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## Case Study: A Transportation Solution for Rural Communities

FEB 28, 2019 • Focus Area: [Innovation & Technology \(/resources/?fwp\\_resource\\_focus\\_areas=innovation-technology\)](/resources/?fwp_resource_focus_areas=innovation-technology) • Program: [Technology Hub \(https://www.careinnovations.org/programs/technology-hub/\)](https://www.careinnovations.org/programs/technology-hub/)



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West County Health Centers (<https://www.wchealth.org/>) provides comprehensive and accessible medical, dental, and mental health care for people living in western Sonoma County, California.

Since its founding in 1974, West County Health Centers (WCHC) has expanded to include seven sites, including a dental center and a teen clinic. In 2002, WCHC was designated a Federally Qualified Health Center, which qualifies it for federal funding for low-income and uninsured patients (no one is turned away for lack of funds). WCHC has not only continued to grow, it has continued to innovate and adapt as well. In recent years WCHC installed solar energy to cut power costs, expanded services for HIV/AIDS patients, and initiated a Healthcare for the Homeless program, among other initiatives.

**This year, WCHC staff tackled a problem that health clinics around the country face: how to help patients with transportation issues get to their medical appointments.** With seed money and support from iLab (<https://www.careinnovations.org/ilab-hq/>), WCHC implemented a reliable and easy-to-use transportation technology that has had a big impact.

## Innovation Lab

In our 2018 round of projects, iLab (<https://www.careinnovations.org/programs/seeding-innovation/>) enabled five teams to pilot and iterate on solutions that reduced upstream barriers to health. Projects included creating transportation access in rural areas, housing for people displaced by destructive wildfires, a high school completion pathway for African-American students, and collaborative case management models between elementary schools and health providers.

### Project Profile

West County Health Centers provides comprehensive medical, dental, and mental health services to patients throughout western Sonoma County. Eighty percent of its patients live at or below the federal poverty level, and many are homeless.

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<b>Organization</b>	West County Health Centers ( <a href="https://www.wchealth.org/">https://www.wchealth.org/</a> )
<b>Issue</b>	Many WCHC patients live in rural communities and lack access to reliable transportation, which makes it hard for them to get to medical appointments. Missed appointments not only jeopardize patient health and risk turning a routine health complaint into a serious condition, they create additional costs for the clinic and inconvenience for busy medical staff.
<b>Solutions Tested</b>	WCHC teamed up with Hitch Health ( <a href="https://www.careinnovations.org/resources/tech-demo-hitch-health/">https://www.careinnovations.org/resources/tech-demo-hitch-health/</a> ) to provide transportation for patients through a ride sharing service.
<b>Financial Investment</b>	\$\$\$
<b>Partners</b>	<ul style="list-style-type: none"><li>– Hitch Health (<a href="https://hitchhealth.co/">https://hitchhealth.co/</a>)</li><li>– KLH Consulting (<a href="https://www.klhconsulting.com/">https://www.klhconsulting.com/</a>), an IT vendor</li><li>– WCHC's Patient &amp; Family Council / Patient Voice</li></ul>

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## When Transportation is a Barrier to Health Care

Many Americans lack access to reliable transportation, and research (<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4265215/>) has shown that this can be a significant barrier to health care, particularly for low-income patients. According to one study ([https://www.researchgate.net/publication/39967547\\_Access\\_to\\_Health\\_Care\\_and\\_Nonemergency\\_Medical\\_Transportation](https://www.researchgate.net/publication/39967547_Access_to_Health_Care_and_Nonemergency_Medical_Transportation)) every year, an estimated 3.6 million Americans miss getting medical care because of lack of transportation. Missed appointments can lead to more severe and expensive medical conditions. According to one study (<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4265215/>), "... transportation barriers may mean the difference between worse clinical outcomes that could trigger more emergency department visits and timely care that can lead to improved outcomes."

West Counties Health Clinic is located in western Sonoma County, a rural area of far flung and isolated communities. Over 80 percent of WCHC patients live at or below the federal poverty line and many are homeless. WCHC also serves a number of people displaced by the 2017 Tubbs Fire, one of the most destructive fire in California history. Many WCHC patients must travel long distances for medical care. Some patients don't have access to a vehicle or a friend or family member who can reliably drive them. At the same time, bus service can be spotty and often involves long waits and travel times, which can be grueling for fragile patients. For very poor patients, gasoline and bus fare costs may also be prohibitive. Transportation is one of the top three social determinants of health (SDOH) affecting the WCHC patient population.



(<https://www.careinnovations.org/wp-content/uploads/hill-2677383.jpg>)

At WCHC, appointment no shows and late cancellations are a fact of life, according to Kathleen Figoni, the clinic's innovation project manager. "Our clinic staff are constantly juggling schedules," she says. "The lack of reliable transportation has a huge impact on our patients. Some are really sick: just walking into the clinic is hard, and riding the bus can be traumatizing."

Missed appointments are also a drain on clinic resources. "You can walk into the clinic office and hear nurses on the phone with patients, trying to help them figure out transportation," says Figoni. "They do a wonderful job, but it's time consuming, and not the best use of their time." According to one national estimate, missed medical appointments result in a staggering \$150 billion in lost clinic revenue and staff time every year.

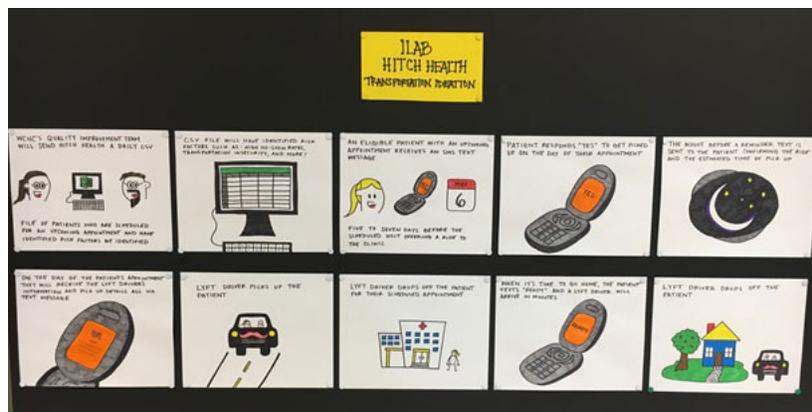
## Hitch Health

The issue of how to improve patient access to reliable transportation was on Kathleen Figoni's mind when she and other WCHC colleagues attended a Safety Net Innovation Network (<https://www.careinnovations.org/programs/snin/>) meeting in 2017 and heard a pitch by representatives of Hitch Health (<https://www.careinnovations.org/resources/in-the-incubator-hitch-health/>). Hitch Health, which was developed by the Hennepin County Medical Center in Minneapolis, is software that links clinic electronic health records to the rideshare service, Lyft.

Hitch Health works like this:

When a patient makes an appointment, they receive an SMS text message offering a ride to the clinic on the date of their appointment. (Patients do not need to have a smartphone to receive the messages, nor do they need access to the Lyft app.) If the patient accepts the ride, they receive reminders, and are picked up and taken to their appointment at the scheduled time. The system also provides clinic staff with updates on when the patient will arrive. When the appointment is over, the patient texts again, and a driver comes to take them home. This process is automated and does not involve active management by frontline health center staff.

To Figoni and her colleagues at WCHC, Hitch Health sounded like a wonderful way to tackle transportation barriers facing their patients. With seed money from iLab, they teamed up with Hitch Health and began implementing the system in early 2018.



(<https://www.careinnovations.org/wp-content/uploads/Hitch-Health-Flow-Illustration.jpg>)

## Getting to the Clinic On Time

To get started, WCHC created a project team made up of clinic administrators. The team held monthly meetings, beginning in January 2018. They enlisted the help of the WCHC's Patient and Family Council, the clinic's patient advisory group, and its input proved invaluable. A member of the patient group found the initial text messages confusing, for example, and recommended clearer language. Some other adjustments based on input from the Patient and Family Council:

- Text language was modified to take into account low literacy among some in the patient population (messages are currently in English; a Spanish version is in development).
- Hitch Health's text messaging system was based on Central Time, so had to be converted to Pacific Time.
- If a driver is reassigned, patients are now alerted via text message.
- If a patient needs to cancel a ride, they can now do so by adding the message "No Ride" to the text message thread at any time.



Seth Emont from iLab consulted with WCHC early in the process to help the Project Team develop qualitative questions to help them evaluate how the new system was working. iLab seed money was used primarily for patient rides.

The Project Team also worked closely with Hitch Health representatives throughout the implementation process and continues to consult with them via weekly calls today. Since Hitch Health software was developed to meet the needs of urban patients

(WCHC was the first rural clinic to try it) a number of adjustments had to be made. It also took some time to work out technical issues that came up as WCHC and Hitch Health coordinated their two different systems.

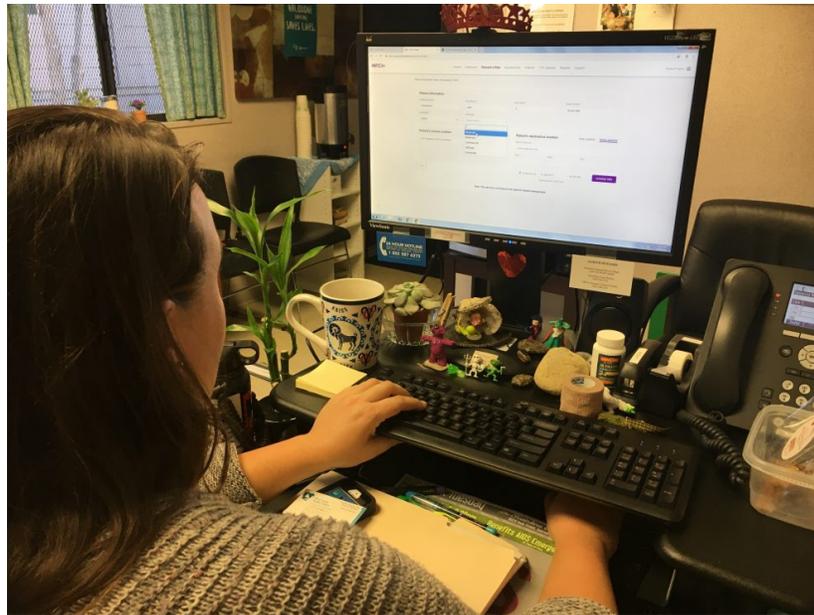
The testing phase took from January to July – far longer than WCHC anticipated, but it was valuable time because it gave the Project Team a chance to work out kinks in the system before they rolled it out for patients. They tested and refined messaging language, worked with Hitch Health representatives to create additional messages, and developed a script and trained WCHC's call center staff so they could handle any problems that came up.

In July 2018, WCHC launched a one week test pilot at the Gravenstein Community Health Center near Sebastopol. The initial pilot included only patients from certain zip codes who were scheduled for primary care visits. That trial led to further refinements and more testing that varied from the text message content, to changing the how many patients were sent messages at time, to working with health center front office scripts for questions or requests about the program.

Patient response at the Gravenstein clinic was good, and the system seemed to be working well, so the project team decided to try implementing Hitch Health at the Russian River Health Center in Guerneville as well. This clinic is located in the most rural part of WCHC's service area; it's also where transportation insecurity is greatest. But it also turns out to be an area with very little Lyft coverage. Drivers are concentrated in Santa Rosa, which is 40 minutes from Guerneville. When the clinic tried implementing the ride system, Lyft drivers repeatedly cancelled scheduled pick-ups. "We learned quickly that the rural geography created significant barriers to Lyft access both in pickup and drop-off," according to Kathleen Figoni. After a month of trying, WCHC decided to halt the pilot at the Russian River location.

Meanwhile, when Hitch Health was piloted with WCHC's Healthcare for the Homeless patients, it worked well. Healthcare for the Homeless outreach workers used an "On Demand" feature on the Hitch Health dashboard, which arranged for patients to be picked up immediately (instead of scheduling rides in advance). "Scheduling a ride or visit in advance with the homeless population is challenging," says Figoni. "Requesting a ride when the patient was right there was far more efficient."

WCHC is continuing to pilot Hitch Health at its Gravenstein Community Health Clinic, expanding the service to all visit types (i.e. not just primary care visits) and to patients in additional zip codes. WCHC is also testing a new Hitch Health feature that will allow homeless patients to schedule rides for specialty appointments two weeks in advance.

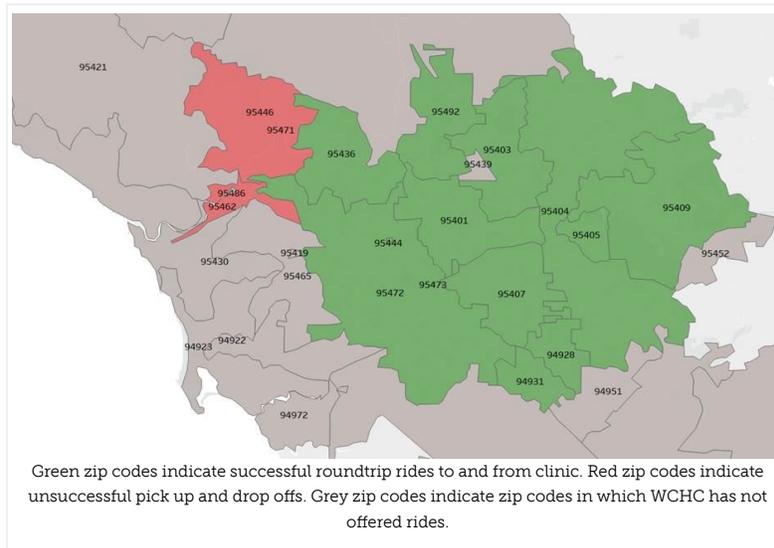


## Results

WCHC is currently evaluating the Hitch Health initiative to see if and how much it has reduced patient no shows and late cancellations and to assess the patient experience. They are continuing to collect and analyze data to establish proof of concept and will have results in the next few months.

Some preliminary findings:

- Out of 2,096 patients with upcoming appointments who qualified for a Lyft ride (based on type of appointment and zip code) 56 (3 percent) accepted the ride invitation. Out of that number, 35 patients (62 percent) used the ride service to get to the clinic.
- Ride acceptance rates are increasing as the pilot progresses and more patients are familiar with the process and have had good experience. Allowing for this natural 'ramping' up process was a good lesson learned.
- Satisfaction with the service was high: When patients were asked how likely they were to recommend the ride service to someone else, on a scale of 0 to 10 with 10 being very likely, the average score was 9.9.
- 82 percent of patients found the service very easy to use.
- In interviews with WCHC staff, many patients who were asked what they would have done if the Hitch Health Service was not available said they would have cancelled their appointments; others said they would have taken a bus or taxi, gotten a ride with family or friends, or rescheduled their appointment.



One patient reported, "It's awesome! My condition has resulted in loss of driving privileges, so Hitch makes it possible to get to appointments. Thank you!"

And another patient said, "If this service was not available I would have tried to get a ride with friends, I have part ownership of a car but can no longer drive myself due to my anxiety. Using this service was very easy and I like to get to my appointment early and that happened with this service! I would definitely use this again. The cars were immaculate, and taxis often smell and well, the bus can be downright traumatic, so as long as I can use this service I will."

Clearly, a year into the project, Hitch Health is already helping WCHC eliminate transportation barriers to health care for some of its patients. Kathleen Figoni, who conducted extensive patient surveys about the program, says the biggest challenge is how

to expand it. "Our patients love this service, and don't want it to go away," she says. "They are really hoping that this pilot remains sustainable and that we can do more. We'd like to expand it to all our clinics."

For clinic staff, too, Hitch Health has shown benefits. "Using this technology has been useful for eliminating the staff role in managing transportation," Figoni observes. "It has helped us put these arrangements directly into the hands of patients, so our nurses are freed up to do what they do best."

Expanding the program to other areas and clinics won't be easy. In many areas of western Sonoma, there aren't enough Lyft drivers available to ensure reliable rides for patients. Figoni plans to meet with Lyft representatives to find out if there is a way to expand the service. She also plans to talk to a local taxi company that the clinic often works with to see if there are ways to expand that partnership.

But Figoni is hopeful that these obstacles can be overcome. "I can see how much value there is in this and it warms my heart; we're making a significant impact," she says. "It outweighs the hiccups that we've experienced along the way."

Long-term viability and financial sustainability will be assessed based on measured reduction in no-show or late cancellation for scheduled office visits, partnership with health plans or other payors who have existing non-emergent transportation responsibility, and assessment of clinical impact on patients with transportation insecurity.



"The relational value add of this project cannot be overstated. In a very tangible way, West County Health Centers was able to reach outside the four walls of our health centers to assist out patients with one of their most significant social barriers, transportation."

**Jed Heibel**

Director of Community Programs

## Lessons Learned

- It's essential to build sufficient time in the project schedule so team can respond to a range of different issues.
- Data projects that require exchange of information across systems will likely require coordination with key stakeholders and vendors, which will require planning and time.
- It's important to have regular project team meetings with the vendor and, when the product goes live, to have several five to 10 minute check-ins with the vendor each week.
- From the beginning, patients and members of the community should be consulted so their feedback and concerns will help shape the project.
- Before going live with patients, make sure Project Team and end-users (patients and/or advisory group) test the platform and patient experience.

## Next Steps

- Kathleen Figoni will reach out to Lyft's Northern California Regional Sales & Account Manager to talk about expansion in Western Sonoma County.
- Project team will launch pilot of the feature, "Schedule a Ride on Demand." This feature allows WCHC's Healthcare for the Homeless care team members to schedule specialty appointments for patients up to two weeks in advance. They will also continue testing with Partnership Health Plan's MDM Transportation to compare and contrast the differences in cohorts.
- The project team plans to compare rates of no shows/late cancellations before and after Hitch Health implementation.
- They will also compare outcomes for patients with diabetes, and complex Chronic Care Management patients, before and after Hitch Health implementation.
- WCHC plans to expand Hitch Health to WCHC's Dental Clinic in Sebastopol.
- WCHC's managed Medi-Cal plan is currently contracted with a third party for transportation under Medicaid's non-emergent transportation requirement, WCHC is in discussion with the health plan to determine if other transportation services, including Hitch Health, could be covered. WCHC is also conducting a comparison of the third party contractor and Hitch Health for a limited patient cohort within the pilot to assess how they perform in terms of completion of rides and patient satisfaction.

## Key Tools & Documents

- User Tip Sheet ([https://www.careinnovations.org/wp-content/uploads/West-County\\_Hitch-Health-User-Tip-Sheet.pdf](https://www.careinnovations.org/wp-content/uploads/West-County_Hitch-Health-User-Tip-Sheet.pdf)): An overview that guides end users step-by-step on how to use the Hitch Health dashboard.
- Troubleshooting Guide ([https://www.careinnovations.org/wp-content/uploads/West-County\\_Trouble-Shooting-Staff-Workflow-for-Scheduled-Rides.pdf](https://www.careinnovations.org/wp-content/uploads/West-County_Trouble-Shooting-Staff-Workflow-for-Scheduled-Rides.pdf)): A step-by-step document that outlines how to staff can successfully troubleshoot a problem if an issue arises.
- Hitch Health Monthly Report (<https://www.careinnovations.org/wp-admin/upload.php?item=20678>): A sample report can be generated through the Hitch Health dashboard.
- Patient Flow of Scheduled Rides: (<https://www.careinnovations.org/wp-content/uploads/Patient-Use-of-Hitch-Health-Flow-Chart.pdf>) Gravenstein Community Health Center and Russian River Health Center.
- Patients Flow of "On Demand" Rides (<https://www.careinnovations.org/wp-content/uploads/HCH-Ride-on-Demand-Patient-Use-of-Hitch-Health-Flow-Chart.pdf>): Healthcare for the Homeless Clinic.

## Learn More

Interested in learning more about this project? Contact Kathleen Figoni, innovation project manager at West County Health Centers.

**Get In Touch (<mailto:kfigoni@wchealth.org>)**

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(<https://www.careinnovations.org/resources/tech-demo-hitch-health/>)

OCT 16, 2018 • CENTER FOR CARE INNOVATIONS (/RESOURCES/?  
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