



# 2024 Pharmacy Benefit

Pharmacy Coverage ClearScript	Medical Plan 1 & 2	Medical Plan 3 - HDHP
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ID Card: You WILL receive a card by mail from ClearScript for your pharmacy plan.

		Kootenai Health Retail Pharmacy	Outside Retail Pharmacy	
<b>Residents in Kootenai County</b>	<b>Generic Drugs</b>	\$10 copay	\$20 copay	Deductible/Coinsurance
	<b>Brand Name Deductible</b>	\$500 Rx Deductible	\$750 Rx Deductible	
	<b>Preferred Brand</b>	\$500 Rx Deductible, then \$30 copay	\$750 Rx Deductible, then \$60 copay	
	<b>Non-Preferred Brand</b>	\$500 Rx Deductible, then \$200 copay	\$750 Rx Deductible, then \$300 copay	
	<b>Specialty*</b>	\$500 Rx Deductible, then \$300 copay		

**Prescription Drugs** Mail order: Same as retail; receive three-month supply for three co-payments.

<b>Residents outside of Kootenai County</b>	<b>Generic Drugs</b>	\$10 copay		Deductible/Coinsurance
	<b>Brand Name Deductible</b>	\$500 Rx Deductible		
	<b>Preferred Brand</b>	\$500 Rx Deductible, then \$30 copay		
	<b>Non-Preferred Brand</b>	\$500 Rx Deductible, then \$200 copay		
	<b>Specialty*</b>	\$500 Rx Deductible, then \$300 copay		

\*Specialty must be filled through Kootenai Health Specialty Pharmacy, regardless of employee location or plan election.