Thank You and Farewell
As many of you know, I announced my retirement from K-State Research and Extension in May. My last day in the office will be June 27. My husband and I plan to cross a few items off our bucket list while we are still able to, and we hope to spend more time with kids and grandkids on each coast.

In my 30 plus years at K-State I have worked for several different units, moving to Extension in February 2009. I can honestly say that extension is one that has truly felt like a family, and I will miss the people I work with (co-workers, colleagues, and clients) as well as the work.

I’d like to thank you all for your support. As a retiree I will retain my K-State email, so feel free to reach out to me if there is anything I can do for you.

Deb

Deterra Drug Deactivation Packets
Deterra drug deactivation packets are pouches designed to safely and conveniently dispose of unused, expired, or unwanted medications at home or in a clinical setting. They use a process called MAT12 Molecular Adsorption Technology to deactivate medications with activated carbon. This renders the medication inert, unavailable for misuse, and safe for the environment.

Here are some of the key features of the Deterra drug deactivation packets:

- They can deactivate prescription and over-the-counter medications, including pills, patches, liquids, creams, and films.
- They are easy to use and require a simple three-step process.
- They are environmentally friendly and safe for disposal in regular trash.
- They are available in a variety of sizes to accommodate different medication needs.

If you are looking for a safe and convenient way to dispose of unused or unwanted medications, Deterra drug deactivation packets are a great option. We have a limited supply available for pickup in the Salina and Minneapolis offices.

‘Like’ us on Facebook at facebook.com/CentralKansasDistrict for the latest news and events from Central Kansas Extension District.
Simply Produce

Simply Produce is a produce bundle program between Central Kansas District and Gene’s Heartland Foods in Minneapolis. Community members can purchase produce bundles containing fresh fruits and vegetables for $15+tax at any register located at Gene’s in Minneapolis. Contents in the monthly bundles do vary from month to month.

May purchase dates: May 9-14. Pick-up date and time: Friday, May 17, 12-12:30 p.m.

June purchase dates: June 13-18. Pick-up date and time: Friday, June 21, 12-12:30 p.m.

Purchasing location: Gene’s Heartland Foods located at 218 W. 3rd, Minneapolis.

Pick-up location: Community Bible Church

In this class, we will discuss the right vegetables for pickling, and walk through the pickling and canning process, step-by-step.

Come join us for this hands-on workshop to learn how to safely pickle vegetables and can them using the water bath canning technique.

INSTRUCTOR: KAREN BLAKESLEE, M.S.

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Kansas State University Agricultural Experiment Station and Cooperative Extension Service

K-State Research and Extension is an equal opportunity provider and employer.
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July – Program paused during July due to Ottawa County Fair
August purchase dates: August 8-13
Pick-up date and time: Friday, August 16 12-12:30pm

Purchasing location: Gene’s Heartland Foods located at 218 W 3rd, Minneapolis
Pick up location: Community Bible Church located at 929 N. Rothsay, Minneapolis

**StoryWalk® at Markley Grove Park**

Families are encouraged to visit Markley Grove Park in Minneapolis to see the new StoryWalk®. North Ottawa County USD 239 Parents as Teachers and Central Kansas District are excited to offer this fun activity for local families and visitors.

The selected title for July is “Celebrate Wheat” by Dan Yonk

The selected title for August is “Goodnight, Goodnight, Construction Site” by Sherri Duskey Rinker & Tom Lichtenheld

**Ottawa County Fair**

- July 16-19
- Fair theme: Fair Fever

**Tri-Rivers Fair**

- August 7-10
- Fair theme: Fair Lights & Starry Nights

A StoryWalk® promotes both literacy and physical fitness for families in a fun and exciting way. The StoryWalk® contains laminated pages from a children’s book that are attached to signposts, which are along a path for families to walk and read. “The StoryWalk® Project is the creation of Anne Ferguson and the Kellogg-Hubbard Library from Montpelier, Vermont and it is described as: "An innovative and delightful way for children and adults to enjoy reading and the outdoors at the same time.” Learn more about The StoryWalk® Project here: [http://www.kellogghubbard.org/storywalk](http://www.kellogghubbard.org/storywalk).
Why is Headspace Important in Canning?

Headspace is the space in the jar between the inside of the lid and top of the food or its liquid. The amount of headspace needed depends on the type of food being processed.

If the jars are filled too full the contents may boil out during processing. Solids or seeds may be caught under the sealing compound and prevent the jar from sealing.

If too much headspace is left at the top of the jar, the processing time may not be long enough to drive out all the extra air from the top of the jar. This would mean that a tight vacuum seal may not be formed. Also, the air left inside the jar could cause the food to discolor.

For the correct headspace for each food, check the processing directions for each specific food.

Starchy foods, such as beans or potatoes, tend to swell when heated and therefore require more headspace.

The extent of expansion during processing is determined by the air content in the food and by the processing temperature. Air expands more at higher temperatures.

The USDA Complete Guide to Home Canning recommends the following headspace measurements:

- Jams and Jellies—1/4 inch
- Fruits and tomatoes to be processed in a boiling water bath—1/2 inch

- Low acid food to be processed in a pressure canner—1–1 1/4 inches

Source: USDA Complete Guide to Home Canning and National Center for Home Food Preservation

Medicare Creditable Drug Coverage

Those who are still working and covered by an employer group health plan with creditable drug coverage are able to delay enrolling, without penalty, in a Part D plan until they leave employment and lose that coverage. To be considered creditable coverage the employer coverage must meet or exceed the Medicare Part D standard (be as good or better than). The employer must notify employees eligible for Part D whether or not their employer plan drug coverage is considered creditable coverage, but from talking to beneficiaries, many do not receive this notice.

The Inflation Reduction Act contained several cost-reduction measures that could affect the creditable coverage status of employer-provided prescription drug plans starting in 2025 including a cap of $2,000 on out-of-pocket spending for Part D medications. This will make it more difficult to qualify as creditable coverage, especially for high deductible health plans. If you are over 65 and still working, it will be important to check this out while you can still make changes either to your employer plan during their open enrollment period (i.e., changing to a different option at work) or enroll in a Part D plan to avoid future penalties.

Bottom-line, don’t assume because your employer drug plan is creditable in 2024 that it will be in 2025. If you find it will not be and you do not have another option at work to switch to that is creditable, you can add a Part D plan during Medicare open enrollment this fall or during a two month special enrollment period due to the loss of creditable drug coverage, but you have to be enrolled in Medicare Part A and/
or B to do so. If you are not already enrolled in Part A, this can take time. Also, Part A will be back-dated 6 months from the time you apply, which can have implications on HSA contribution eligibility. If your employer does not send out the notice of creditable coverage, ask them to find out whether Medicare considers the drug plan creditable so you can avoid future penalties.

What is the Donut Hole?
The donut hole—also called the coverage gap—can be very confusing! Here’s what you need to know:

There are four phases of Medicare Part D coverage in 2024: the deductible, initial coverage period, coverage gap (or donut hole), and catastrophic coverage. During the deductible, you are responsible for the full cost of your medications on all tiers it applies to. After you spend a certain amount, set by the plan, you reach the initial coverage period, where your plan pays a portion of your drug costs, and you pay a copay or coinsurance. After your total drug costs (what you have paid and what the plan has paid) reach a certain amount ($5,030 for most plans in 2024), you then enter the donut hole. (Note: If you have Extra Help, the following doesn’t apply to you, as you won’t have a donut hole.)

Once in the donut hole, you’ll be responsible for 25% of the cost of your drugs. You may notice a difference in what you paid for your drugs during your plan’s initial coverage phase and the donut hole. For example, if your drug costs $100 and you paid your plan’s $15 copay while in the initial coverage period, you’ll begin paying $25 for the same drug once you’ve entered the donut hole. Before implementation of the Affordable Care Act beneficiaries paid 100% of the cost of their drugs during this phase.

The donut hole phase ends when you’ve reached an out-of-pocket amount of $8,000 for covered drugs. This will put you into the next phase, called catastrophic coverage, during which you’ll have no cost-sharing for your drugs for the rest of the year in 2024. Out-of-pocket costs that count toward this $8,000 limit include:

- Amounts you paid during the deductible period
- What you paid during the initial coverage period
- Almost the full cost of brand-name drugs (including the manufacturer’s discount) purchased during the coverage gap
- Amounts paid by others (family members, charities, and other persons on your behalf)
- Amounts paid by State Pharmaceutical Assistance Programs (SPAPs), AIDS Drug Assistance Programs, and the Indian Health Service

Some costs do not count towards the $8,000 limit. These include:

- Monthly premiums
- Any amount your plan pays toward drug costs in the coverage gap
- Non-covered drug costs
- The cost of covered drugs from pharmacies outside your plan’s network
- The 75% generic discount

Your plan should keep track of how much money you’ve spent out of pocket for covered drugs and your progression through coverage periods. You can find current information in your monthly statement.

In 2025 there will be a cap of $2,000 on out-of-pocket spending and the donut hole will be eliminated.
Questions to ask before joining a Medicare Advantage Plan
With open Medicare open enrollment comes TV ads and phone calls trying to convince you to change your health plan. When you are choosing between Original Medicare and Medicare Advantage or between Medicare Advantage Plans, here are some questions to keep in mind.

Providers, hospitals, and other facilities
- Will I be able to use my doctors? Are they in the plan’s network of providers?
- Do doctors and providers I want to see in the future take new patients who have this plan?
- If my providers are not in-network, will the plan still cover my visits?
- Which specialists, hospitals, home health agencies, and skilled nursing facilities are in the plan’s network?

Access to health care
- What is the service area for the plan?
- Do I have any coverage for care received outside the service area?
- Does my doctor need to get approval from the plan to admit me to a hospital?
- Do I need a referral from my PCP to see a specialist?

Costs
- What costs should I expect for my coverage (premiums, deductibles, copayments)?
- What is the annual maximum out-of-pocket (MOOP) cost?
- How much will I have to pay out of pocket before coverage starts (what is the deductible)?
- How much is my copayment for services I regularly receive, such as PCP or specialist care?
- How much will I pay if I visit an out-of-network provider or facility?

Benefits
- Does the plan cover any services that Original Medicare does not?
- Are there any rules or restrictions I should be aware of when accessing these benefits?

Prescription drugs
- Does the plan cover outpatient prescription drugs?
- Are my prescriptions on the plan’s formulary?
- Does the plan impose any coverage restrictions?
- What costs should I expect to pay for my drug coverage (premiums, deductibles, copayments)?
- How much will I have to pay for brand-name drugs? How much for generic drugs?
- Will I be able to use my pharmacy? Can I get my drugs through mail order?
- Will the plan cover my prescriptions when I travel?

Coordination of benefits
- How does the plan work with my current coverage?
- If I join, would I lose my job-based insurance or retiree coverage?

Understanding Hospice
Hospice focuses on comfort, not curing. It is a customized model of care that helps people with life-limiting illnesses live with dignity. Hospice focuses on maintaining the quality of life for the person, rather than aggressively treating the disease or illness. Hospice is not giving up on life.

A new fact sheet available from the K-State bookstore includes information about types of hospice care, benefits of hospice, and information related to finding and paying for hospice care. It can be found at: https://tinyurl.com/mwtyxn83
Fourth of July Pet Tips
While many people enjoy the fun and noisy celebrations of the Fourth of July, for many pets it is a time of fear and anxiety as well as other dangers.

Here are some tips for helping pets cope with their fear of the loud bangs, whistles and crackles that come with the holiday:

• Play soothing music or turn on the TV or white noise machine to attempt to block out the noise.

• Distract from the noise and commotion with food puzzles and stuffed Kongs.

• Try an anxiety wrap specially made for pets to help calm those with mild anxiety, or use the wrap in addition to medications for those with moderate to severe noise phobias.

• Use over-the-counter supplements made for anxious pets to benefit those with mild to moderate noise anxiety. Note that some of these treatments need to be started several days ahead of the holiday for best effectiveness.

• Consider temporarily relocating your pet to a quieter place, such as a friend or relative’s house or kennel, during this time.

• Talk to your veterinarian about prescription anti-anxiety medications if your pet has a moderate to severe noise phobia. Several medications are available to help treat anxiety from loud noises. Have the medication ready to give on the first day that fireworks are allowed to begin in your community. It is best to speak to your veterinarian now about medication options as offices may be closed early for the holiday.

Notice of Non-Discrimination
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The enclosed material is for your information. If we can be of further assistance, feel free to call or drop by the Extension Office.

Sincerely,

Debra Wood
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