



Pennsbury School District

RX 15/30/50		
Benefits	In network	Out of network
Deductible	N/A	N/A
Out of Pocket Maximum	\$1,500 individual/\$3,000 family	\$1,500 individual/\$3,000 family
Prescription Drug Retail	\$0 select generics at DVHT Health Center. \$15 generic/\$30 formulary brand/\$50 non-formulary brand, up to a 30-day supply*. 2 copays for 90-day supply of maintenance medications at retail pharmacy.	70% of recognized charges, after applicable copay
Prescription Drug Mail Order	\$30 generic/\$60 formulary brand/\$100 non-formulary brand, up to a 90-day supply.	Not covered
Performance Rider	6 pills per month	