

HEALTHCARE

MULTI-SITE DENTAL SUPPORT ORGANIZATION

A 200-office DSO left its big-name BPO. Booked appointments went up. Costs fell 30%.

A dental support organization (DSO) serving 500+ providers across 200+ offices was paying big-name BPO prices for underwhelming scheduling performance.

Outsource Consultants (OC) ran an independent match to a right-sized partner built for clinical scheduling, and the contract stopped being a cost line and started being a growth channel.

Conversion targets were exceeded inside 90 days. Handle time dropped from five minutes to four. More than six in ten scheduling calls now become appointments, a rate that has held for years, and – while patient support metrics continue to improve – total program costs have fallen by 30%.



60%+

Conversions

Dental practice scheduling calls, converted to appointments, sustained YoY

30%

Cost reduction

\$626K saved across the engagement

1 min

AHT reduction

Lowering average handle time by 60 seconds, equating a 20% efficiency gain

VERTICAL

Dental (DSO), 200+ offices

SERVICES

Inbound appointment scheduling

FOOTPRINT

Nearshore, right-sized partner

GOVERNANCE

VMO: monthly KPI cadence

— THE STORY IN 20 SECONDS

THE PROBLEM

A big-name BPO priced for its brand, not its performance was struggling to serve their DSO client; scheduling conversion lagged while the BPO contract cost climbed.

THE FIX

An independent move to a mid-sized nearshore partner built for clinical scheduling, with OC's advisory oversight benchmarking KPIs from day one.

THE RETURN

Conversion targets beaten inside 90 days and held for years, **handle time down 20%**, and a **30% lower cost** line.

— THE CHALLENGE

Leading DSO was fed up with paying top-dollar for a brand name BPO that couldn't deliver.

For a DSO, the scheduling line is the front door to 200+ offices at once. Every inbound call that fails to convert is an empty chair somewhere in the network, and at this scale, small conversion gaps compound into a growth problem no individual office can see or fix.

The organization was looking for a solution, and had originally outsourced that patient access front door to one of the biggest names in the industry, and the arrangement had settled into the pattern large legacy contracts often do: rising costs, performance that never quite matched the invoice, and the quiet institutional assumption that switching would be riskier than staying.

Billion-dollar BPOs answer to shareholders first. A mid-market DSO, even a large one, is rarely their most important account.

The organization needed the opposite arrangement: a BPO partner sized so the DSO program was a crown jewel in their portfolio, with the clinical scheduling depth to convert demand, at a cost that made the growth math work.

This is where most organizations stall: the legacy contract underperforms, but the switching risk feels bigger than the daily leak. So the leak continues.

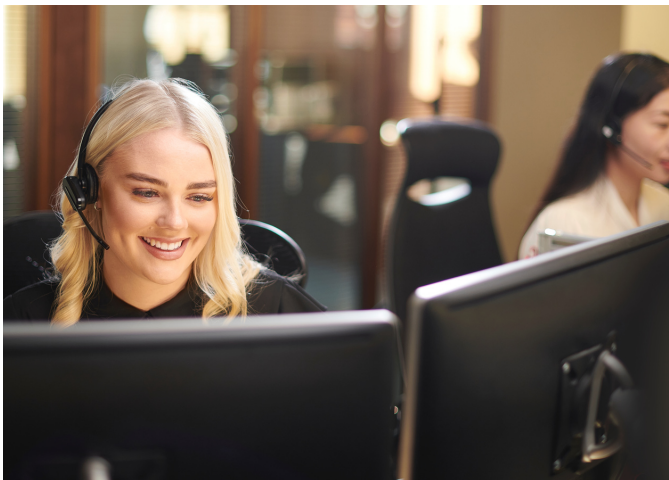
Right-sized BPOs beat big-names, consistently.

The organization engaged OC to run an independent BPO vendor search. OC screened its network of 300+ vetted BPO partners, each tracked on 100+ performance data points, against the fit the situation demanded: documented clinical scheduling experience, mid-market scale where a DSO program is a key account rather than a rounding error, and the economics to cut cost without cutting capability.

OC narrowed the market to a shortlist. The DSO was able to select their BEST option from a group of great vendors matched specifically to their needs. OC helps narrow the selection, but the DSO made the final selection before launching.

The transition, the part every organization fears most when leaving an entrenched incumbent, is where OC's Vendor Management Office (VMO) earned its place. OC's VMO is an included task force of industry veterans that monitor and optimize your BPO relationship, benchmarking conversion, average handle time, and quality from day one.

The VMO oversight helped the DSO program exceed their conversion targets within the first 90 days. The switching risk everyone stalls on turned out to be a 90-day optimization sprint, with OC's VMO building a scoreboard of wins and driving key results on behalf of the client.



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

So OC's VMO stayed in: benchmarking conversion, handle time, and quality every month from day one, and the targets fell inside 90.

— ABOUT THE ADVISOR

OC moved the DSO where they mattered

At a billion-dollar BPO, this DSO was one logo among thousands. OC matched it to a right-sized partner that treats the program as a flagship: leadership picks up the phone, changes happen fast, and the economics run about 25% leaner. Same work, 30% off the cost line.

OC treated conversion like revenue

Every scheduling call that books is a filled chair somewhere in 200+ offices. OC set conversion as the program's core metric, and the team beat its targets inside 90 days. The 60% floor has held for years, which is same-store growth the operating plan can bank.

The scoreboard outlived the launch

Leaving an entrenched incumbent feels dangerous, so OC measured the fear away. The VMO benchmarked conversion, handle time, and quality from day one of the transition, at no cost. Targets fell inside 90 days, and the floor has held every cycle since.

— INSIDE THE ENGAGEMENT

DSO patient conversion that held up for years

A launch win can be luck, with many variables vying for a campaign's success. But what sets a successful BPO engagement apart is when growth metrics never revert to prior levels.

Two conversion lanes, both clearing the bar

The program is benchmarked against conversion floors the DSO set for itself, tracked in two lanes.

Now, years into the engagement, both lanes still clear their floors in every recent reporting cycle, with general conversion running as high as the upper 60s in strong months.

For a DSO, that consistency is the entire point: conversion is not a launch statistic, it is a permanent operating standard with the VMO's monthly scoreboard.

TWO CONVERSION LANES

GENERAL SCHEDULING

ORTHODONTIC SPECIALTY CALLS

Each carries their own standard.

A dedicated and expert DSO team built to hold

The dedicated team has held steady with minimal attrition cycle over cycle, in an operation sized so the organization's program is a flagship account for its partner rather than a line item. When demand grew through the engagement, capacity scaled with it: the partner substantially expanded the dedicated team to keep up with the volume the improved conversion was generating.

— THE RESULTS

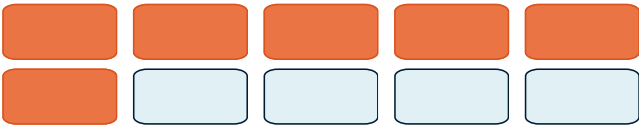
Growth outcomes both the CFO and a COO love

On the growth side: conversion targets exceeded within 90 days and sustained above the 60% floor for years, meaning the scheduling line reliably turns demand into booked chairs across 200+ offices. On the cost side: a 30% reduction, \$250K in the first year and \$626K across the engagement, with handle time down 20%. The organization did not trade performance for savings or savings for performance. It replaced a mismatched contract with a right-sized one and collected both.

The growth stress test

Better conversion created its own problem: more volume to serve. The partner expanded the dedicated team to keep pace with the demand its own performance was generating. That is what a right-sized match looks like under load: growth becomes a staffing plan, not a service failure.

CALLS THAT BECOME APPOINTMENTS



More than six in ten scheduling calls now become appointments, a rate that has held for years.

BY THE NUMBERS

200+

dental offices served by one scheduling operation

Under 90 days

to exceed conversion targets after go-live

60%+

call-to-appointment conversion, sustained

\$626K

saved across the engagement

Four ways to read this outcome

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

IF YOU OWN THE MARGIN

The brand premium was buying nothing

Billion-dollar BPOs carry billion-dollar cost structures, and mid-market clients fund them without getting their best teams. Right-sized partners run roughly 25% leaner and treat a DSO program as a flagship account. Here, the arithmetic came to 30% yearly cost reduction and \$626K lifetime savings, with performance steadily improving.

IF YOU OWN GROWTH

Scheduling conversion is the same-store growth

Every point of call-to-appointment conversion is chair utilization across 200+ offices, without a new location or a new provider. A conversion floor with a monthly scoreboard turns the contact center into a growth instrument the operating plan can actually count on.

IF YOU OWN THE EXPERIENCE

Patients call to book, not to wait

A patient calling a dental office wants an appointment in one call, handled by someone who knows the workflow, whether it is a routine cleaning or an orthodontic consult. Faster handle time and a specialty lane held to its own conversion floor are what that patient access looks like in experience and in operating metrics.

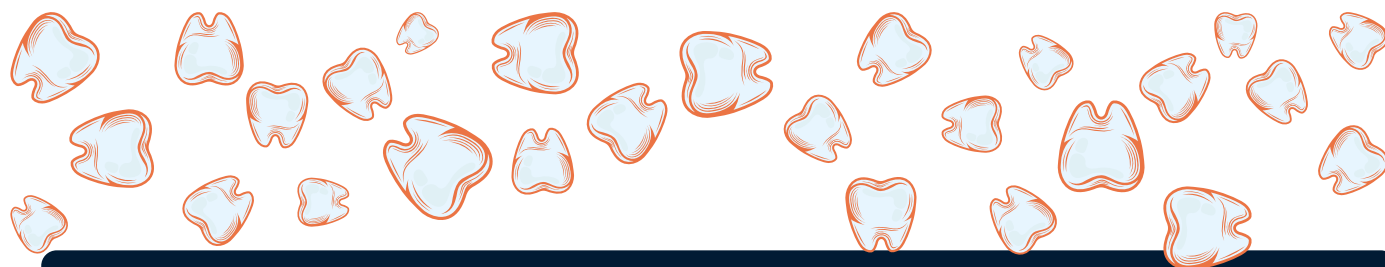
IF YOU OWN TECHNOLOGY + RISK

The switching risk is mitigated with a scoreboard and an expert

Leaving an entrenched incumbent is the risk that keeps underperforming contracts alive. Here the transition ran on the VMO's monthly benchmark from day one and beat its conversion targets inside 90 days. And every healthcare BPO in OC's network is vetted for HIPAA readiness before it can be recommended, with BAA process, SOC 2 reporting, and incident-response documentation available on first request.

Three things to take from this story

- 01 The biggest name is not the best fit.** A partner sized so your program is a flagship account will outwork an incumbent that answers to shareholders first, and usually at a lower cost.
- 02 Treat scheduling conversion like a revenue metric.** Set a floor, benchmark it monthly, and hold the line for years. Conversion is same-store growth wearing an operations badge.
- 03 The switching risk shrinks when it has a scoreboard.** Targets exceeded inside 90 days, then held to the VMO's monthly benchmark ever since. Build the cadence in from day one.



Your legacy contract is either earning its renewal or coasting on switching fear. There is no neutral.

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

Let's Talk

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