

GRAINS OF RICE

Landmark Bill to Cut Prescription Drug Prices Signed Into Law

by Dena Bunis, AARP, Updated 8/16/22

This article in its entirety is available at
<https://www.aarp.org/politics-society/advocacy/info-2022/medicare-budget-proposal.html>

The Inflation Reduction Act for the first time authorizes Medicare to negotiate the prices of some high-cost prescription drugs with pharmaceutical companies, puts an annual \$2,000 limit on how much Part D prescription drug plan members will have to pay out of pocket for their medications, and levies tax penalties on drugmakers that increase product prices by more than the rate of inflation. The new law also caps the cost of Medicare-covered insulin at \$35 a month and eliminates out-of-pocket costs for most vaccines under Medicare.

Here are the main elements of the health care portions of the new law.

PART D CHANGES

For the first time, out-of-pocket costs for Medicare Part D prescription drugs will be capped. Starting in 2025, beneficiaries will not have to pay more than \$2,000 a year for their share of Part D drug prices.

Beginning in January, most vaccines will be free in Medicare.

Part D premiums cannot increase more than 6% a year through at least 2029. The income threshold for beneficiaries to qualify for a subsidy to help pay for Part D out-of-pocket costs is increased from 135% of the federal poverty level (\$18,347 for an individual in 2022) to 150% (\$20,385 for an individual in 2022).

NEGOTIATING DRUG PRICES

The law authorizes the Health and Human Services secretary to begin negotiating the prices of 10 high-cost prescription drugs in 2023, and the negotiated prices will go into effect in 2026 for Part D medications and in 2028 for drugs covered under Medicare Part B. The number of drugs whose prices will be negotiated on behalf of Medicare will increase in subsequent years, and by 2029 a total of 60 drugs will be subject to negotiated prices.

INFLATION REBATE

Beginning in October, if the price of a Part D prescription drug is raised by more than the rate of general inflation, the drugmaker will have to rebate to Medicare the amount of the increase above the inflation rate. Rebates for higher-than-inflation price hikes for medications covered under Medicare Part B (usually office-based infusions, such as for cancer drugs) will begin in January 2023.

HEALTH CARE SUBSIDIES EXTENDED

For people who buy their health insurance through the ACA marketplaces, the bill extends through 2025 the expanded federal premium subsidy and other financial enhancements made under the American Rescue Plan. For those 50 to 64 years of age, these subsidies provide an average savings of over \$950 annually, and all consumers will continue to pay no more than 8.5 percent of their income for ACA health insurance premiums.

Dena Bunis covers Medicare, health care, health policy and Congress. She also writes the Medicare Made Easy column for the AARP Bulletin.





Getting to know **Darin Clark,** **RCCA Board President**

Where were you born? Lyons, Kansas, where I have lived for most of my life.

Where did you go to High School? Lyons High, Class of 1986.

Are you married? Yes, to Barbara Clark. We celebrated our 35th anniversary in May.

Do you have any children? Yes, we have one son.

Do you have any grandchildren? Yes, we have two granddaughters.

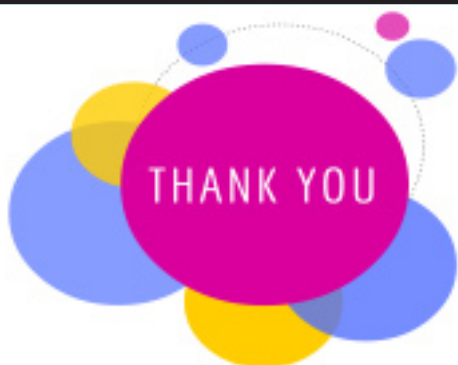
Where do you work? My wife Barb and I are the operating partners of Sonic. We have been for the past 25 years!

You are very involved in the community, what other programs are you, or have you been involved in?

- Current Chairman of the City of Lyons Planning Commission. I have been on the Planning Commission for 12 years.
- Current Celebration Centre and Arena Board Member.
- Lyons Chamber of Commerce past Board Member.
- Rice County Tourism past Board Member.
- Kings Cross Church, Lyons Member. My church and the community are very important to me.

I would like to add I am honored to be the new Board President, and be a part of the Rice County Council on Aging's future.

Did you know that if you have Medicaid you may be eligible for free rides to doctor and dentist appointments anywhere in Kansas? You can even request the Rice County Council on Aging as your transportation. Look on the back of your Medicaid card for the phone number by transportation! Come by the office if you need us to assist you.



We've have many requests for increased services and decreased funding. Please know, we are most grateful for each one of you that donates.

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ANXIETY & SLEEP

Kathleen Smith, PhD, LPC
psycom.net/anxiety-and-sleep

**Do you suffer from anxiety and sleep disturbance?
Try these 6 tips for improving sleep problems and managing your anxiety.**

If you're experiencing stress in your life, chances are that you might be struggling to fall or stay asleep at night. Your anxious worry about life and its problems may keep your brain from settling down, and the disruption of sleep is likely to keep you feeling more on edge the next day.

Sleep disruption is a common feature of mental health problems, and anxiety is no exception. You don't have to have a diagnosed anxiety disorder to feel the impact the stress and worry can have on your sleep patterns. Over 40 million Americans say they experience a long-term sleep disorder, with many others experiencing occasional sleep disruption. 70% of adults report that they experience daily stressors, so it makes sense that Americans on average are reporting they get less sleep than in previous decades.

Which Comes First?

So which comes first, the anxiety or the disruption of sleep? Researchers have found that the relationship between sleep problems and anxiety is bidirectional. This means that sleep problems can cause anxiety, and anxiety can disrupt your sleep. And just like anxiety, sleep problems can impact how you function emotionally, mentally, and physically.

Because sleep and anxiety have such a strong relationship, it's important to address both when you meet with your doctor. In addition to anxiety, sleep problems can put you at higher risk for missing work or school, injuring yourself, and developing health conditions such as heart attack, hypertension, stroke, and diabetes among others. If you're being treated for chronic insomnia, it's essential to express any concerns you have about how anxiety affects your day-to-day life. Treating sleep problems without



taking steps to manage anxiety and reduce stress is unlikely to have any real impact.

Treatment Options

Once you talk to your physician about your sleep problems, they may refer you to a sleep clinic to gather more information. Mental health professionals can also provide you with sleep education and help you design an action plan for sleeping through the night. To treat anxiety conjointly with sleep problems, professionals typically recommend medication, therapy, or a combination of the two. Cognitive behavioral therapy is an evidence-based form of psychotherapy that can help you challenge your anxious thinking. Doctors or therapists may also recommend mindfulness meditation as tool for calming your busy mind.

Tips for Improving Sleep and Managing Anxiety

Move your body – Exercise has been found to both lower anxiety and improve sleep. But try not to exercise right before sleep, as it can keep you awake. Moving your body in the morning or afternoon can help you get your sleeping and waking cycle back on track and also treat insomnia or sleep apnea.

Tailor your environment – Controlling light, sound, and temperature can help you get a good night's rest. The darker, quieter, and cooler you can keep your bedroom, the greater chance you have of calming your mind and falling asleep. Taking a shower or bath shortly before

bed can also help lower your body temperature and help you fall asleep more quickly.

Limit caffeine and alcohol

– Drinking too much caffeine or consuming it too late in the day can increase anxiety and inhibit sleep. Consuming alcohol

close to bedtime can also increase your heart rate and keep you up. Drink plenty of water throughout the day, but don't drink too much before bedtime, as trips to the bathroom can keep you anxious and alert.

Calm your mind – There are many relaxation techniques that can help you calm your mind throughout the day and improve sleep. Mindfulness meditation, yoga, and breathing exercise can help you achieve calm, but it can also be as simple as taking a walk when you have a short break at work. If you practice techniques for calming your mind during the day, then it will be easier to trigger your relaxation response at night.

Limit screen time – Your phone, tablet, and TV emit light that keeps your brain awake, so try to limit them an hour before bedtime. Checking email or doing work right before bed can also trigger anxious thoughts and make it difficult to calm your brain. Consider setting an alarm to remind you to shut screens off at an adequate time before bed. Instead, consider listening to music or reading a book to quiet your mind.

Ask for help – Sometimes managing anxious worry and improving sleep is more complicated than simply turning off your phone or getting adequate exercise. Never hesitate to ask for help if you need it from your doctor or a counselor. Sleep problems and anxiety are highly treatable, so consider whom you can recruit today to help you rest your mind and body.

Medicare Will Not Lower 2022 Part B Premium

HHS says midyear change not feasible, will pass on savings from reduced spending on Alzheimer's drug in 2023

by Dena Bunis, AARP, Updated May 31, 2022

Medicare's Part B \$170.10 basic monthly premium will not be reduced this year, but instead any savings from lower spending will be passed on to beneficiaries in 2023.

U.S. Health and Human Services Secretary Xavier Becerra had ordered the Centers for Medicare and Medicaid Services (CMS) to reassess its record-high premium increase in 2022 for Part B, which covers doctor visits, diagnostic tests and other outpatient services. The \$21.60 basic premium hike in 2022 was the largest dollar increase in the health insurance program's history.

Among the reasons CMS gave for the outsize increase was that it needed to set aside money in its reserves in the event it decided to cover Aduhelm, the new Alzheimer's drug approved in June by the U.S. Food and Drug Administration (FDA). At the time, Biogen, the medication's manufacturer, estimated the drug's price would be \$56,000 a year. After considerable pushback, Biogen cut its price estimate roughly in half, saying the drug would cost \$28,200 annually effective January 1, 2022. Also, since the premium increase was announced, CMS decided that Medicare coverage of Aduhelm will be limited to beneficiaries enrolled in approved clinical trials.

AARP has urged CMS to lower this year's premium. "It is unconscionable for a single outrageously priced drug to drive up premiums for all Medicare beneficiaries — many of whom are already struggling to make ends meet," Nancy LeaMond, AARP executive vice president and chief advocacy and engagement officer, said in asking for a re-assessment of the \$170.10 premium. "Now that the drug maker has cut the price in half, the Medicare Part B premium increase should be lowered as well."

CMS officials say that reflecting the savings in what Medicare will likely have to spend on those beneficiaries who will be eligible for Aduhelm "in the calculation of the 2023 Medicare Part B premium is the most effective way to deliver these savings back to people with Medicare Part B." CMS is expected to announce the 2023 Part B premium in the fall.

In their report, CMS officials say they determined that "a mid-year administrative premium redetermination to not be operationally feasible" and that the agency has never changed the premium in the middle of the year. CMS notes that it wouldn't have the authority to send premium refunds to all Part B enrollees. The report also says that absent the effects of covering Aduhelm, the basic 2022 Part B monthly premium would have been \$160.30. The 2021 Part B premium was \$148.50.

"After receiving CMS's report reevaluating the 2022 Medicare Part B premiums, we have determined that we can put cost-savings directly back into the pockets of people enrolled in Medicare in 2023," Becerra said in a statement. "We had hoped to achieve this sooner, but CMS explains that the options to accomplish this would not be feasible."

LOGO QUIZ

Test your knowledge
in this trivia quiz
game! how many
world famous logos
can you recognize?



Answers on page 9

Medicare Face-Off: ORIGINAL VS. ADVANTAGE!

by Sari Harrar, AARP, October 12, 2021

Medicare covers most medical services that beneficiaries need but there are differences in how those needs are covered, including which providers you can see, what hospitals and other facilities you can access and how you pay for care. Here are some key differences between original Medicare and Medicare Advantage (MA) plans.

A Screening Colonoscopy

ORIGINAL MEDICARE

PROS

- They are 100% covered when done at recommended intervals and by a doctor/facility that accepts Medicare.
- You don't need a referral.

CONS

- You have to pay for bowel prep products. Part D drug plans cover them, but you may have a copay.
- If a polyp is removed and biopsied, the procedure becomes diagnostic and you may be responsible for 20% of costs. You'll face diagnostic charges, too, if you need a colonoscopy because another test found a potential problem. A supplemental policy may help.

MEDICARE ADVANTAGE

PROS

- Screening colonoscopies at recommended intervals are covered 100%, provided you use an in-network doctor.
- Some plans pick up the cost if a polyp is found & removed during your colonoscopy or if you need a colonoscopy due to a test finding.

CONS

- Usually you'll need to use an in-network provider for the procedure.



ORIGINAL MEDICARE

PROS

- You can see any specialist who accepts Medicare.
- Covers 80% of medically necessary physical and occupational therapy. Supplemental insurance may cover remaining costs.
- Covers up to 20 acupuncture sessions for low-back pain and chiropractic spine manipulation with 20% coinsurance.

CONS

- Doesn't cover massage therapy or over-the-counter (OTC) pain remedies.

Ongoing Pain

MEDICARE ADVANTAGE

PROS

- Massage therapy for pain by a state-licensed massage therapist may be covered.
- You may get a monthly stipend for OTC pain remedies like ibuprofen, as well as for knee braces and back supports.
- Covers physical and occupational therapy with in-network therapists, with copays as low as \$10 to \$20 in some plans.

CONS

- You must use in-network providers or pay more to see an out-of-network expert, except in special cases.
- You may need a referral and approval before seeing a specialist or physical/occupational therapist.

Weight-Loss Help

ORIGINAL MEDICARE

PROS

- If your body mass index is 30 or higher, you may qualify for up to 22 visits for nutritional assessment and counseling in a free obesity management program. Up to two years of Diabetes Prevention Program classes, which include weight loss and nutrition, are covered for people with prediabetes.

CONS

- Gym memberships & commercial weight-loss plans aren't covered.

MEDICARE ADVANTAGE

PROS

- Plans *may* offer help with programs like WW (formerly Weight Watchers, which offers AARP members a discount), Jenny Craig or Nutrisystem.
- You *may* also be able to get a gym membership, such as SilverSneakers.



An Emergency Appendectomy

ORIGINAL MEDICARE

PROS

- You can go to any emergency room.

CONS

- Unless you have supplemental insurance, you'll pay a share of the ER visit and each medical service you receive, plus a 20% coinsurance for emergency room doctor fees.
- You'll pay 20% of ambulance costs, if one was used.
- If you're admitted to the hospital, without a supplemental plan, you'll pay a \$1,556 deductible for your hospital visit.

MEDICARE ADVANTAGE

PROS

- You can get care in any ER, with a copay that *could* be \$50 to \$90.
- Your ambulance ride *could* be free or cost less.

CONS

- If admitted to out-of-network hospital, charges may not be covered after you're deemed "stable."
- If your doctor determines you need a procedure but it's not extremely urgent, you may face high bills unless you switch to a hospital in the network.

Chronic Conditions (diabetes, arthritis, heart disease, etc.)

ORIGINAL MEDICARE

PROS

- You don't need a referral to see specialists.
- You can choose any specialist in the U.S. who accepts Medicare.
- You can get routine tests and treatments without prior authorization.
- Supplies like test strips, blood-sugar monitors and nebulizers are covered (usually a 20% cost share).

CONS

- You need a separate Part D plan to cover prescription medicines.
- There's no cap on annual out-of-pocket costs, although a supplemental Medigap policy would cover most of them.
- Some diabetes programs are covered, but not most gym fees and weight-loss or healthy lifestyle programs.

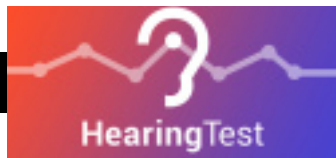
MEDICARE ADVANTAGE

PROS

- A primary care doctor typically manages your overall plan. Research suggests this may improve outcomes.
- Many plans cover supplies plus the costs for gym memberships, weight-loss programs and other health services.
- You may be eligible for a Medicare Advantage Special Needs Plan (SNP) that provides care tailored to chronic conditions.

CONS

- Most plans require you to use in-network providers. This could mean not being able to see your preferred doctor.
- Academic medical centers offering more advanced treatments may not be in your network.
- Tests and treatments often require pre-authorization.
- The annual cap on out-of-pocket costs can be high — up to \$7,550 to \$11,300.



Hearing Decline

MEDICARE ADVANTAGE

PROS

- Almost all plans offer some coverage for hearing exams and/or hearing aids.
- Some plans can have a \$0 copay for exams and hearing aid fittings. What you'll pay for hearing aids can vary widely.

CONS

- You'll likely have to use in-network hearing aid providers.
- You may need prior authorization.

ORIGINAL MEDICARE

PROS

- Covers hearing exams when used to help diagnose a medical problem. You pay 20% after deductible.

CONS

- Original Medicare doesn't cover routine hearing exams, hearing aids or exams to fit hearing aids.

A Case of the Flu

ORIGINAL MEDICARE

PROS

- You can go to any doctor or urgent care center that accepts Medicare.
- A flu test may be fully covered. Part D drug plans will cover an antiviral flu drug for as little as \$3 to \$10 for generics (more for some brand-name drugs).

CONS

- Unless you have supplemental insurance like Medigap, you'll pay 20% of the cost of a doctor or urgent care visit after meeting your Part B deductible (\$233 in 2022).

MEDICARE ADVANTAGE

PROS

- Your plan may have a low copay for a visit to any urgent care center.
- Your copay for a flu test could vary from \$0 to more than \$40.
- Drug coverage for an antiviral is comparable with a Medicare Part D plan.

CONS

- You may have to pay *up front* and request a reimbursement for an out-of-network flu shot.

ORIGINAL MEDICARE & SUPPLEMENT PLANS VERSUS ADVANTAGE PLANS

Supplement Plans

PROS:

- ▶ Original Medicare with a Supplement Plan is accepted at any medical facility. Supplement Plans can cover your out-of-pocket expenses under Part A & B.
- ▶ *Under Part A*, inpatient hospital care has a copay for the first 60 days. Your Supplement Plan can pay this.
- ▶ If you need skilled care for physical therapy after major surgery, *Medicare Part A* will cover the first 20 days at 100%. Your Supplement Plan can cover days 21 to 100.
- ▶ Home Health and Hospice Care are covered 100% by *Medicare Part A*.
- ▶ *Under Part B*, Medicare pays 80% toward doctor visits, lab work or tests, durable medical equipment, ambulance services, and outpatient charges. Your Supplement Plan will pay your 20%.

CONS:

- ▶ Supplement Plans have monthly insurance premiums to pay, just like home and auto insurance.
- ▶ You may need to pay for the annual deductible which can change from year to year. (\$233 for 2022)

Advantage Plans

Advantage Plans are offered by independent health insurance companies. Medicare pays these insurance companies to keep you healthy, so they work on the concept of preventive healthcare.

PROS:

- ▶ They have little to no monthly insurance premiums to pay. Free membership to a local fitness center or free dental, vision, and hearing services are provided **if** the benefit is offered in your zip code area.
- ▶ The Plan may put back into your Social Security benefit the Medicare Part B premiums **if** you financially qualify (This is offered with Supplement Plans with the Medicare Savings Program if you financially qualify).

CONS:

- ▶ The annual deductible amount may run from \$6,000-\$7,000 each year.
- ▶ You must use their in-network providers. This means, that if your current clinic/hospital doesn't accept this insurance (or, is out-of-network), you will pay the full amount of the bill you receive.
- ▶ There may be a 25% copay if surgery is needed.
- ▶ Skilled care for physical therapy after surgery is not covered.

BOTTOM LINE:

- ▶ Advantage Plans work on the concept of "preventive healthcare". Once it's broken or doesn't work you'll need "fix it" care!

Brain Fog After COVID Infection: Symptoms, Treatment & Care

Full article found at
<https://www.goodpath.com/learn/post-covid-brain-fog>

by Beth Holloway, RN, M.Ed



The information about long COVID can be confusing and is constantly changing. We're hearing about new symptoms almost every day. Some of them are easy to understand, like tiredness or headaches. One of the most common symptoms is brain fog. So, what exactly is brain fog?

What Is Long COVID Brain Fog?

One of the symptoms of initial COVID-19 infection may be brain fog. It may continue for weeks or months - it then becomes a symptom of long COVID. It's also possible for brain fog to be a new symptom of long COVID - it may not have been present with the initial COVID-19 infection.

Neurological Symptoms of Long COVID

Brain fog is one of several neurological symptoms of long COVID. Neurological symptoms affect the nervous system - the brain, spinal cord, and nerves.

In addition to brain fog after COVID-19 infection, other neurological symptoms may include:

- Headache
- Numbness and tingling
- Loss of taste and/or smell
- Tiredness or fatigue
- Muscle pain
- Trouble sleeping
- Dizziness

Long COVID Brain Fog

Although the term may be new to you, brain/mental fog is exactly what the name suggests - a foggy brain or fuzzy thinking. Brain fog can be one of the most frustrating symptoms of long COVID. It refers to impaired cognitive or mental function.

Medical terms for brain/

mental fog are cognitive dysfunction, cognitive impairment, impaired cognitive, or impaired mental function.

What are the Effects of Long COVID Brain Fog on Mental Functioning?

People with post-COVID brain fog may be impaired in several ways.

They may have difficulty with:

- Concentrating
- Paying attention
- Remembering
- Speaking
- Understanding
- Planning
- Problem-solving
- Completing tasks

How Common is Long COVID Brain Fog?

Experts are still studying the frequency of long COVID symptoms, including brain fog. One review-type study from the United Kingdom concluded the following:

"It is unknown who is most affected by cognitive complaints induced by COVID-19 and how long they persist; however, patient experiences and published summaries of long COVID have described brain fog to be a common and debilitating symptom."

What are the Risk Factors for Long COVID Brain Fog?

Studies have looked at the risk of developing post-

COVID brain fog. Although there are likely to be others, study data has identified:

- Patients who are female
- Patients with respiratory problems at the start of COVID infection
- Patients with severe illness or that require ICU stays during infection

What Causes Long COVID Brain Fog?

Many factors contribute to long COVID brain fog. Experts do not fully understand the cause. There is evidence that the coronavirus directly (through its presence in the brain) and indirectly (through its effect on other body organs) leads to neurological problems like brain fog.

Other conditions/circumstances are often present in those with long COVID and may contribute to brain fog:

- Severity of the illness - i.e. severe, acute COVID infection with symptoms leading to decreased oxygen in the brain

- Long hospital stays and, in some cases, use of the mechanical ventilation
- Depression, anxiety, and PTSD

What are the Effects of Long COVID on the Brain?

There is evidence that COVID impacts brain function. For example, it may actually damage structures in the brain, as well as cause inflammation of the nervous system. Organ dysfunction and blood flow/ blood vessel changes may also contribute to brain impairment.

How Does Long COVID Brain Fog Impact a Person's Life?

A person with long COVID brain fog may have difficulties with concentration, attention, memory, speech, comprehension, etc. Depending on the severity of the symptoms, and whether or not other long COVID symptoms are present, brain fog has the potential to interfere with every aspect of life.



continued on page 10

The Grains of Rice is also available on our website:
www.ricecountycouncilonaging.com

There are just some things
 in life you shouldn't miss.

Your mammogram is one of them.

Ask your doctor about your breast cancer risk, which can help determine the most appropriate screening schedule for you.



This & That



Dispelling 5 common hospice myths

MYTH 1: Hospice means "I'm going to die soon."

TRUTH: Hospice care neither hastens death nor prolongs life. Hospice provides support for dying loved ones and their families/caretakers.

MYTH 2: Hospice means giving up.

TRUTH: No one is giving up by choosing hospice. If a patient's health improves so that hospice is no longer needed—wonderful! The service will still be available later when it is needed.

MYTH 3: It is the doctor's responsibility to bring up hospice.

TRUTH: A doctor determines whether a patient meets the eligibility criteria to receive hospice services, but it is appropriate for the patient or caregiver to initiate the discussion. A good time to do this is at the time of diagnosis.

MYTH 4: You can't keep your own doctor if you enter a hospice program.

TRUTH: A doctor knows the medical health of his or her patients better than anyone else and is therefore encouraged to remain engaged in their patient's hospice care.

MYTH 5: If you choose hospice, you won't get other medical care.

TRUTH: Hospice provides all aspects of care for the illness which qualifies a patient for hospice services. However, a patient is free to seek treatment for unrelated illnesses or conditions. For example, if heart disease is what qualified a patient for hospice care, the patient may still seek treatment for a broken bone.

myhealth.srhc.com/publication/issues/spring-2021/youre-not-alone/

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 620-257-5153 or email aleciagrcca@gmail.com

Neurology Versus Neurosurgery – What's the Difference?

With both of these specialties, highly trained physicians treat conditions of the brain, spine and nerves.

- You might need a neurosurgeon if your condition involves a structural problem that can be repaired surgically – for instance, if you have a pinched nerve or a bulging disk in your spine.
- You might need a neurologist if you have a disorder that does not have a structural cause - such as Parkinson's disease, multiple sclerosis or seizures.
- Sometimes neurosurgeons and neurologists work together. For example, a neurologist might manage your condition with medicine, and a neurosurgeon might offer a surgical remedy.

SOLUTION TO PUZZLE ON PAGE 5.

CHEVRON	PANTENE	TWITTER	AUDI	ADOBE	ANDROID
CARHARTT	BMW	AMAZON	APPLE	GOOGLE	LEVI'S
VOLKSWAGEN	TOMMY HILFGER	TACO BELL	PRINGLES	RED BULL	CARTOON NETWORK
GOODYEAR	LACOSTE	LEXUS	SHELL	WWE	PAYPAL
WIKIPEDIA	AMERICAN AIRLINES	BIC	SPEEDO	NASCAR	CHAMPION

An online survey of 1,000 adults looked at cognitive impairment and quality of life associated with long COVID. The survey included people who had COVID-19, people with long COVID, and for comparison, people who had neither. The results clearly showed the impact of long COVID on quality of life.

Those with COVID, particularly long COVID, had higher rates of cognitive dysfunction, greater challenges with work and household responsibilities, higher rates of unemployment, and less financial security.

Does Brain Fog Occur with Other Medical Conditions?

In addition to long COVID, brain/mental fog is a symptom in many other medical conditions and situations. These include patients with chronic fatigue syndrome myalgic encephalomyelitis and patients receiving chemotherapy for cancer.

Can Long COVID Brain Fog Be Prevented?

Once you have an initial COVID-19 infection, without or with symptoms, long COVID symptoms such as brain fog cannot currently be prevented. You can, however, do things to prevent COVID-19 infection.

How Is Long COVID Brain Fog Treated?

The treatment for brain fog is supportive - it addresses the symptoms as well as factors that may cause the symptoms to worsen. It includes cognitive support techniques, healthy lifestyle measures, and treating other medical problems.

Cognitive Support Techniques and Long COVID Brain Fog

Cognitive support techniques help you cope with impaired mental functioning. Some of the following can help you with the day-to-day challenges of mental and physical fatigue; memory; focus and attention; task completion; problem-solving; organization; and goal management.

Diet and Long COVID Brain Fog

The USDA Dietary Guidelines, focuses on nutrient-dense foods as follows:

“Nutrient-dense foods and beverages provide vitamins, minerals, and other health-promoting components and have little added sugars, saturated fat, and sodium.

Whole grains, fruits, seafood, vegetables, eggs, beans, peas, lentils, unsalted nuts, seeds, fat-free / low-fat dairy products, and lean meats and poultry—when prepared with no or little added sugars, saturated fat, and sodium — are nutrient-dense foods.”

Fluids

Make sure to stay hydrated. The best choice is water. Dehydration itself often results in cognitive impairment.

Stress, Mind-Body Techniques, Support, and Long COVID Brain Fog
Dealing with long COVID, including brain fog, is very

stressful. Stress impacts your cognitive health.

There are many types of mind-body techniques. Progressive muscle relaxation, guided imagery, journaling, and deep breathing. Various methods can help you relax and improve mental clarity.

Family and friends may help with emotional support. You might ask a family member or friend to help with challenging daily tasks, like shopping, cooking, etc.

Some types of counseling or therapy may also help you cope with cognitive issues and long COVID in general.

Lifestyle Changes and Long COVID Brain Fog

Changing diet and reducing stress are part of your long COVID brain fog treatment and a healthy lifestyle. The same is true with exercise and physical activity.

You may have challenges trying to exercise or participate in other activities. This is particularly true if you have breathing problems and/or fatigue.

Balancing activity with rest may be necessary. It may take time until you can be as active as you'd like.

Be aware that smoking and alcohol use may impact your cognitive health. Eliminate, or at least greatly reduce, both of them.

Other Medical Problems and Long COVID Brain Fog

Other medical conditions may worsen long COVID brain fog. They include trouble sleeping, depression, anxiety, PTSD, etc. So, part of your treatment for long COVID brain fog may include ongoing treatment.

You may be taking medication for different medical conditions. Certain antidepressants and allergy medications may worsen brain fog. Your doctor may review, and possibly change your medications.

How Long Does Long COVID Brain Fog Last?

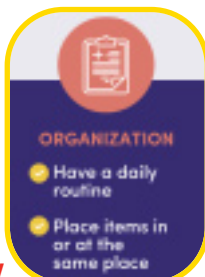
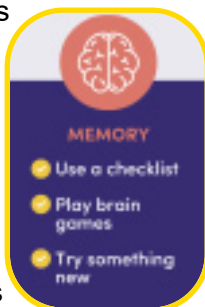
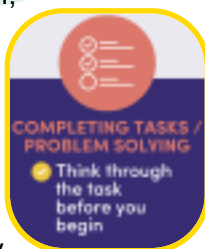
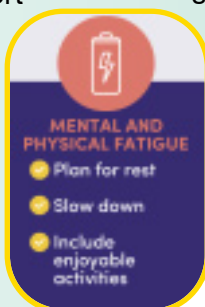
The length of time a person has long COVID brain fog varies from person to person. It has been reported to last for weeks or months in some people. It may last even longer, but long COVID symptoms are too new for experts to know.

Does an Integrative Approach Work for Long COVID Brain Fog?

An integrative approach for long COVID brain fog can work very well. The approach combines the best of conventional and complementary medicine. It puts the person at the center of care and addresses all of their needs (e.g. physical, emotional, cognitive, etc.).

Long COVID guidance from the CDC recommends a whole -person approach. It includes exercise therapy, activity pacing, cognitive support, OTC medicines, & lifestyle changes for underlying conditions.

Goodpath provides a program for people with long COVID. We use an integrative approach that includes specific exercises and activity guidance, and more. Take our assessment to get started.
<https://www.goodpath.com/select-condition>



Ride.

Housekeeping & Attendant Care Services

Our Housekeepers can assist with:

- General House Cleaning
- Laundry
- Meal Prep
- Local Errands

Our Housekeeping Services can help you with the household tasks that we all hate to do. No one likes to dust, vacuum, or do laundry. Also, why does a vacuum cause so much pain? Not to mention how dangerous cleaning a bathtub actually is. The Rice County Council on Aging can assist you with all of those mundane and unsafe jobs.

Let us help you, with the things we all would rather not do.

OPENINGS AVAILABLE!

Our Attendant Care Providers can assist with:

- Medication Management
- Bathing
- Local Pharmacy Pick-ups

Our Attendant Care provider will assist you in daily living tasks. She will help you with bathing, dressing, and other areas of self-care, as well as pharmacy pick-ups and medication preparation. She will give you the supervision and/or help with any area you may need under the direction of a licensed health care professional.

QUIVIRA TRANSIT

Rice County's only
Public Transportation

620.257.5153

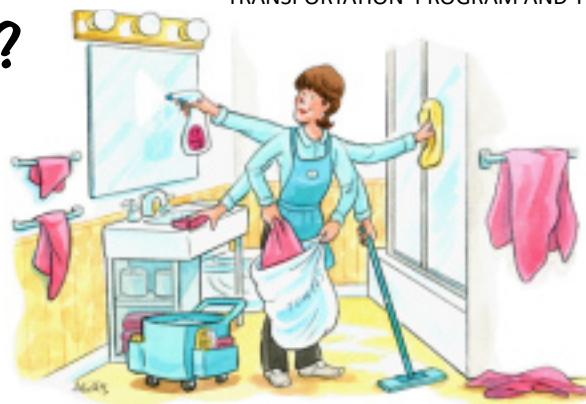
MONDAY-FRIDAY

8:00-5:00

620-257-5153

APPOINTMENTS ARE FIRST-COME, FIRST-SERVED.
THIS PROJECT FUNDED BY THE KDOT
TRANSPORTATION PROGRAM AND THE RCCA.

Are you 60 or older?



COUNT ME IN!

Please take a little time to fill out the coupon below. This helps us to use the funds we have wisely and to know whether Grains of Rice is serving the seniors of our community.

☐ I want to support the Grains of Rice, enclosed is my donation.

☐ I wish to receive the Grains of Rice as an email attachment. My email address is:

If you would like information about our services
call 620.257.5153.

**To see if you qualify for one of our
discounted Housekeeping
or Attendant Care programs
call 1-800-362-0264.**



As a non-profit organization, the Rice County Council on Aging advocates for, serves and empowers the aging citizens of Rice County, Kansas, providing them with the resources needed to continue living an active, healthy and independent lifestyle.

OUR STAFF

OFFICE STAFF

Alice Prester, Executive Director
Daylene Linville, I&A Supervisor
Alecia Gaines, Supervisor of Operations
Donna Grizzle, Dispatcher
Cynthia Greenlee, Receptionist

HOUSEKEEPING/ATTENDANT CARE

JoAnn Hager, RN, Attendant Care
Gena Kelly, CMA, HSKP & AC
Michelle Kralik, CMA, HSKP & AC
Denise Johnson, Housekeeping

TRANSPORTATION

Rick Hager, In-County Transportation
Dave Suhler, Relief Driver
Amy Gaines, Relief Driver

Monica Renteria, Relief Driver
Larry Dumler, Relief Driver
Roscoe Colwell, Relief Driver

Disclaimer:
Although we attempt to ensure accuracy we cannot accept responsibility for the correctness of the information supplied herein or for any opinions expressed.

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