Dear CME Course Director:

Thank you for your interest in and commitment to providing high quality, evidence-based continuing education for your proposed Continuing Medical Education (CME) Conference. Completion of the attached CME Activity Conference Planning Form and CME Activity Application are required annually for conferences/symposia and every 2 years for Regularly Scheduled Series (RSS). As an accredited provider of CME, rigorous guidelines must be followed when assessing, planning, implementing and evaluating CME activities. This form is designed to provide documentation of these processes to meet the requirements set forth by the respective accreditation bodies, Accreditation Council for Continuing Medical Education (ACCME) and the California Medical Association (CMA).

Please see the following page for a detailed outline of the planning process and requirements for each activity per ACCME and CMA. Activities failing to meet the required essential accreditation requirements will jeopardize the activity’s future ability to provide CME credit.

For questions regarding the CME Activity Application Form or accreditation requirements, please contact us.

We look forward to working with you and serving as a resource for accreditation compliance.

Sincerely,

Robert Adler, MD, MSed
CME Chair

Lisa McDonald Reyes, MPH
CME Manager
# CME Activity Director/Conference Chair Checklist

*Please review checklist and initial below.*

<table>
<thead>
<tr>
<th>Responsibility</th>
<th>Timeline</th>
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| **Gain support and funding, if needed, for CME activity from Director/Department Head** | • At least 9-12 months prior to the proposed event for conference/RSS  
• If seeking Conference Services management, request support from CME Office at least **12 months in advance** to be considered |
| **Identify a planning committee**  
Complete an accurate and thorough Needs Assessment | • At least 9-12 months prior to the proposed event for a conference/RSS  
• Planning committee must represent the target audience |
| **Complete and Submit CME Activity Application Form**  
annually for Conferences and every 2 years for RSS  
Develop Agenda after educational need is identified and include Time, Topic, Presenter/Credentials | • For a new conference, **9-12 months prior** to the proposed CME activity  
• For a recurring activity, **4-6 months prior** to the proposed CME activity |
| **Review of marketing materials is required for CME activities**  
Submit brochure/flyer draft for CME and Review prior to typeset or printing | • Save the date announcement may be developed as soon as dates confirmed, using the CHLA template approved by Marketing  
• Brochure draft sent to typeset/print **4-6 months prior** to CME activity; Brochures emailed/mailed **3-4 months prior** to the CME activity  
To ensure adequate time for marketing material review by CME Office:  
• Submit brochure draft 15-20 business days prior to typeset  
• Submit flyer draft 10 business days prior to flyer distribution |
| **Identify each person in a position to control content of the CE activity within the CME Activity Planning Form** | • COI listing for planning committee members, chair/director and activity coordinator are part of the [CME Planning Form](#)  
• COI listing for speakers, moderators, panelists and content reviewers are added to the CME Planning Form  
• Contact the CME Office if there are any relevant COI for review and resolution at least **10 business days prior** to the CME activity  
• Communicate presence or absence of disclosure/resolution on marketing materials, if known in advance, **and** prior to the start of the presentation(s);  
• Faculty inserts a COI disclosure slide that is available from CME office |
| **Submit Disclosure Forms only for individuals who have a relevant COI** |  
| **Letter of Agreement (LOA) for commercial support, non-commercial sponsorship* and/or Jointly-provided CE activities** | • LOA is signed prior to the CME activity by the CME Activity Director and commercial interest organization, non-commercial sponsor and joint providers  
• Upon receipt, the LOAs are then reviewed and signed by CME Office prior to the activity |
| **Pay associated CME fee(s)** | • CME fees are paid/transferred, per invoice |
| **CME Activity Evaluation**  
3-month Post-activity outcomes (optional) | • Online and hard copy evaluation (templates available)  
• Review and distribute outcomes questionnaire, as appropriate (templates available) |
| **CE Closeout Checklist** | • Submit checklist within **45 days** and budget within **90 days** of activity |

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*Commercial Support* – Financial or in-kind contribution from a commercial interest that is used to pay for all or part of the costs of a CME activity  
*Sponsorship/Exhibitors* – Financial or in-kind contribution from an organization that does not fit the category of a commercial interest

I have read the checklist and agree to meet the CME requirements for the proposed activity. _______(initial)