OUTSOURCE CONSULTANTS

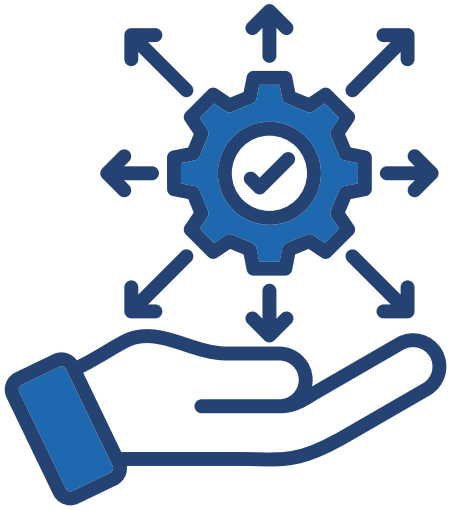
CASE STUDY

HEALTHCARE | MEDICARE DISTRIBUTION

# Revenue grew $250M . Costs fell 57%. Year one.

A fast-scaling Medicare distribution provider was breaking in the same place every enrollment season: a costly in-house team that could not flex with demand, and inconsistent warm transfers that left licensed agents waiting on conversations that never arrived.

Outsource Consultants rebuilt the handoff as a script-driven, Medicare-compliant warm-transfer engine, matched partners to revenue-critical KPIs, scaled the model from 25 to 300+ agents for open enrollment, and governed every partner through its Vendor Management Office (VMO) on one monthly scoreboard.



The transfer rate blew past its 51% goal to 88% within 90 days. Costs fell 57%. And the provider grew its topline from $764M to $1B, roughly $250M in new revenue, in the same year the rebuilt engine landed.

**88%**

warm-transfer rate, against a 51% goal, within 90 days

**+$250M**

in client topline growth, $764M to $1B, the year the engine landed

**57%**

cost reduction; $5.2M in long-term savings

| VERTICAL | SERVICES | FOOTPRINT | GOVERNANCE |
| --- | --- | --- | --- |
| **Medicare distribution** | **Warm transfer + seasonal enrollment scaling** | **Coordinated multi-partner portfolio** | **VMO: one scoreboard, every partner** |

THE STORY IN 20 SECONDS

### THE LEAK

Enrollment spikes overwhelmed a rigid in-house team, and broken handoffs starved licensed agents of the conversations that drive revenue.

### THE REBUILD

A script-driven, Medicare-compliant warm-transfer engine, partners matched to revenue KPIs, and seasonal scale from 25 to 300+ agents.

### THE RETURN

An 88% transfer rate inside 90 days, a 57% lower cost line, and a topline that grew $250M the same year.

THE CHALLENGE

# Conquering Open Enrollment felt impossible

Medicare distribution runs on a calendar with one violent peak. During open enrollment, call volume multiplies, and every conversation that fails to reach a licensed agent is revenue handed to a competitor working the same seniors in the same window. There are no makeup games.

The provider was fighting that calendar with a fixed-cost weapon: an in-house team too expensive to scale for peak volume during open enrollment, and too rigid to flex up or down during lull periods without risking seasonal collapse come fall.

And the handoff itself, the moment a qualified caller is warm-transferred to a licensed agent, was inconsistent enough that the transfer rate goal sat at just 51%. Half the pipeline, leaking at the last step.

Scaling the in-house model meant carrying peak-season payroll all year. Not scaling it meant breaking every fall. Neither answer worked, because the problem was never headcount. It was architecture.

**A rigid team meets a seasonal business in one of two ways: overpaying for eleven months, or underperforming in the one month that decides the year.**

# Build the seasonal accordion, then hold every partner to the bar

The provider engaged Outsource Consultants to redesign the model, not just restaff it. The handoff came first: a script-driven, Medicare-compliant warm-transfer engine, built so that a qualified caller reaches a licensed agent while the intent is still warm, with quality assurance wired to the revenue moment rather than generic call metrics.

Capacity came second. OC screened its network of 300+ vetted BPO partners, each tracked on 100+ performance data points, and matched the provider to partners selected against the KPIs that pay: transfer rates, quality, and the ability to ramp. With expert analysis and selection completed, OC presented the provider with a list of expert vendors – all of them stalwarts in Medicare patient support.

The best part, the provider hand selected their preferred option from a cohort of great options. OC does not choose the provider; the client does. The result was a seasonal accordion: roughly 25 agents in the quiet months, 300+ at open-enrollment peak, with no permanent headcount added.

And because a multi-partner program is only as good as its governance, OC's Vendor Management Office (VMO) stayed in as the accountability layer: one monthly KPI cadence across every partner and every lane, benchmarking transfer rates, quality, abandonment, and utilization against the goals the provider set. And providers are often shocked to learn the OC's VMO is a no-cost benefit for all partners that work with our advisory.

**Most outsourcing does not fail in the selection. It fails in the first 180 days after go-live.**

So OC's VMO stayed in: one monthly scoreboard across the whole partner portfolio, every lane, every enrollment cycle.

ABOUT THE ADVISOR

### The handoff is the revenue moment

Broken transfers starved licensed agents of the conversations that pay. OC rebuilt it with a script-driven, Medicare-compliant warm-transfer engine. The successful transfer rate hit 88% against a 51% goal within 90 days, and the client's agents turned that into $250M of topline growth.

### We made the program earn its size

Nobody should bet 300 seats on day one. OC started small and scaled what proved out: 25 agents in the quiet months, 300+ at enrollment peak, new partners and language lanes added only after the numbers cleared. Peak season stopped being a gamble.

### We run every partner on one scoreboard

Multi-partner programs usually splinter into excuses. OC's VMO benchmarks every partner and every lane monthly, at no cost. The client trusted the numbers enough to raise its own transfer targets mid-program, and the portfolio cleared the higher bars.

INSIDE THE ENGAGEMENT

# Years in, the client raised the bar. The portfolio cleared it.

A four-year, multi-partner program has survived something most case studies never face: repeated enrollment cycles, shifting demand, and a client sophisticated enough to keep tightening the screws.

## Increasing performance goals keep getting achieved

The strongest signal in the current record is not that the portfolio hits its goals. It is that the provider raised them, moving its billable-transfer target and successful-transfer floor up mid-program, and recent cycles cleared the raised bars: billable transfer running above 90% against the new target, successful transfers beating the elevated floor, quality scores above the 95% standard. When performance holds long enough, the right response is a higher bar. That is what a governed program earns you.

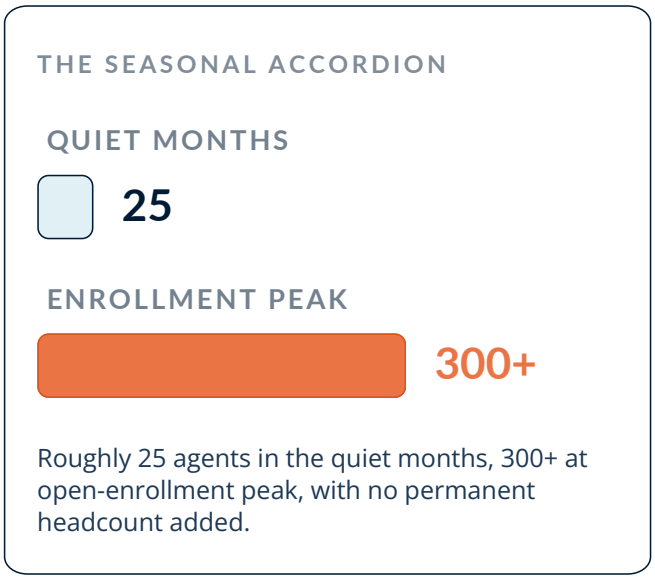
## OC holds BPOs accountable, so you don't have to

The monthly scoreboard that OC's VMO used to monitor vendors has also done its quieter job. When abandonment ran over its 10% ceiling, the monthly cadence flagged it and the VMO team responded: helping drive down the rate until it cleared the ceiling with room. When a quality score slipped just under its floor, dedicated coaching followed and it climbed back above the standard within two cycles. Multi-language lanes, English and Spanish, are benchmarked separately so no caller population hides a problem.

## The seasonal accordion still breathes

Years in, the seasonal architecture works exactly as designed: the program trims to a lean core between enrollment windows and ramps several-fold ahead of the annual enrollment period, planned in advance with baseline headcount mapped to the calendar.

Flexibility was not a launch feature. It is the permanent shape of the operation, and it is why the provider never went back to carrying peak payroll in the off-season.




Roughly 25 agents in the quiet months, 300+ at open-enrollment peak, with no permanent headcount added.

THE RESULTS

# Cost down and revenue up are supposed to be a trade-off

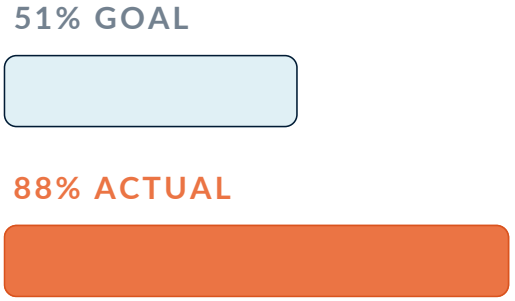
Read the two lines together – costs down, revenue up – because they came from the same moves. The transfer rate crossed 88% within 90 days against a 51% goal, a 1.7x improvement in handoffs reaching licensed agents. The cost line fell 57%: $1.3M in the first year, $5.2M in long-term savings, because seasonal capacity replaced permanent payroll.

And in the year the rebuilt engine landed, the provider grew its topline from $764M to $1B. That revenue belongs to the provider and the licensed agents who earned it; the goal was to stop losing the conversations that feed them, and an 88% transfer rate proves it did.

### They kept adding lanes

What began as a seasonal capacity fix grew into a multi-partner, multi-language program spanning voice and chat, still active and still governed on one scoreboard years later. Programs do not grow lanes unless the lanes perform.

THE HANDOFF, REBUILT




Moving from a 51% goal to an 88% actual is a 1.7x multiplier on the same demand.

## BY THE NUMBERS

**25 → 300+**

agents, the seasonal enrollment ramp

**88%**

warm-transfer rate vs a 51% goal

**90 days**

to blow past the transfer goal

**$5.2M**

in long-term savings

# Four ways to read this outcome

Different leaders read this story against different numbers. All four readings are correct.

IF YOU OWN THE MARGIN

### Stop paying for the seasonal peak all year

The 57% reduction, $5.2M over the long term, came from architecture: a lean core between enrollment windows and a several-fold ramp when the season demands it. Seasonal businesses that staff for peak year-round are donating margin eleven months out of twelve, but they often feel obligated to do just that because too often BPOs fail to scale effectively. OC proves, with the right CX advisory guidance, you don't have to burn cash to ensure performance.

IF YOU OWN GROWTH

### The handoff is the revenue moment

Every point of warm-transfer rate is pipeline reaching the people licensed to convert it. Moving from a 51% goal to an 88% actual is a 1.7x multiplier on the same demand, no new marketing spend required. The provider's topline grew $250M the same year, earned by its agents, fed by an engine that stopped leaking. The significant savings (while welcomed) were never the provider's goal; they knew they needed an expert to help with their handoff revenue engine.

IF YOU OWN THE EXPERIENCE

### Seniors get one warm handoff, in their language

A senior navigating Medicare options should reach a licensed human in one warm, compliant transfer, whether they called in English or Spanish. Script discipline, quality held above a 95% floor, and separately benchmarked language lanes are what that promise looks like as an operating system.

IF YOU OWN TECHNOLOGY + RISK

### Compliance and resilience, by design

Medicare marketing runs under strict rules, so the engine was built script-first with QA wired to compliance, not bolted on after. A governed multi-partner portfolio also means no single point of failure under peak load. And every healthcare partner in OC's network is vetted for HIPAA readiness, with BAA process, SOC 2 reporting, and incident-response documentation available on first request.

THE TAKEAWAY

# Three things to take from this story

**01** **Peak season is a design problem, not a staffing emergency.** Build the seasonal accordion once: a lean core, a mapped ramp, and partners selected for their ability to scale.

**02** **Measure the handoff like revenue, because it is.** A warm-transfer rate with a floor and a monthly scoreboard turned the last step of the funnel from a leak into a 1.7x multiplier.

**03** **Governance is what lets you raise the bar.** Years in, this client moved its own goals up and the VMO-governed portfolio cleared them. A program you can tighten is a program you can trust.

## Your enrollment season is either an engine or an emergency. There is no neutral.

A 30-minute conversation with our healthcare CX advisors will tell you which one you have, and what the broken handoff is costing you. No cost, no obligation, no pitch deck.

**Let's Talk** **outsource-consultants.com** **888.766.4482**

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