

# BLAIR P. BISHOP, MHA, PMP

BOSTON, MA | 617-935-6570 | [BLAIRBISHOP@GMAIL.COM](mailto:BLAIRBISHOP@GMAIL.COM)

<b>Summary</b>	<b>Seasoned certified Project Manager, Healthcare Executive and Process Improvement Professor with exceptional skills in system and cultural transformation, process improvement and sustainable financial performance. Best-in-country 99<sup>th</sup> percentile Press Ganey Leadership Index.</b>	
<b>Education</b>	<b>Masters Healthcare Administration</b> <i>Pfeiffer University Charlotte, NC</i>	2012
	<b>B.A. Degree in Psychology</b> <i>University of Massachusetts Boston, MA</i>	2005
<b>Career History</b>	<b>Sturdy Memorial Hospital</b> <i>Attleboro, MA</i> <b>Chief Operating Officer</b> Responsible for strategy, operations and finance for 36-site multispecialty network with 200 Providers, 400 staff, 330,000 annual visits for 70,000 patients in southern Massachusetts. Responsible sections include Internal & Family Medicine, Dermatology, Hematology/Oncology, Gastroenterology, Endoscopy Suite, OBGYN, Pediatrics, Orthopedics, Pulmonary, General Surgery, Cardiology, Podiatry, Endocrinology, Urology, Ophthalmology, Rheumatology, Physical Therapy, Student Health and Urgent Care.	2/2020– Pres.
	<b>Suffolk University, Sawyer Business School</b> <i>Boston, MA</i> <b>Adjunct Professor</b> HLTH 730, Healthcare Operations Management and Process Improvement	2018 – Pres.
	<b>Beth Israel Deaconess Medical Center</b> <i>Boston, MA</i> <b>Director of Operations, Division of General Medicine (BIDMCs largest division)</b> Responsible for Physician comp redesign, finance, strategy and operations of Primary Care, Palliative Care and Research to include 85 Faculty Physicians, 170 Resident Physicians, 5 Fellows, 10 APP's and 150 staff overseeing 110,000 visits annually. Responsible for Population Health Practice Transformation to include Care Team Redesign, Complex Care Management, Telehealth, Behavioral Health, Empanelment, Chronic Disease Management, NP expansion, Home Visits and TCMs. Successful implementation of SDOH, MassHealth ACO, Patient Self Scheduling, \$5.2M Revenue Opportunity Plan, Pop Health Dept. and Predictive Analytic Dashboard.	2017 - 2020
	<b>Regional Practice Director, North Region</b> <b>Founder and Chair, Innovation Committee</b> Responsible for creation and operations of 7-Practice Primary Care Network, covering 40 geographic miles, with 50% risk contracts ACO, MSSP, PCMH and PQRS. Affiliate management with Lawrence General and Anna Jaques Hospitals. Founder, Chairman of Innovation Committee responsible for operationalizing Telehealth, Cost Transparency and designing the 'Practice of the Future'.	2015 - 2017
	<b>Advisory Board Member, Harvard Medical School Primary Care Improvement Network</b>	2017 – 2020
	<b>University of North Carolina Healthcare</b> <i>Chapel Hill, NC</i> <b>Primary Care, Sr. Practice Manager</b> <i>*Promotion*</i> Oversee operations of 4-provider practice, 11 staff and \$3 million annual revenue. <b>Emergency Room, Crisis Management Specialist</b> Responsible for Involuntary Commitments and Placement including Telepsych Program Creation	2010 – 2015
	<b>Steward Norwood Hospital, Senior Mental Health Associate</b> Crisis Prevention and Intervention work focused on rehabilitating patients with behavioral health challenges on acute psychiatric and Geri-psych floors	2008-2010
	<b>Raleigh Methadone Treatment Center, Clinic Manager and SA Counselor</b> Oversee all operations and facilitate individual and group counseling on mindfulness and sobriety	2005-2008
	<b>Arbour Hospital, Intensive Outpatient Coordinator</b> Oversee daily operations of 40-patient, 5-staff IOP Program	2002-2005

- Memberships**
- Advisory Board Member, Suffolk University, Sawyer Business School
  - Advisory Board Member, Harvard University, Primary Care Improvement Network
  - American College of Healthcare Executives, Vice Chair, Early Careerist Network
  - NC Substance Abuse Professional Practice Board

- Volunteer Work**
- Make A Wish, MA and RI*
- Fundraising and granting wishes for children with life-threatening illnesses.
- Workcamp NE*
- Roofing repair for the underprivileged and elderly in substandard living conditions
- New England Innocence Project*
- Raising resources for individuals wrongfully imprisoned

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**Presentations** *From Idea to Execution: Transitioning Primary Care from Volume to Value*  
2022 MGMA Operations Conference, Austin Texas

*Battle for the Basement: Succeeding Through COVID When Others Fail*  
2021 Suffolk University, Sawyer Business School

**Professional References**

Eileen Reynolds, MD  
Chief, General Medicine & Vice Chair, Education  
Beth Israel Deaconess Medical Center  
617-290-9659 :: ereynold@bidmc.harvard.edu

Jane F. Fogg, MD, MPH  
Chief, Internal Medicine & Population Health  
Atrius Health, Boston, MA  
617-559-8429 :: jane\_fogg@atriushealth.org

Professor Mona Al-Amin, PhD  
Chair, Healthcare Administration Dept., MHA Program Director & Associate Professor  
Suffolk University, Sawyer Business School  
malamin@suffolk.edu

Brian Patel, MD  
Chief Medical Officer & VP Medical Affairs  
Sturdy Memorial Hospital, Attleboro, MA  
508-783-2679 :: bpatel2@sturdymemorial.org

Pracha Eamranond, MD, MPH  
Chief Medical Officer & Assistant Clinical Professor, Harvard Medical School  
Trinity Health of New England, Hartford, CT  
978-683-4000 :: Pracha.Eamranond@harvard.hms.edu

Aimee Brewer  
President & CEO  
Sturdy Memorial Hospital, Attleboro, MA  
508-236-8000 :: ABrewer@sturdymemorial.org

Amy Pfeffer  
Chief Financial Officer  
Sturdy Memorial Hospital, Attleboro, MA  
508-236-8175 :: [APfeffer@sturdymemorial.org](mailto:APfeffer@sturdymemorial.org)

Todd Lowthers  
President & CEO  
Whittier Independent Physician Association/LMVPHO  
978-462-2345 :: Tlowthers@lmvpho.net

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# Accomplishment Highlights

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## Sturdy Memorial Hospital

- Implemented Video Visit capability for 150 Providers across 36 sites within my first 14 days on the job. 30,000 total video visits were completed in first 12 months totaling \$4.5M NPSR
- Navigated the system through the COVID pandemic, launching the state's first testing drive through testing site, kept 100% of staff and Providers employed, fully benefited, paid \$3M COVID bonus and broke even for FY20
- Since hire, increased system-wide per provider productivity by 38% via no show reduction, annual wellness visit program launch, telehealth launch, coding enhancements, provider/site restructuring
- Successfully implemented integrated Cerner EMR across all 36 sites and hospital
- Successfully redesigned MD & APP compensation, moving off revenue-expense model and into wRVU based balanced production model to include quality metrics
- Created real time analytic dashboard measuring top 30 key performance indicators
- Launched system wide strategic planning initiative, formed steering committee and surveying
- Successfully grown patient and provider base by 13% and 7% respectively since hire

## Beth Israel Deaconess Medical Center

- Awarded BIDMC 'Most Improved Patient Experience' hospital-wide (FY19)
- Launched BIDMC's first Diversity, Equity & Inclusion committee (2019)
- Led Patient Experience and Employee Engagement turnaround with three consecutive years of YOY improvement
- 99<sup>th</sup> Percentile Press Ganey Leader Index
- Identified and corrected operational inefficiencies resulting in \$9M total net increase
  - Corrected facility worksheet error resulting in \$500,000 annually, increased ancillary testing 74%, decreased no-show rate by 73%, decreased medical and office supply expense by 47%, reduced OT by 98%, started NU COOP program which increased MA staffing by 39% with zero increase in staff expense, increased AWW and ACP usage by 112%, increased exam room utilization 58%.
- Successful North Region Primary Care Build-Out
  - Opened 7 new Primary Care practices, hired 35 staff and 17 Providers
- Palliative Care Enhancements
  - Increased total Provider productivity 301% via coding opportunities, establishing Provider workflows, obtaining embedded space within other departments, launched Oncology integration model and developed real-time Demand/Supply/Activity dashboard which led to real-time triage
- Launched Cost-Savings Initiatives Totaling \$287K in Annual Savings
  - \$211K Collaborated with Salter School to develop per diem Medical Assistant pool. Utilizing per diems over previous temp contracts
  - \$76K worked with McKesson to create and implement prescription and med supply *Best Value List*.

## University of North Carolina Healthcare

- Saved Emergency Department \$1.3 million Annually
    - Modified then implemented new Involuntary Commitment Process which enhanced workflow to find bed-placement for IVC patients two days earlier.
  - Achieved #1 Patient & Staff Satisfaction in the UNC Network
    - Launched internal campaign to be accessible and responsive to patients
  - Increased patient panel 33% within 12 months
    - Extended referral base by working with Urgent Cares, Pharmacies and Specialists.
  - Increased Net Revenue 46% with 18 months
    - Created new revenue streams implementing lab services, starting dermatology procedures, increasing referral base, Lean Six Sigma projects to eliminate waste.
  - Decreased No-Show Rate to network leading 2%
    - Created then implemented Lean Six Sigma project which aggressively targeted patient education and man-hour prioritization including human reminder calls.
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