

**Dear Members of the Maine Medical Center Medical Staff,**

Pennsylvania Hospital, the first hospital in the United States, was built in Philadelphia and started admitting patients in 1756. It was envisioned by a local physician, Dr. Thomas Bond, who collaborated with Ben Franklin to secure the requisite funding. Franklin was a major contributor to the building fund. Hospitals of that era were very different from the medical centers of today. They were the repository of the sick, poor and insane. Philadelphia was the largest city in colonial America and sat at the crossroads of international trade, immigration and slavery. These forces merged to create poverty and epidemics of smallpox, measles, yellow fever and malaria, thus establishing great need for a public hospital.

Rules and policies defining the behavior of physicians soon followed. These were the original bylaws. Today's Medical Staff bylaws describe the rights, responsibilities and accountabilities of the medical staff. They explain the governance functions of the medical staff and they specify how the medical staff and the Local Board work together. They guide the activities of the organization and are part of the federal requirements to assure the health care organization of its deemed status, the requisite designation to participate in the Medicare and Medicaid programs. The standards that describe the fundamental concepts of the Medical Staff are established by The Joint Commission (TJC). There are four standards comprised of 50 Elements of Performance that describe and define the organized Medical Staff. These accreditation requirements of TJC are largely mirrored by the regulatory mandates of the Centers for Medicare and Medicaid Services (CMS).

The central responsibility of the Medical Executive Committee involves credentialing and privileging Medical Staff providers. There are four full-time specialists employed to assure accurate and timely credentialing. Some of the emphasis of TJC has shifted recently to a heightened awareness of practitioner competence assessment and professional practice evaluations. Finally, the Medical Executive Committee oversees appointment and re-appointment of practitioners to the Medical staff. All of these activities are described in the Medical Staff bylaws, which have been recently rewritten. The end product of the work of the Medical Executive Committee and associated sub committees, is to ensure a well-trained, competent Medical Staff to care for our patients and to contribute to the maintenance of Maine Medical Center as a deemed hospital able to participate in the Medicare and Medicaid programs.

Please take time to read through the engaging articles in this edition of The Scope, submitted by your peers and colleagues. And make sure to join us on Sept. 25 at 5:30 p.m. in the Dana Center for our next Medical Staff dinner.

Sincerely,



*Joel Botler MD*

**Joel Botler, MD**  
Chief Medical Officer  
President, Maine Medical Partners



*Christopher W. Cary MD*

**Christopher Cary, MD**  
Medical Staff President