



**DNA TRACKING:** A research technician at the genomics lab at the Weis Center for Research in Danville, Pa., checks some DNA samples.

## **BIOBANKING**

### **Grassroots initiative aims to address community health in Pennsylvania**

*New effort combines genetic screenings and access to healthy food to root out social determinants in community*

**G**eisinger Health System, serving 45 counties in Pennsylvania and southern New Jersey, recently launched a grassroots health initiative in Scranton, Pa., with an eye on eliminating the social determinants in health for that community. Called Springboard Health, the initiative combines data, such as a patient's DNA and electronic health record, with a healthy food program.

Following the test in Scranton, the initiative will look to expand nationally, says David Feinberg, M.D., president and CEO of Geisinger. "We see this as urgent. Health care reform is not going to happen in Washington, D.C. We're partnering with great organizations to get this to happen today."

Feinberg says Scranton's 76,000 population struggles with a high rate of diabetes, drug overdoses and poverty, and it's a postindustrialized city with poor access to health care. Springboard

Health's goal is to gather the whole sequence of DNA from people in Scranton and combine that with electronic health records to identify whether they have a gene mutation that may require medical action. For example, early onset breast cancer, familial hypercholesterolemia or a cardiac arrhythmia can be identified.

The genome part of the program is called Geisinger's MyCode Community Health Initiative. "We have consented 160,000 people for this," Feinberg says. "We have the largest biobank in the world now of genomic material combined with electronic health data. And it's a great profit to get that information back to patients and doctors so they can prevent diseases before they happen."

The "whole grain" part of the effort is called Fresh Food Pharmacy and actually began in Shamokin, a town near Scranton. If someone identifies as having had to skip a meal for finan-

cial reasons, they can qualify to receive a week's worth of healthful food, cooking instructions, and a microwave and hot plate, if necessary. "We've seen that 100 percent of those patients have had a decrease in their weight, in their use of diabetic medications, decrease in their cholesterol and a decrease in hemoglobin A1c."

Feinberg says that a decrease in hemoglobin A1c means fewer people needing amputations, fewer people going blind and fewer people on dialysis. "We're also a health plan so, as we make people healthier, it benefits us as a payer for health care. As those diabetics drop their hemoglobin A1c from a nine to an eight to a seven, each point that they drop saves us about \$8,000 a year in health care costs."

Richard Zane, M.D., chief innovation officer at UCHHealth, Aurora, Colo., who served on a panel with Feinberg at January's StartUp Health Festival in San Francisco where Springboard Health was announced, says the program has an advantage in its funding and because Geisinger is a dominant provider and payer in the community.

"It's important to address the social determinants of health as you would any other issue affecting health, like high blood pressure or diabetes," he says. "This new approach has potential to have a big impact."

Funding for Springboard Health comes from Geisinger itself, along with donations and grants secured by the Geisinger Health Foundation. Esther Dyson, an angel investor, philanthropist and executive founder of Way to Wellville, invested in the program and serves on the advisory board. Her organization served as a model for Springboard Health. The big difference in Springboard Health, however, is having a health system as a sponsor. In the case of Scranton, Geisinger is working with local organizations such as soup kitchens, politicians and the local medical school to tap into the community.

"We're trying to fix it from a grassroots, community angle, as opposed to saying, 'we're going to solve the health care crisis in America by building another cardiac catheterization [lab]," says Feinberg. — DAN OCHWAT ●