

## POSTER ABSTRACT

### Strengthening Access to Public Health: Building Argentina's Largest Publicly Managed Health Appointment Call Center

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**Background:** Ensuring timely access to healthcare services is a cornerstone of equity and system efficiency. In the City of Buenos Aires, home to over three million residents—one million of whom rely on the public health system—appointment management had long been a bottleneck. Until 2025, appointments were handled by an outsourced call center, which faced persistent challenges: low satisfaction rates, fragmented communication, and frequent complaints from citizens. Improving accessibility required not just technological change but a shift in governance—placing operational control and accountability within the public health system itself.

**Approach:** In 2025, the Ministry of Health of the City of Buenos Aires established a publicly managed call center, the largest of its kind in Argentina, dedicated to coordinating medical appointments across the city's network of public hospitals and primary care centers. The operation runs seven days a week, staffed by 300 trained agents who manage appointments, guide users through digital health tools, and facilitate access to primary and specialty care.

The transition involved recruiting, training, and integrating the new team within the Ministry's operational structure. The model was designed to align with health policy goals—ensuring that the “front door” of the health system reflects its values of accessibility, responsiveness, and human-centered service.

**Results:** The results were immediate. Within weeks of implementation, the number of appointments scheduled daily increased from 12,000 to 16,000, marking a 33% improvement in service capacity. Citizen satisfaction rose significantly, as reflected in decreased complaints and faster response times. The new system improved coordination between the call center and care providers, reduced administrative bottlenecks, and enhanced data quality for monitoring demand and service utilization.

The transition also created a more motivated and mission-driven workforce, as call center staff became public employees integrated into the city's health network, receiving continuous training in communication, empathy, and patient orientation.

**Implications:** This experience demonstrates that access is the strategic core of public health operations. Managing the entry point to care directly within the public system ensures that strategy and execution remain aligned with health policy objectives. While some support functions can be outsourced, the governance of access—where citizens first interact with the system—must remain in public hands to guarantee equity, accountability, and quality.

The Buenos Aires model offers a scalable and replicable example for other cities seeking to strengthen patient access and coordination through publicly managed digital and telephonic platforms. It underscores that effective integration begins with how people enter the health system: through a channel that listens, resolves, and connects.