & community meetings** for air quality & biomonitoring

# Resources

## **WF Smoke Mitigation Program (Preventive Health and Health Services Block Grant)**

[PHHSG FFY 2024 California State Plan](#)

## **Wildfire Forecast and Threat Intelligence Integration Center (WFTIIC) Situational Awareness Dashboard**

[Wildfire Forecast and Threat Intelligence Integration Center](#)

## **Interagency Wildland Fire Air Quality Response Program (IWFAQRP) Smoke Outlooks**

[Current Smoke Outlooks \(wildlandfiresmoke.net\)](#)

## **California Syndromic Surveillance Program (CalSyS)**

[About CalSyS \(California Syndromic Surveillance\) Program](#)

## **Assembly Bill (AB) 619 – Air Quality Health Plan for Wildfires**

[Bill Text - AB-619 Air quality. \(ca.gov\)](#)

## **Assembly Bill (AB) 836 – Wildfire Smoke Clean Air Centers for Vulnerable Populations**

[Wildfire Smoke Clean Air Center Grant | California Air Resources Board](#)

# Resources

## **Public Health Impact of Prescribed Fire (PHIRE) Study**

Hayashi, T., Thilakaratne, R., Hoshiko, S., Rosenberg, A., Buckman, J. R., & Rappold, A. G. (2023). California Wildfire Smoke and Air Pollution Health Burden Mapping Dashboard.

<https://experience.arcgis.com/experience/25873f6d310741e9bcbf2cbf3c87d904>.

Hoshiko et al. (2023). Responses to Wildfire and Prescribed Fire Smoke. A Survey of a Medically Vulnerable Adult Population, Mariposa County. <https://doi.org/10.3390/ijerph20021210>

Thilakaratne et al. (2023). Wildfires and the Changing Landscape of Air Pollution-related Health Burden in California. <https://doi.org/10.1164/rccm.202207-1324OC>

Rosenberg et al. (2024). Health Impacts of Future Prescribed Fire Smoke: Considerations from an Exposure Scenario in California. <http://doi.org/10.1029/2023EF003778>

## **FRESSCA Project**

[FRESSCA \(Filtration for Respiratory Exposure to wildfire Smoke from Swamp Cooler Air\)](#)

[Filtration for Respiratory Exposure to wildfire Smoke from Swamp Cooler Air \(FRESSCA\) – Mujeres](#)

[FRESSCA Mujeres – Stories of Resilience – YouTube](#)

# Acknowledgments

**Andrew Rosenberg**

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# Dan Southard

Chief Deputy Director,  
Department of Managed  
Health Care (DMHC)





# Virtual Grand Rounds

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## EMERGING PUBLIC HEALTH ISSUES

Department of Managed Health Care (DMHC)  
Response to the Southern California Wildfires

Dan Southard

Chief Deputy Director

Department of Managed Health Care





# What is the DMHC?





# Regulator of full service and specialized health plans

- + All HMO and some PPO/EPO products
- + Some large group and most small group & individual products
- + Most Medi-Cal Managed Care plans
- + Dental, vision, behavioral health, chiropractic and prescription drug plans
- + Medicare Advantage (for financial solvency only)







# DMHC Response to the Southern California Wildfires

+ Health and Safety Code 1368.7 requires health plans to file notification with the DMHC within 48 hours of a proclaimed state of emergency.





# The health plans notification to the DMHC must describe:

- + Whether the health plan has or expects to have a disruption in its operations;
- + How the health plan is communicating with potentially impacted members; and
- + The actions the health plan has or will take to ensure members health care needs are met.





On January 9, 2025, the DMHC issued an [All Plan Letter](#).

Gavin Newsom, Governor  
State of California  
Health and Human Services Agency  
**DEPARTMENT OF MANAGED HEALTH CARE**  
980 9<sup>th</sup> Street, Suite 500  
Sacramento, CA 95814  
Phone: 916-324-8176 | Fax: 916-255-5241  
[www.DMHC.ca.gov](http://www.DMHC.ca.gov)

**DEPARTMENT OF  
Managed  
Health Care**

**ALL PLAN LETTER**

**DATE:** January 9, 2025

**TO:** All Full-Service and Specialized Health Plans<sup>1</sup>

**FROM:** Sarah Ream  
Chief Counsel

**SUBJECT:** APL 25-001 - Southern California Fires and Enrollees' Continued Access to Health Care Services

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On January 7, 2025, California Governor Gavin Newsom [proclaimed](#) a State of Emergency in Los Angeles and Ventura Counties due to the Palisades Fire and windstorm conditions.

**I. Health plans must notify the DMHC regarding the actual or potential impact to plan operations and enrollees**

Per Health and Safety Code section 1368.7, health plans must provide enrollees who have been displaced or whose health may otherwise be affected by a state of emergency with access to medically necessary health care services. Within 48 hours of a proclaimed state of emergency that displaces or affects (or could displace or affect) the plan's enrollees or providers, plans must file with the DMHC a notification describing:





# The DMHC's All Plan Letter directed health plans to:

- + Ensure members have access to medically necessary care, including medically necessary prescription drugs.
- + Ensure the health plan has a toll-free telephone number members or providers may call for answers to questions regarding loss of ID cards, RX refills, and how to access services.
- + Prominently display on the health plan's website information describing how impacted members can continue to access health care services and how members and providers can contact the plan for more information.





# The DMHC's All Plan Letter directed health plans to:

- + Suspend prescription refill limitations without authorization and allow impacted members to utilize out-of-network pharmacies at the same in-network cost sharing.
- + Allow members to replace medical equipment or supplies.
- + Allow members to access care from out-of-network providers if in-network providers are unavailable within the timely access or geographic standards or if the member is outside the service area due to displacement. The member shall only be subject to their in-network cost sharing.





# The DMHC's All Plan Letter directed health plans to:

- + Reduce or remove unnecessary barriers for the efficient admission, transfer, and/or discharge of health plan members to/from contracted or non-contracted hospitals.



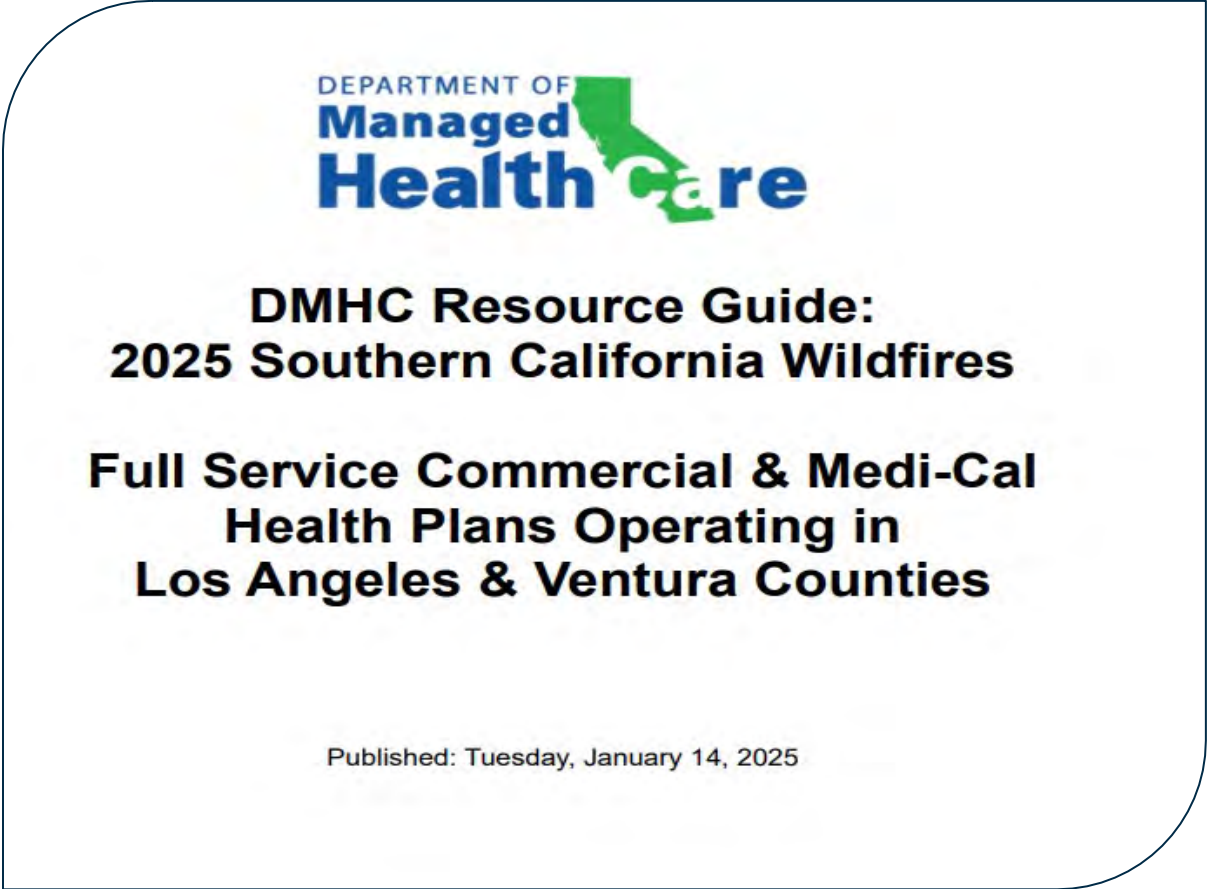
# The DMHC's All Plan Letter encouraged health plans to:

- + Shorten time frames for prior approvals, pre-certifications, referrals and to extend the time such approvals, pre-certifications and referrals remain valid.
- + Extend the health plans claim filing deadlines.



# On January 14, 2025, the DMHC posted a [Resource Guide](#) on the DMHC's public Website.

The Resource Guide provides information on health plan requirements to help health plan members, as well as contact information (phone numbers and websites) for health plans operating in Los Angeles and Ventura Counties.







- + The DMHC is closely monitoring this situation and is working with the California Medical Association (CMA) and the California Hospital Association (CHA).
- + The DMHC will update the guidance to health plans and information for health plan members and providers, as necessary.





# Getting help for your patients

- + If a health plan member needs assistance in obtaining health care services, prescription medication, replacement medical equipment, etc., the members should first contact their health plan for assistance.
- + If a health plan is not resolving the health plan member's issue(s), the member may contact the DMHC Help Center for assistance at [www.DMHC.ca.gov](http://www.DMHC.ca.gov) or 1-888-466-2219 (TDD: 1-877-688-9891). The DMHC Help Center provides assistance in all languages and all services are free.





# Virtual Grand Rounds

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EMERGING PUBLIC HEALTH ISSUES

## Questions

# Q & A



**Rita Nguyen, M.D.**



**Cyrus Rangan, M.D.,  
FAAP, FACMT**



**Dan Southard**





# Next Webinar in Series



+ Tuesday, March 11, 2025

+ More information at

[www.cmadocs.org/grandrounds](http://www.cmadocs.org/grandrounds)

+ 12:00 – 1:00pm

# CME

- + You will receive an email after this webinar with an evaluation around 5pm
- + Upon completion of survey, a CME certificate will be sent out within 1 week.



# Upcoming CMA Events

Visit [cmadocs.org/events](https://cmadocs.org/events) to register and learn more.

3rd Annual  
**CMA HIT Summit:  
Building the Future**  
May 6–7, 2025 | Westin San Diego Bayview



**HEALTH EQUITY  
LEADERSHIP SUMMIT**  
July 10–11, 2025 | Westin Pasadena



**MEDICAL GROUP  
ADVOCACY SYMPOSIUM**  
August 13, 2025  
SAFE Credit Union Convention Center, Sacramento



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Thank You

