



## Prescription Benefits for Statewide Schools

Prescription Drug Option Payette School District 371 Effective : 09/01/2017		Prescription Benefits for Statewide Schools
<b>Retail</b> (90 day supply with multiple copays)	<b>Generic</b>	You pay a \$15 copayment
	<b>Preferred Brand Name</b>	You pay a \$30 copayment
	<b>Non-Preferred Brand Name</b>	You pay a \$45 copayment
<b>Mail Order</b> (90 day supply with multiple copays)	<b>Copayment</b>	Matches Retail
<b>Prescribed Contraceptives</b>	<p>You pay nothing for Women's Preventive Prescription Drugs and listed devices as specifically on the BCI Web site, <a href="http://www.bcidaho.com">www.bcidaho.com</a>;</p> <p>Deductible does not apply. The day supply allowed shall not exceed 90-days supply at a one (1) time, as applicable to the specific or contraceptive drug supply.</p>	
<b>Out-of-Pocket Limit</b>	<p><b>Individual:</b> You pay \$2,000 in Copayments and/or Coinsurance per Benefit Period for a combination of all Prescription Drug charges incurred.</p> <p><b>Family:</b> You pay a combination of \$4,000 in Copayments and/or Coinsurance per Benefit Period for a combination of all Prescription Drug charges incurred.</p> <p><i>When the Prescription Drug Out-of-Pocket Limit is met, the Prescription Drug Benefits payable will increase to 100% of the Allowed Charge or the Usual Charge for the remainder of the Benefit Period.</i></p>	