

# Why Specialty Practices Keep Losing Good Staff (and What to Do About It)

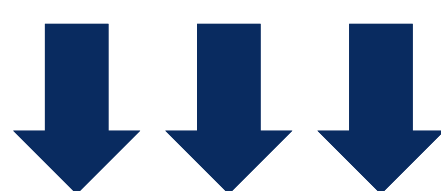
Your retention problem is not a compensation problem. It is a role design problem. Specialty practices treating it as the former keep losing the trained staff they need most. Here is the structural fix, and the advisory model that funds it.

## TODAY ONE TEAM. ALL THE VOLUME.

Your front office handles everything:

- High-volume scheduling, rescheduling, routing. Repetitive. Crushing at peak hours.
- Basic insurance verification and routine inquiries.
- Complex patient situations that need real expertise.
- Care coordination conversations that actually require judgment.

**Result.** The high-volume work swallows the meaningful work. Your trained staff conclude the job is not what they signed up for. They leave for the same wage somewhere else. Your training investment never compounds.



*“The fix is structural, not financial.”*

## AFTER REDESIGN SPLIT WORK. RIGHT PEOPLE. RIGHT INTERACTIONS.

### BPO partner

(healthcare-experienced, vetted for their own agent retention):

- High-volume scheduling, rescheduling, routing.
- Basic insurance verification and routine inquiries.
- Operates at the scale and consistency this volume requires.

### Your retained internal team:

- Complex patient situations requiring clinical context and judgment.
- Care coordination and high-trust patient relationships.
- Brand-defining interactions where being good at the job matters.

**Result.** The work your trained staff signed up for is the work they actually get to do. Engagement recovers. Tenure compounds. Training investment finally pays off.

## HOW OUTSOURCE CONSULTANTS HELPS

**Self-Funding Budget.**  
The CX Dream Path™ creates budget through **cost reductions of 50-70%**—meaningful capital you can redirect into your retained team: tools, technology, professional development, or the wage adjustments HR has been asking for.

**Designed, Not Guessed.**  
We have designed this split across dozens of healthcare contexts. Which work moves. Which stays. How the handoff gets engineered. How shared KPIs work between BPO and internal team.

**Vetted for Retention.**  
We have evaluated 500+ providers and we know which BPOs actually retain agents in healthcare, not just hire them. The expensive mistake of picking a high-attrition partner does not happen.

ASK AN OC ADVISOR

Stuck on a CX healthcare question? **We've seen it.**

Quick. Consultative. Objective. Proven.

**ASK NOW** →

20+ years CX strategy | 500+ vetted BPO & CX technology providers across 100+ countries

**No cost to enterprise clients**