



# Good Neighbor Script

INSPIRATION FOR LIVING WELL FROM GOOD NEIGHBOR PHARMACY | OCTOBER 2021

## What You Need to Know About Medicare Part D for 2022

Prescription drug costs can be a significant problem for older adults. According to a 2019 report published by the CDC, more than 88% of adults 65+ take at least one prescription drug per month — and almost 42% take five or more prescription drugs monthly.

If you'll be at least 65 before 2023, it's worth looking into how Medicare Part D prescription drug coverage may save you money — especially if you are already taking multiple prescriptions. Medicare Open Enrollment is October 15, 2021 to December 7, 2021 for those who are already at least 65. Those turning 65 later in 2021 (or in 2022) can take advantage of a special enrollment period. Here's what you need to know about changes to Medicare Part D for 2022.

### Specialty drug tier may lower costs

Many Medicare Part D plans place drugs on different "tiers" that determine what percentage patients pay in cost sharing. Patients typically pay 25% to 50% of the cost for drugs on the highest-priced specialty tier — and all drugs on the specialty tier have the same level of cost sharing. But starting in 2022, Centers for Medicare & Medicaid Services will allow Medicare Part D plans to have a lower "preferred" specialty tier. This means plans can negotiate with drug makers to get better discounts on specialty tier drugs in exchange for being listed on the "preferred" tier. Plans can then pass the savings along to patients.

### Changes to deductibles, copays, and the Donut Hole

Here are the annual updates to the standard Medicare Part D "Defined Standard Benefit," including deductibles, Initial Coverage Limits (when you enter the Donut Hole), TrOOP (when you exit the Donut Hole), and Catastrophic Coverage copays:

**1. The initial deductible will increase by \$35 to \$480 in 2022.** This means you'll pay slightly more before Medicare Part D begins paying its share if you have a plan with the highest possible deductible.

After you meet the deductible, you pay 25% of covered costs up to the initial coverage limit. Some plans may offer a \$0 deductible for lower cost (Tier 1 and Tier 2) drugs.

**2. The Initial Coverage Limit (ICL) will go up from \$4,130 in 2021 to \$4,430 in 2022.** This means you can purchase prescriptions worth up to \$4,430 before entering what's known as the Medicare Part D Donut Hole, which has historically been a gap in coverage. Thanks to cost sharing with your Medicare Part D plan and the drug manufacturers, being in the Donut Hole isn't nearly as expensive as it used to be — and exiting it may be easier than you think.

In the Donut Hole, you'll pay 25% for brand-name drugs. The manufacturer will give you a 70% discount during this time, and your Medicare Part D plan will pick up the remaining 5%.

The 25% you pay plus the 70% discount from the manufacturer will count toward your combined TrOOP (see below), which is when you exit the Donut Hole.

The situation is different for generic drugs. You still pay 25% yourself, and your Medicare Part D plan covers the other 75%. However, only the 25% you pay yourself counts towards meeting your TrOOP.

**3. The Medicare Part D total out-of-pocket threshold will bump up to \$7,050 in 2022, a \$500 increase from the previous year.** The true (or total) out-of-pocket (TrOOP) marks the point at which Medicare Part D Catastrophic Coverage begins. Under Catastrophic Coverage, you only pay a small copayment for covered drugs for the rest of the year.

**4. Catastrophic Coverage copays will cost between \$0.25 to \$0.65 more in 2022 compared to the previous year.** You will now pay \$9.85 for brand-name drugs and \$3.95 for generics (or 5% of retail costs, whichever is higher).

Still have questions? Visit [mygnp.com/medicare-part-d](http://mygnp.com/medicare-part-d) or talk with your pharmacist.

## HEALTH & FITNESS

### Three Ways to Lower Your Breast Cancer Risk

According to the National Breast Cancer Foundation, more than 300,000 women in the U.S. are diagnosed with breast cancer each year — and more than 40,000 women die from the disease annually.

Here are three things every woman should be aware of to reduce their breast cancer risk:

#### Your risk factors

Some risk factors, like age or having dense breasts, can't be changed. But other risk factors are alterable, including:

- Being sedentary
- Being overweight or obese after menopause
- Drinking alcohol

If any of these apply to you, simple steps like getting regular exercise, maintaining a healthy weight, and limiting alcohol consumption can help you reduce your risk of developing breast cancer.

#### Your family history

If any of your biological relatives have had breast or ovarian cancer, you may be at higher risk of developing hereditary breast cancer. Talk to your family members about your family's health history, then talk with your doctor and a genetic counselor. Women at higher risk for breast cancer will need extra screening to aid in early detection.

#### The risks of hormone replacement therapy (HRT)

HRT can be helpful for women struggling with more severe menopausal symptoms. But unfortunately, HRT that contains both estrogen and progesterone can also elevate your risk for breast cancer. Work with your doctor to find the lowest dose possible to control your symptoms — and take it for the shortest period of time needed.



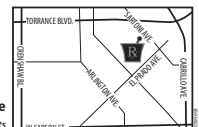
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## OCTOBER RECIPE

# Butternut Mac and Cheese with Kale and Sage

Cook Time	Total Time	Serves
1 hour	1 hour	6

This mac and cheese is the same color as the boxed stuff, thanks to the orange hues of the butternut squash. But making your own squash puree, as described in the recipe, will add so much earthy, autumnal flavor to the classic dish! In a pinch, canned pumpkin works as a substitute.

### Ingredients

- 1 small butternut squash (about 2 pounds)
- Salt
- Pepper
- 1 16-ounce box elbow macaroni noodles
- 4 cups kale leaves, stems removed, cut in bite-sized pieces
- 1 tablespoon olive oil
- 2 tablespoons chopped sage
- 1 1/2 cups milk
- 1 1/2 cups shredded cheddar cheese
- 1 cup shredded Parmesan

### Tools

- Cutting board
- Chef's knife
- Vegetable peeler
- Food processor
- Kitchen spoon
- Large pasta pot and strainer
- Large stock pot
- Measuring cups and spoons

### Instructions

1. Fill a pasta pot 3/4 of the way with water. Salt the water (to taste) and bring to a boil.
2. Peel butternut squash, remove the seeds, and cut the flesh into rough 1-inch cubes.
3. When the water is boiling, add squash. Boil until fork-tender, 8 to 11 minutes. Strain squash and let cool for 10 minutes, then puree in a food processor and set aside.
4. While the squash is cooling, refill the pasta pot 3/4 of the way with water. Lightly salt the water, then bring to a boil.
5. Add elbow macaroni noodles and cook until al dente so that the pasta is soft on the outside but still firm on the inside — this usually means cooking it the least amount of time that the package recommends. In the final minute of cooking, add the kale leaves. Strain the mixture and set it aside.
6. Heat olive oil in the stock pot. Add sage and cook 1 minute until fragrant. Add milk and bring to a gentle simmer, stirring constantly to prevent scorching. Add cheeses and stir until melted. Add 2 cups of the butternut squash puree, stirring constantly. (If you have extra, store it in an airtight container in the fridge for another use.) When the sauce is smooth, add the cooked macaroni noodles.
7. Serve immediately.

### KIDS CAN!

- Mash squash
- Stir cheese sauce
- Mix mac and cheese together

## ASK A PHARMACIST

# What Are Generic Medications and How Do They Differ from Brand Medications?

The Food and Drug Administration (FDA) defines a generic drug as a "medication created to be the same as an already marketed brand-name drug in dosage form, safety, strength, route of administration, quality, performance characteristics, and intended use." Generic drugs contain the same active ingredients as brand-name drugs and therefore have the same efficacy and safety profiles. In order to prove this, the FDA requires drug companies to submit an abbreviated new drug application, which must show bioequivalence to the active ingredient in the brand-name drug along with evidence of meeting the same strict standards of manufacturing and matching container labeling criteria as its brand-name counterpart. Studies conducted have shown that the testing required by the FDA is robust and supports the overall conclusion that brand and generic medications are therapeutically equivalent. Generic drugs tend to cost less than their brand-name counterparts because they do not have to go through the same clinical studies and trials that were required of the brand-name drugs. This means that although generic drugs have the same therapeutic effects as the brand-name drugs, they are usually sold at much lower costs. However, there are often misconceptions about and a lack of understanding of the difference between brand and generic medications.

As pharmacists, we play a pivotal role in clarifying any questions or concerns that you may have about generic versus brand-name drugs and ensuring your optimal outcome while helping you find affordable healthcare options.

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**Hira Khan**  
Pharmacist  
Parkview Medical  
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Riverside, California

## LOCAL LOVE

# Rogers Drug Store Modesto, California

"I have the satisfaction of making the best decisions in the interest of my patients."

Ben Prasad, Pharmacist and Owner



### How many years has your pharmacy been in business?

We just reached the milestone of 30 years in business this past September.

### What has been the most significant change within your pharmacy over the past five years, and how has it helped you serve your patients better?

Over the past five years, we have expanded into specialty services for patients with lymphedema by offering compression garments.

### What is your favorite thing about being a pharmacist?

In my role as an owner and pharmacist of Rogers Drug Store, I have the satisfaction of making the best decisions in the interest of my patients.

### What makes your pharmacy unique?

My pharmacy is unique because my patients really know and understand our dedication to creating the best environment for our patients.

### What do you think your patients love most about your pharmacy?

Our patients love our CAN DO attitude and our ability to be upfront with them and get them the answers they are looking for.

### What are your favorite ways to get involved with your community?

We like to be involved in our community by participating in or hosting health fairs, being part of the non-profit charity for our community, and striving to be politically connected with the local government.

### What does *Locally Loved* mean to you?

*Locally Loved* represents the respect we get from our community, patients, and local organizations.