Low Income Subsidy Pharmacy Information for Practitioners and Providers

To help answer questions regarding appropriate deductible(s) and/or prescription drug co-payments for members with a Low Income Subsidy Plan, see the Low Income Subsidy below.

		Generic Prescription Drugs (Tier 1)		Brand Prescription Drugs (Tier 2)		Non-Preferred Prescription Drugs (Tier 3)		Specialty Prescription Drugs			
See Plan Product Grid for Presbyterian ID Card Group #	Deductible	Retail	Mail Order	Retail	Mail Order	Retail	Mail Order	Retail	Mail Order	Initial Coverage Limit	Member Out Of Pocket
Low Income Subsidy Option 1	\$0	\$1 copay	\$1 copay	\$3 copay	\$3 copay	Same as Generic or Brand Copay	Same as Generic or Brand Copay	Same as Generic or Brand Copay	Same as Generic or Brand Copay	No Limit	No Limit
Low Income Subsidy Option 2	\$0	\$2 copay	\$2 copay	\$5 copay	\$5 copay	Same as Generic or Brand Copay	Same as Generic or Brand Copay	Same as Generic or Brand Copay	Same as Generic or Brand Copay	No Limit	No Limit
Low Income Subsidy Option 3	\$0	15% coinsurance	15% coinsurance	15% coinsurance	15% coinsurance	15% coinsurance	15% coinsurance	15% coinsurance	15% coinsurance	\$2,250.00	\$3,600.00
Low Income Subsidy Option 4	\$0	\$0 copay	\$0 copay	\$0 copay	\$0 copay	\$0 copay	\$0 copay	\$0 copay	\$0 copay	No Limit	No Limit