

Wisconsin Medicaid, BadgerCare Plus Standard, and SeniorCare Preferred Drug List- Quick Reference

Revised 10/01/2018 (Effective 10/01/2018)

KEY:

All lowercase letters = generic product
Leading capital letter = brand name product
P = Preferred product
NP = Non-preferred product (requires PA)

DR = Diagnosis Restriction
DAPO = Prior Authorization processed through Drug
Authorization and Policy Override center

Uses PA/PDL Exemption Form - available via STAT-PA or Paper PA process	Uses PA/DGA Form/Sec. VI Paper PA process only Refer to topic #15937	Uses specific Drug PA Form - available via STAT-PA or Paper PA process	Uses specific Drug PA Form - available via Paper PA process only	Monthly Changes to the PDL	Uses PA/DGA Form/Sec. VII Paper PA process only Refer to topic #15937
---	---	---	--	-------------------------------	--

- SCN = Wisconsin SeniorCare does not cover over-the-counter drugs. For Levels 2b and 3, SeniorCare does not cover drugs that do not have a signed SeniorCare Rebate Agreement between the manufacturer and the Department of Health and Family Services. Providers may refer to the Numeric Listing of Manufacturers That Have Signed Rebate Agreements data table on the Pharmacy page of the Providers area of the Portal.
- Providers may refer to the data tables on the Pharmacy page of the Providers area of the Portal for more information:
<https://www.forwardhealth.wi.gov/WIPortal/content/provider/medicaid/pharmacy/resources.htm.spage>
- Prior Authorization forms are available at:
<https://www.forwardhealth.wi.gov/WIPortal/Content/provider/forms/index.htm.spage>

Wisconsin Medicaid, BadgerCare Plus Standard, and SeniorCare Preferred Drug List- Quick Reference

Revised 10/01/2018 (Effective 10/01/2018)

Acne Agents, Topical			
benzoyl peroxide OTC 2.5%	SCN	P	
benzoyl peroxide OTC 5%	SCN	P	
benzoyl peroxide OTC 10%	SCN	P	
clindamycin gel (Cleocin T)		P	
clindamycin solution		P	
erythromycin solution		P	
Azelex	SCN	P	
Differin 0.1% cream	SCN	P	
Differin 0.1% lotion	SCN	P	
Differin 0.3% gel pump	SCN	P	
Epiduo	SCN	P	
Retin-A (not micro)		P	
NOTE: Topical federal legend acne drugs not listed are either non-preferred or noncovered.			NP
Alzheimer's Agents			
donepezil 5mg			P
donepezil 10mg			P
donepezil 5mg ODT			P
donepezil 10mg ODT			P
memantine solution *			P
memantine tablet *			P
memantine Titr PK *			P
rivastigmine caps			P
Exelon patch			P
donepezil 23mg			NP
galantamine			NP
galantamine ER			NP
galantamine solution			NP
memantine ER caps *	DR		NP
rivastigmine patch			NP
Namenda XR *	DR	SCN	NP
Namzaric capsule			NP
Namzaric dose pack			NP
*memantine products are not covered for members 17 years of age or younger			
Analgesics/Anesthetics, Topical			
capsaicin OTC	SCN	P	
lidocaine 5% ointment		P	

Analgesics/Anesthetics, Topical (cont)			
lidocaine 5% trans patch		P	
Voltaren		P	
diclofenac 1% gel		NP	
diclofenac 1.5% soln		NP	
Flector		NP	
Pennsaid	SCN	NP	
Analgesics, Miscellaneous			
acetaminophen	SCN	P	
aspirin	SCN	P	
ibuprofen OTC chewable	SCN	P	
ibuprofen OTC suspension	SCN	P	
ibuprofen OTC tablets	SCN	P	
naproxen OTC	SCN	P	
butalbital/apap		NP	
butalbital/apap/caffeine		NP	
butalb/apap/caffeine/codeine		NP	
butalbital/asa/caffeine		NP	
butalbital/asa/caffeine/codeine		NP	
Bupap	SCN	NP	
Analgesics, Opioids Long-Acting			
fentanyl transdermal 12mcg		P	
fentanyl transdermal 25mcg		P	
fentanyl transdermal 50mcg		P	
fentanyl transdermal 75mcg		P	
fentanyl transdermal 100mcg		P	
morphine ER tablets		P	
tramadol ER tab (Ultram ER)		P	
Butrans transdermal		P	
Embeda ER		P	
Hysingla ER		P	
buprenorphine transdermal		NP	
fentanyl transdermal 37.5mcg		NP	
fentanyl transdermal 62.5mcg		NP	
fentanyl transdermal 87.5mcg		NP	
hydromorphone ER		NP	
methadone tablet		NP	
methadone solution		NP	
morphine ER capsules		NP	
oxycodone ER		NP	
oxymorphone ER		NP	

Analgesics, Opioids Long-Acting (cont)			
tramadol ER cap (Conzip)	SCN	NP	
tramadol ER tab (Ryzolt)		NP	
Arymo ER	SCN	NP	
Belbuca Film		NP	
Conzip	SCN	NP	
Exalgo ER		NP	
Kadian		NP	
Morphabond ER		NP	
Nucynta ER		NP	
Oxycontin		NP	
Xartemis XR		NP	
Xtampza ER	SCN	NP	
Zohydro ER	SCN	NP	
Analgesics, Opioids Short-Acting			
codeine/apap		P	
codeine/asa		P	
hydromorphone		P	
hydrocodone/apap 325mg		P	
hydrocodone/ibuprofen		P	
morphine		P	
oxycodone solution		P	
oxycodone tablets		P	
oxycodone/apap 325mg		P	
tramadol		P	
butorphanol spray		NP	
codeine		NP	
dihydrocodeine/apap/caffeine		NP	
dihydrocodeine/asa/caffeine		NP	
levorphanol		NP	
hydrocodone/apap*		NP	
hydromorphone liquid		NP	
hydromorphone suppositories		NP	
meperidine		NP	
oxycodone/apap*		NP	
oxycodone/asa		NP	
oxycodone capsules		NP	
oxycodone conc		NP	
oxycodone/ibuprofen		NP	
oxymorphone		NP	
pentazocine/naloxone		NP	

Analgesics, Opioids Short-Acting (cont)			
tramadol/apap			NP
Capital w-codeine			NP
Dilaudid Liquid			NP
Ibudone			NP
Nucynta			NP
Oxaydo	SCN		NP
Primlev			NP
Reprexain	SCN		NP
Roxybond			NP
Synalgos-DC			NP
Vicodin 5/300			NP
Vicodin 7.5/300			NP
Vicodin 7.5/300			NP
Xodol			NP
Zamiset			NP
*Combination products containing any other strength of apap besides 325 mg.			
Analgesics, Opioids Short-Acting-Fentanyl Mucosal Agents			
fentanyl citrate oral transmucosal lozenges			NP
Abstral	SCN		NP
Fentora			NP
Lazanda	SCN		NP
Subsys	SCN		NP
Androgenic Agents			
AndroGel			P
testosterone gel			NP
testosterone pump			NP
Androderm			NP
Axiron			NP
Fortesta			NP
Natesto			NP
Testim	SCN		NP
Vogelxo			NP
Angiotensin Modulators, ACE Inhibitors			
benazepril			P
captopril			P
enalapril			P
enalapril/HCTZ			P

Uses PA/PDL Exemption Form - available via STAT-PA or Paper PA process

Uses PA/DGA Form/Sec. VI Paper PA process only Refer to topic #15937

Uses specific Drug PA Form - available via STAT-PA or Paper PA process

Uses specific Drug PA Form - available via Paper PA process only

Monthly Changes to the PDL

Uses PA/DGA Form/Sec. VII Paper PA process only Refer to topic #15937

Wisconsin Medicaid, BadgerCare Plus Standard, and SeniorCare Preferred Drug List- Quick Reference

Revised 10/01/2018 (Effective 10/01/2018)

Angiotensin Modulators, ACE Inhibitors (cont)		
fosinopril		P
lisinopril		P
lisinopril/HCTZ		P
ramipril		P
benazepril/HCTZ		NP
captopril/HCTZ	SCN	NP
fosinopril/HCTZ		NP
moexipril		NP
moexipril/HCTZ		NP
perindopril		NP
quinapril		NP
quinapril/HCTZ		NP
trandolapril		NP
Epaned *	SCN	NP
Qbrelis solution	SCN	NP
Prestalia	SCN	NP

*Prior Authorization is not required for members 12 years of age and younger.

Angiotensin Modulators, ARBs and DRIs		
losartan		P
losartan/HCTZ		P
valsartan		P
valsartan/HCTZ		P
candesartan tablets		NP
candesartan/HCTZ		NP
eprosartan mesylate	SCN	NP
irbesartan		NP
irbesartan/HCTZ		NP
olmesartan		NP
olmesartan/HCTZ		NP
telmisartan		NP
telmisartan/HCTZ		NP
Benicar		NP
Benicar/HCTZ		NP
Edarbi		NP
Edarbyclor		NP
Entresto		NP
Micardis		NP
Micardis/HCTZ		NP

Angiotensin Modulators, ARBs and DRIs (cont)		
Tekturna		NP
Tekturna/HCTZ		NP

Angiotensin Modulators, Combination		
amlodipine/benazepril		P
amlodipine/olmesartan		P
amlodipine/olmesartan/HCTZ		P
amlodipine/valsartan		P
amlodipine/valsartan/HCTZ		P
telmisartan/amlodipine		NP
trandolapril/verapamil		NP
Amturnide		NP
Byvalson		NP
Tarka		NP
Tekamlo		NP
Twynsta		NP

Antibiotics, Beta-Lactam		
amoxicillin		P
amoxicillin clavulanate		P
amoxicillin clav 250mg susp		P
ampicillin		P
cefaclor caps		P
cefadroxil capsule		P
cefadroxil susp		P
cefdinir		P
cephalexin caps		P
cephalexin 750mg	SCN	P
cephalexin susp		P
cefprozil	SCN	P
cefuroxime		P
dicloxacillin		P
penicillin		P
Augmentin 125 suspension		P
Ceftin 125 suspension	SCN	P
Ceftin 250 suspension	SCN	P
Suprax capsules	SCN	P
Suprax chew tab	SCN	P
Suprax tab	SCN	P
Suprax suspension	SCN	P
amoxicillin clavulanate XR		NP

Antibiotics, Beta-Lactam (cont)		
amoxicillin ER 775mg tab	SCN	NP
cefaclor susp	SCN	NP
cefaclor tab ER		NP
cefadroxil tablet		NP
cefixime suspension		NP
cefepodoxime		NP
cephalexin tabs		NP
Daxbia	SCN	NP
Moxatag ER	SCN	NP
Spectracef		NP

Antibiotics, GI		
metronidazole tablets		P
neomycin		P
tinidazole		P
vancomycin		P
Xifaxan		P
metronidazole capsule		NP
Dificid		NP
Firvanq	SCN	NP
Flagyl ER		NP
Solosec	SCN	NP

Antibiotics, Inhaled		
Bethkis	SCN	P
Kitabis Pak	SCN	P
tobramycin		NP
Causton		NP
Tobi		NP
Tobi Podhaler		NP

Antibiotics, Macrolides/Ketolides		
azithromycin		P
clarithromycin susp		P
clarithromycin tab		P
erythromycin cap/tab		P
erythromycin granules		P
E.E.S. Granules		P
E.E.S. Filmtab		P
Eryped		P
Ery-Tab EC		P
Erythrocin		P

Antibiotics, Macrolides/Ketolides (cont)		
PCE		P
clarithromycin ER tab		NP
erythromycin filmtab		NP
Ketek		NP
Zmax		NP

Antibiotics, Tetracyclines		
doxycycline hyclate 20mg		P
doxycycline monohydrate 50mg capsules		P
doxycycline monohydrate 100mg capsules		P
doxycycline monohydrate tablets		P
minocycline capsules		P
demeclocycline		NP
doxycycline hyclate DR		NP
doxycycline hyclate		NP
doxycycline monohydrate suspension		NP
doxycycline monohydrate 75mg capsules		NP
doxycycline monohydrate 150mg capsules		NP
minocycline tablets		NP
minocycline ER		NP
tetracycline		NP
Doryx DR		NP
Morgidox capsule	SCN	NP
Oracea		NP
Solodyn 55mg		NP
Solodyn 65mg		NP
Solodyn 80mg		NP
Solodyn 105mg		NP
Solodyn 115mg		NP
Vibramycin Syr/Susp		NP
Ximino ER	SCN	NP

Antibiotics, Topical		
bacitracin oint. OTC	SCN	P
bacitracin/polymyxin B oint. OTC	SCN	P
mupirocin ointment		P

Uses PA/PDL Exemption Form - available via STAT-PA or Paper PA process

Uses PA/DGA Form/Sec. VI Paper PA process only Refer to topic #15937

Uses specific Drug PA Form - available via STAT-PA or Paper PA process

Uses specific Drug PA Form - available via Paper PA process only

Monthly Changes to the PDL

Uses PA/DGA Form/Sec. VII Paper PA process only Refer to topic #15937

Wisconsin Medicaid, BadgerCare Plus Standard, and SeniorCare Preferred Drug List- Quick Reference

Revised 10/01/2018 (Effective 10/01/2018)

Antibiotics, Topical (cont)		
neomycin/bacitracin/zinc/ polymyxin B oint OTC	SCN	P
neomycin/bacitracin/zinc/ polymyxin B/pramoxine oint. OTC	SCN	P
gentamicin cream		NP
gentamicin oint		NP
mupirocin cream		NP
Bactroban nasal	SCN	NP
Centany	SCN	NP
Antibiotics, Vaginal		
clindamycin		P
metronidazole		P
Cleocin ovule		P
Clindesse		P
Vandazole		P
Nuversa	SCN	NP
Anticoagulants		
enoxaparin		P
warfarin		P
Eliquis		P
Pradaxa		P
Xarelto		P
Xarelto Dose Pack		P
fondaparinux		NP
Arixtra	SCN	NP
Fragmin		NP
Savaysa		NP
Anticonvulsants		
carbamazepine chew tabs		P
carbamazepine ER cap		P
clonazepam tablets		P
divalproex		P
divalproex ER		P
divalproex sprinkles		P
ethosuximide		P
felbamate		P
gabapentin		P
lamotrigine		P
lamotrigine dispers tabs		P

Anticonvulsants (cont)		
levetiracetam		P
levetiracetam solution		P
levetiracetam ER		P
oxcarbazepine		P
oxcarbazepine suspension		P
phenobarbital		P
phenytoin		P
primidone		P
topiramate		P
topiramate sprinkle		P
valproic acid		P
zonisamide		P
Celontin		P
Diastat		P
Dilantin 30mg cap		P
Dilantin Infatab		P
Gabitril		P
Lamictal Starter Kits	SCN	P
Lyrica		P
Peganone		P
Roweepra	SCN	P
Roweepra XR	SCN	P
Tegretol tab		P
Tegretol suspension		P
Tegretol XR		P
carbamazepine ER tab		NP
carbamazepine suspension		NP
carbamazepine tab		NP
clonazepam ODT		NP
diazepam rectal		NP
lamotrigine ER		NP
lamotrigine ODT		NP
tiagabine		NP
topiramate ER		NP
vigabatrin pwrdr pk		NP
Aptiom	SCN	NP
Banzel		NP
Briviact		NP
Equetro		NP
Felbatol		NP

Anticonvulsants (cont)		
Fycompa		NP
Lamictal ODT	SCN	NP
Lamictal ODT Starter Kit	SCN	NP
Lamictal XR	SCN	NP
Lamictal XR Starter Kit	SCN	NP
Onfi	SCN	NP
Oxtellar XR	SCN	NP
Phenytek	SCN	NP
Qudexy		NP
Sabril	SCN	NP
Spritam	SCN	NP
Trileptal suspension		NP
Trokendi XR	SCN	NP
Vimpat		NP
Vimpat solution		NP
Antidepressants, Other		
bupropion		P
bupropion SR		P
bupropion XL		P
desvenlafaxine ER (Pristiq)		P
duloxetine 20mg DR caps		P
duloxetine 30mg DR caps		P
duloxetine 60mg DR caps		P
mirtazapine		P
phenelzine		P
tranylcypromine sulfate		P
trazodone		P
venlafaxine		P
venlafaxine ER capsules		P
Marplan		P
Nardil		P
desvenlafaxine ER (No Brand)		NP
desvenlafaxine fumarate ER		NP
desvenlafaxine ER (Khedezla)		NP
duloxetine 40mg DR caps		NP
nefazodone		NP
venlafaxine ER tablets		NP
Aplenzin ER		NP
Emsam		NP
Fetzima		NP

Antidepressants, Other (cont)		
Forfivo XL		NP
Khedezla ER tablets	SCN	NP
Trintellix		NP
Viibryd	SCN	NP
Antidepressants, SSRI		
citalopram		P
escitalopram		P
fluoxetine 10mg, 20mg, 40mg caps		P
fluoxetine solution		P
fluvoxamine		P
paroxetine		P
sertraline		P
Paxil suspension		P
fluoxetine 90mg caps		NP
fluoxetine 10mg, 20mg, 60mg tablets		NP
fluvoxamine ER		NP
paroxetine 7.5mg capsules		NP
paroxetine CR	SCN	NP
Brisdelle	SCN	NP
Pexeva	SCN	NP
Sarafem	SCN	NP
Antiemetics		
granisetron		P
metoclopramide		P
ondansetron		P
ondansetron ODT		P
ondansetron solution		P
prochlorperazine		P
prochlorperazine suppository		P
trimethobenzamide caps		P
Emend Capsules		P
aprepitant capsules		NP
metoclopramide ODT		NP
Akynzeo		NP
Anzemet		NP
Emend Powder Packet		NP
Sancuso	SCN	NP

Uses PA/PDL
Exemption Form -
available via STAT-PA
or Paper PA process

Uses PA/DGA
Form/Sec. VI
Paper PA process only
Refer to topic #15937

Uses specific Drug PA
Form - available via
STAT-PA or
Paper PA process

Uses specific Drug PA
Form - available via
Paper PA process only

Monthly Changes
to the PDL

Uses PA/DGA
Form/Sec. VII
Paper PA process only
Refer to topic #15937

Wisconsin Medicaid, BadgerCare Plus Standard, and SeniorCare Preferred Drug List- Quick Reference

Revised 10/01/2018 (Effective 10/01/2018)

Antiemetics (cont)		
Varubi	SCN	NP
Zuplenz		NP
Antiemetics/Antivertigo		
dimenhydrinate OTC	SCN	P
meclizine		P
meclizine OTC	SCN	P
promethazine		P
promethazine supp		P
promethazine syrup		P
Diclegis	SCN	P
Transderm-Scop	SCN	P
scopolamine patch		NP
Bonjesta	SCN	NP
Antiemetics, Cannabinoids		
dronabinol		NP
Cesamet		NP
Syndros	SCN	NP
Antifungals, Oral		
clotrimazole troche		P
fluconazole		P
griseofulvin suspension		P
griseofulvin ultramicrosize tablets		P
itraconazole		P
ketoconazole tablets		P
nystatin		P
terbinafine		P
Sporanox (liquid)		P
flucytosine		NP
griseofulvin microsize tablets		NP
voriconazole 50mg		NP
voriconazole 200mg		NP
voriconazole suspension		NP
Ancobon		NP
Cresemba		NP
Grifulvin V Tablets		NP
Noxafil		NP
Onmel	DR	SCN
Oravig		NP
Vfend		NP

Antifungals, Topical		
ciclopirox solution		P
clotrimazole OTC	SCN	P
clotrimazole Rx		P
clotrimazole/betamethasone cream		P
ketoconazole cream		P
ketoconazole shampoo		P
miconazole OTC	SCN	P
nystatin		P
tolnaftate OTC	SCN	P
Alevazol	SCN	P
ciclopirox cream		NP
ciclopirox gel		NP
ciclopirox shampoo		NP
ciclopirox suspension		NP
clotrimazole/betamethasone lotion		NP
econazole nitrate		NP
ketoconazole foam		NP
luliconazole cream		NP
naftifine		NP
nystatin/triamcinolone		NP
oxiconazole cream		NP
Bensal HP	SCN	NP
Ertaczo		NP
Exelderm	SCN	NP
Extina	SCN	NP
Jublia		NP
Kerydin	SCN	NP
Luzu cream		NP
Mentax	SCN	NP
Naftin	SCN	NP
Oxistat	SCN	NP
Vusion	SCN	NP
NOTE: Sprays and Kits are not covered.		
Antihistamines, Minimally Sedating		
cetirizine syrup	SCN	P
cetirizine tablets	SCN	P
cetirizine D	SCN	P
loratadine tablets	SCN	P

Antihistamines, Minimally Sedating (cont)		
loratadine D	SCN	P
loratadine syrup	SCN	P
desloratadine		NP
desloratadine ODT		NP
fexofenadine OTC	SCN	NP
levocetirizine		NP
Clarinex		NP
Clarinex D		NP
Clarinex Syrup		NP
Semprex-D	SCN	NP
Xyzal Syrup	SCN	NP
Antihypertensives, Sympatholytics		
clonidine (oral)		P
guanfacine		P
methyldopa		P
Catapres-TTS		P
clonidine trans patch		NP
methyldopa/HCTZ	SCN	NP
Antiparasitics, Topical		
permethrin OTC	SCN	P
permethrin Rx		P
Eurax Cream		P
Natroba		P
Sklice		P
malathion		NP
spinosad		NP
Crotan Lotion	SCN	NP
Eurax Lotion	SCN	NP
Lindane		NP
Antiparkinson's Agents		
amantadine		P
benztropine		P
bromocriptine		P
carbidopa/levodopa		P
carbidopa/levodopa ER		P
carbidopa/levodopa ODT		P
carbidopa/levodopa/entacapone		P
carbidopa 25mg tab		P
pramipexole		P

Antiparkinson's Agents (cont)		
ropinirole		P
selegiline		P
trihexyphenidyl		P
entacapone		NP
pramipexole ER	DR	NP
rasagiline		NP
ropinirole ER	DR	NP
tolcapone		NP
Azilect		NP
Comtan		NP
Gocovri ER	SCN	NP
Neupro patches		NP
Osmolex ER	SCN	NP
Rytary ER	SCN	NP
Stalevo		NP
Tasmar		NP
Xadago	SCN	NP
Zelapar		NP
Antipsoriatics, Oral		
acitretin		P
methoxsalen		NP
Oxsoralen-Ultra		NP
Antipsoriatics, Topical		
calcipotriene		P
calcitrene		P
Taclonex susp		P
Vectical	SCN	P
calcipotriene/betamethasone dipropionate oint		NP
calcitriol oint		NP
Enstilar	SCN	NP
Sorilux		NP
Antipsychotics		
aripiprazole*		P
aripiprazole ODT*	SCN	P
amitriptyline/perphenazine*	SCN	P
chlorpromazine*		P
clozapine*		P
fluphenazine*	SCN	P
haloperidol*		P

Uses PA/PDL Exemption Form - available via STAT-PA or Paper PA process

Uses PA/DGA Form/Sec. VI Paper PA process only Refer to topic #15937

Uses specific Drug PA Form - available via STAT-PA or Paper PA process

Uses specific Drug PA Form - available via Paper PA process only

Monthly Changes to the PDL

Uses PA/DGA Form/Sec. VII Paper PA process only Refer to topic #15937

Wisconsin Medicaid, BadgerCare Plus Standard, and SeniorCare Preferred Drug List- Quick Reference

Revised 10/01/2018 (Effective 10/01/2018)

Antipsychotics (cont)		
loxapine*		P
olanzapine*		P
olanzapine ODT*		P
perphenazine*		P
quetiapine*		P
quetiapine fumarate ER*		P
risperidone*		P
thiothixene*	SCN	P
trifluoperazine*		P
ziprasidone capsules*		P
Latuda*	SCN	P
Orap*	SCN	P
clozapine ODT*		NP
olanzapine/fluoxetine*		NP
paliperidone tablets*		NP
pimozide*		NP
thioridazine*		NP
Adasuve*		NP
Fanapt*	SCN	NP
Fazaclo*	SCN	NP
Invega*		NP
Nuplazid*	SCN	NP
Rexulti*		NP
Saphris*		NP
Symbyax*		NP
Versacloz*	SCN	NP
Vraylar*	SCN	NP
*PA required for children 8 years of age and younger. Use PA Drug Attachment for Antipsychotic Drugs for Children 8 Years of Age and Younger.		
Antipsychotics, Injectable		
fluphenazine decanoate *		P
haloperidol decanoate*		P
Abilify Maintena*		P
Aristada*	SCN	P
Haldol Decanoate*		P
Invega Sustenna*		P
Invega Trinza*		P
Risperdal Consta*		P

Antipsychotics, Injectable (cont)		
Zyprexa Relprevv*		P
Aristada Initio ER*	SCN	NP
Perseris ER*	SCN	NP
*Policy for obtaining provider-administered drugs applies. Refer to topic #5697.		
Antivirals, Influenza		
rimantadine		P
Relenza	SCN	P
Tamiflu	SCN	P
oseltamivir phosphate caps		NP
oseltamivir suspension		NP
Antivirals, other		
acyclovir		P
valacyclovir		P
famciclovir		NP
Sitavig	SCN	NP
Antivirals, Topical		
Zovirax Cream		P
Zovirax Ointment		P
acyclovir ointment		NP
Denavir	SCN	NP
Xerese		NP
Anxiolytics		
alprazolam ER		P
alprazolam intensol		P
alprazolam tablet		P
buspirone		P
chlordiazepoxide		P
clorazepate		P
diazepam solution		P
diazepam tablet		P
lorazepam intensol		P
lorazepam tablet		P
alprazolam ODT		NP
diazepam intensol		NP
meprobamate		NP
oxazepam		NP
BPH Agents, Alpha Reductase Inhibitors		
dutasteride		P
finasteride		P

BPH Agents, Alpha Reductase Inhibitors (cont)		
dutasteride/tamsulosin	SCN	NP
BPH Agents , Andrenergic		
alfuzosin		P
tamsulosin		P
terazosin		P
doxazosin		NP
Cardura XL		NP
Rapaflo		NP
Beta Blockers		
atenolol		P
atenolol/chlorthalidone		P
bisoprolol		P
bisoprolol/HCTZ		P
carvedilol		P
labetalol		P
metoprolol		P
metoprolol ER		P
propranolol		P
propranolol ER		P
sotalol		P
acebutolol		NP
betaxolol		NP
carvedilol ER		NP
metoprolol/HCTZ		NP
nadolol		NP
nadolol bendroflumethiazide		NP
pindolol		NP
propranolol/HCTZ	SCN	NP
timolol		NP
Bystolic	SCN	NP
Coreg CR	SCN	NP
Dutoprol	SCN	NP
Hemangeol	SCN	NP
Inderal XL		NP
Innopran XL		NP
Kapsargo sprinkles		NP
Levatol		NP
Lopressor HCT		NP
Sotylize		NP

Bile Salts		
ursodiol		P
Chenodal	SCN	NP
Cholbam	SCN	NP
Ocaliva	SCN	NP
Bladder Relaxant Preparations		
oxybutynin		P
oxybutynin ER		P
oxybutynin syrup		P
Enablex	SCN	P
Toviaz		P
VesiCare		P
darifenacin ER		NP
tolterodine		NP
tolterodine ER		NP
tropium		NP
tropium ER		NP
Detrol, LA		NP
Gelnique		NP
Myrbetriq ER		NP
Oxytrol		NP
Bone Resorption Suppression		
alendronate		P
calcitonin-salmon nasal		P
alendronate sod solution	SCN	NP
etidronate		NP
ibandronate		NP
raloxifene		NP
risedronate		NP
Actonel	SCN	NP
Atelvia	SCN	NP
Binosto	SCN	NP
Boniva	SCN	NP
Forteo		NP
Fosamax Plus D		NP
Tymlos		NP
Bronchodilators, Beta Agonists		
albuterol		P
albuterol ER	SCN	P
albuterol (2.5mg/0.5ml)		P
albuterol (2.5mg/3ml)		P

Uses PA/PDL Exemption Form - available via STAT-PA or Paper PA process

Uses PA/DGA Form/Sec. VI Paper PA process only Refer to topic #15937

Uses specific Drug PA Form - available via STAT-PA or Paper PA process

Uses specific Drug PA Form - available via Paper PA process only

Monthly Changes to the PDL

Uses PA/DGA Form/Sec. VII Paper PA process only Refer to topic #15937

Wisconsin Medicaid, BadgerCare Plus Standard, and SeniorCare Preferred Drug List- Quick Reference

Revised 10/01/2018 (Effective 10/01/2018)

Bronchodilators, Beta Agonists (cont)		
albuterol (100mg/20ml)		P
albuterol nebulizer low-dose (0.63mg/3ml)		P
albuterol nebulizer low-dose (1.25mg/3ml)		P
terbutaline tablets		P
Proair HFA		P
Proventil HFA		P
Serevent	SCN	P
levalbuterol nebulizer		NP
levalbuterol HFA		NP
metaproterenol		NP
Arcapta		NP
Brovana	SCN	NP
Perforomist	SCN	NP
ProAir Respiclick		NP
Striverdi Respimat		NP
Ventolin HFA	SCN	NP
Xopenex HFA	SCN	NP
Calcium Channel Blocking Agents		
amlodipine		P
diltiazem		P
diltiazem ER capsules	SCN	P
nifedipine ER		P
nifedipine IR		P
nimodipine		P
verapamil tablets		P
verapamil ER tablet		P
verapamil SR tablet		P
diltiazem ER tablets	SCN	NP
felodipine ER		NP
isradipine		NP
nicardipine		NP
nisoldipine	SCN	NP
verapamil ER capsule	SCN	NP
verapamil SR capsule		NP
verapamil ER PM	SCN	NP
verapamil 360mg capsule		NP
Cardizem LA		NP

Calcium Channel Blocking Agents (cont)		
Matzim LA		NP
Nymalize solution		NP
COPD Agents		
ipratropium nebulizer		P
ipratropium/albuterol neb		P
Atrovent HFA		P
Bevespi Aerosphere		P
Combivent Respimat		P
Spiriva		P
Anoro Ellipta	SCN	NP
Daliresp		NP
Incruse Ellipta	SCN	NP
Lonhala Magnair Kits	SCN	NP
Seebri Neohaler		NP
Spiriva Respimat		NP
Stiolto Respimat		NP
Tudorza Pressair		NP
Utibron Neohaler		NP
Cough and Cold – Narcotic Liquids		
guaifenesin/codeine		P
phenylephrine/promethazine/codeine		P
promethazine / codeine		P
<p>NOTE: Cough and Cold-Narcotic Liquids listed are covered legend and OTC by active ingredient. Cough and Cold-Narcotic Liquids not listed are either non-preferred or non-covered.</p> <p>Note: Coverage information for non-narcotic OTC cough and cold products can be found in the Over-the-Counter Drugs data tables on the Pharmacy page of the Providers area of the Portal.</p>		
Cytokine and CAM Antagonists		
Enbrel		P
Humira		P
Otezla		P
Actemra	SCN	NP
Cosentyx		NP
Cimzia		NP
Ilumya		NP

Cytokine and CAM Antagonists (cont)		
Kevzara		NP
Kineret		NP
Olumiant		NP
Orencia		NP
Siliq		NP
Simponi		NP
Stelara		NP
Taltz		NP
Tremfya		NP
Xeljanz		NP
Xeljanz XR		NP
Epinephrine, Self Injected		
epinephrine 0.15 MG (AG Epi-pen JR)	SCN	P
epinephrine 0.3 MG (AG Epi-pen)	SCN	P
epinephrine 0.15 MG (AG Adrenaclick)**		P
epinephrine 0.3 MG (AG Adrenaclick)**		P
Epipen JR 0.15 MG**	SCN	P
Epipen 0.3 MG **	SCN	P
** Products added as preferred temporarily due to shortage		
Erythropoiesis Stimulating Proteins		
Aranesp		P
Procrit		P
Epogen		NP
Retacrit	SCN	NP
Fibromyalgia		
duloxetine 20mg DR caps		P
duloxetine 30mg DR caps		P
duloxetine 60mg DR caps		P
Lyrica		P
Savella	SCN	P
duloxetine 40mg DR caps		NP
Fluoroquinolones		
ciprofloxacin		P
levofloxacin tablets		P
ciprofloxacin suspension		NP

Fluoroquinolones (cont)		
ciprofloxacin ER	SCN	NP
levofloxacin solution		NP
moxifloxacin		NP
ofloxacin		NP
Avelox		NP
Baxdela tablet	SCN	NP
Cipro suspension		NP
GI Motility, Chronic-Constipation		
Amitiza		P
Linzess	SCN	P
Movantik		P
Relistor tablet		NP
Symproic		NP
Trulance	SCN	NP
GI Motility, Chronic-Diarrhea		
Lotronex	SCN	P
Xifaxan 550mg		P
alosetron		NP
Viberzi	SCN	NP
Glucocorticoids, Inhaled		
Advair Diskus	SCN	P
Asmanex		P
Dulera		P
Flovent HFA	SCN	P
Pulmicort Flexhaler		P
Pulmicort Respules		P
Symbicort		P
budesonide respules		NP
fluticasone/salmeterol		NP
Advair HFA	SCN	NP
Aerospan HFA Inhaler		NP
AirDuo Respiclick		NP
Alvesco Inhaler	SCN	NP
Armonair Respiclick		NP
Arnuity Ellipta	SCN	NP
Asmanex HFA		NP
Breo Ellipta Inhaler	SCN	NP
Flovent Diskus	SCN	NP
Qvar Redihaler		NP
Trelegly Ellipta	SCN	NP

Uses PA/PDL Exemption Form - available via STAT-PA or Paper PA process

Uses PA/DGA Form/Sec. VI Paper PA process only Refer to topic #15937

Uses specific Drug PA Form - available via STAT-PA or Paper PA process

Uses specific Drug PA Form - available via Paper PA process only

Monthly Changes to the PDL

Uses PA/DGA Form/Sec. VII Paper PA process only Refer to topic #15937

Wisconsin Medicaid, BadgerCare Plus Standard, and SeniorCare Preferred Drug List- Quick Reference

Revised 10/01/2018 (Effective 10/01/2018)

Glucocorticoids, Oral		
budesonide EC capsule		P
dexamethasone elixir		P
dexamethasone intensol		P
dexamethasone solution		P
dexamethasone tablet		P
hydrocortisone		P
methylprednisolone Dose PK		P
methylprednisolone tablet		P
prednisolone sod phosphate solution 5mg/5ml		P
prednisolone sod phosphate solution 5mg/5ml		P
prednisolone sod phosphate solution 25mg/5ml		P
prednisone intensol		P
prednisone solution		P
prednisone Dose PK		P
prednisone tablet		P
Orapred ODT	SCN	P
cortisone		NP
dexamethasone Dose PK		NP
prednisolone sod phosphate ODT	SCN	NP
prednisolone sod phosphate solution 10mg/5ml		NP
prednisolone sod phosphate solution 20mg/5ml		NP
Decadron	SCN	NP
Dexpak		NP
Emflaza	SCN	NP
Medrol tablet		NP
Millipred Dose Pack	SCN	NP
Millipred solution	SCN	NP
Millipred tablet	SCN	NP
Rayos tablet DR	SCN	NP
TaperDex	SCN	NP
Gout Agents		
allopurinol		P
colchicine capsule		P

Gout Agents (cont)		
indomethacin		P
naproxen Rx		P
Probenecid		P
Probenecid/colchicine		P
colchicine tablet		NP
naproxen suspension		NP
Colcrys		NP
Duzallo	SCN	NP
Mitigare	SCN	NP
Uloric		NP
Zurampic	SCN	NP
Growth Hormone		
Genotropin		P
Norditropin	SCN	P
Humatrope		NP
Nutropin AQ		NP
Omnitrope		NP
Saizen		NP
Serostim	SCN	NP
Zomacton	SCN	NP
Zorbtive	SCN	NP
H2 Antagonists		
cimetidine solution		P
cimetidine tablet		P
famotidine tablet		P
ranitidine syrup		P
ranitidine tablet		P
famotidine suspension*		NP
nizatidine capsules		NP
nizatidine solution		NP
ranitidine capsules		NP
*Prior Authorization not required for members 18 years of age and younger.		
Hepatitis B Agents		
entecavir tablet		P
lamivudine	SCN	P
Baraclude solution		P
Epivir HBV Soln	SCN	P
Hepsera		P
adefovir dipivoxal		NP

Hepatitis B Agents (cont)		
Vemlidy		NP
Hepatitis C Agents		
Epclusa		P
Harvoni		P
Mavyret		P
Viekira Pak/Viekira XR		P
Zepatier		P
Daklinza		NP
Sovaldi		NP
Technivie		NP
Vosevi		NP
Hepatitis C Agents-Interferon		
Pegasys	SCN	P
Peg-Intron Redipen		P
Hepatitis C Agents-Ribavirin		
ribavirin		P
Moderiba		NP
Rebetol Solution		NP
Ribapak		NP
H. Pylori		
lansoprazole/amoxicillin/clarithromycin		P
Pylera		P
Omeclamox Pak	SCN	NP
Hypoglycemics, Alpha-Glucosidase Inhibitors		
acarbose		P
Glyset		P
miglitol		NP
Hypoglycemics, DPP-4 Inhibitors		
Glyxambi		P
Janumet		P
Janumet XR		P
Januvia		P
Jentadueto		P
Tradjenta		P
alogliptin		NP
alogliptin/metformin		NP
alogliptin/pioglitazone		NP
Jentadueto XR		NP

Hypoglycemics, DPP-4 Inhibitors (cont)		
Kazano		NP
Kombiglyze XR		NP
Nesina		NP
Onglyza		NP
Oseni		NP
Hypoglycemics, GLP 1		
Bydureon Pen/Vial		P
Byetta		P
Trulicity		P
Victoza	SCN	P
Adlyxin		NP
Bydureon BCise		NP
Ozempic	SCN	NP
Tanzeum	SCN	NP
Hypoglycemics, GLP 1-Combinations		
Soliqua		NP
Xultophy	SCN	NP
Hypoglycemics, Insulins		
Humalog Mix		P
Humalog U-100 Cart/Kwikpen/Vial		P
Humulin 70-30		P
Humulin U-100 Kwikpen/Vial		P
Humulin U-500 Vial		P
Novolog	SCN	P
Admelog		NP
Afrezza	SCN	NP
Apidra		NP
Fiasp	SCN	NP
Humalog Jr. Kwikpen		NP
Humalog U-200 Kwikpen		NP
Humulin R U-500 Kwikpen		NP
Novolin	SCN	NP
Hypoglycemics, Insulins Long-Acting		
Lantus		P
Levemir	SCN	P
Basaglar		NP
Toujeo Solostar		NP
Toujeo Max Solostar		NP
Tresiba Flextouch	SCN	NP

Uses PA/PDL Exemption Form - available via STAT-PA or Paper PA process

Uses PA/DGA Form/Sec. VI Paper PA process only Refer to topic #15937

Uses specific Drug PA Form - available via STAT-PA or Paper PA process

Uses specific Drug PA Form - available via Paper PA process only

Monthly Changes to the PDL

Uses PA/DGA Form/Sec. VII Paper PA process only Refer to topic #15937

Wisconsin Medicaid, BadgerCare Plus Standard, and SeniorCare Preferred Drug List- Quick Reference

Revised 10/01/2018 (Effective 10/01/2018)

Hypoglycemics, Meglitinides		
repaglinide		P
nateglinide		NP
repaglinide/metformin		NP
Hypoglycemics, Other		
metformin		P
metformin ER (Glucophage ER)		P
Farxiga		P
Invokana		P
Jardiance		P
Welchol		P
colesevelam		NP
metformin ER (Glumetza)		NP
metformin ER OSM-tab		NP
Cycloset		NP
Glumetza ER		NP
Invokamet		NP
Invokamet XR		NP
Qtern		NP
Riomet	SCN	NP
Segluromet		NP
Steglatro		NP
Steglujan		NP
Synjardy		NP
Synjardy XR		NP
Xigduo XR		NP
Hypoglycemics, Sulfonylureas		
glimepiride		P
glipizide		P
glipizide ER		P
glyburide		P
glyburide/metformin		P
chlorpropamide	SCN	NP
glipizide/metformin		NP
tolazamide	SCN	NP
tolbutamide	SCN	NP
Hypoglycemics, Symlin		
Symlin		P
Hypoglycemics, Thiazolidinediones		
pioglitazone		P

Hypoglycemics, Thiazolidinediones (cont)		
pioglitazone-glimepiride		NP
pioglitazone-metformin		NP
Actoplus MET		NP
Actoplus MET XR		NP
Avandia	SCN	NP
Immunomodulators, Atopic Dermatitis		
Elidel		P
Protopic	SCN	P
tacrolimus		NP
Dupixent		NP
Eucrisa 2%	SCN	NP
Immunomodulators, Topical		
imiquimod		P
Aldara		P
Zyclara		NP
Intranasal Rhinitis Agents		
azelastine (Astellin)		P
fluticasone RX		P
ipratropium		P
Beconase AQ	SCN	P
Patanase		P
flunisolide		NP
mometasone furoate		NP
olopatadine		NP
Astepro		NP
Dymista		NP
Nasonex*		NP
Omnaris	SCN	NP
Qnasl		NP
Xhance	SCN	NP
Zetonna	SCN	NP
*Prior Authorization not required for members 6 years of age and younger.		
Leukotriene Modifiers		
montelukast chewable		P
montelukast tablet		P
montelukast granules		NP
zafirlukast		NP
zileuton ER		NP
Zyflo	SCN	NP

Lipotropics, Apo-B Inhibitors				
Juxtapid		SCN	NP	
Kynamro		SCN	NP	
Lipotropics, Bile Acid Sequestrants				
cholestyramine			P	
colestipol tablet			P	
Welchol			P	
colesevelam			NP	
colestipol granules			NP	
Colestid granules			NP	
Lipotropics, Fibrin Acids				
fenofibrate tab (Gen-Tricor)			P	
fenofibric acid (Gen-Trilipix)			P	
gemfibrozil			P	
fenofibrate (Gen-Antara)			NP	
fenofibrate (Gen-Fenoglide)			NP	
fenofibrate (Gen-Lipofen)			NP	
fenofibrate (Gen Lofibra)			NP	
fenofibric acid (Gen-Fibrocor)			NP	
Antara		SCN	NP	
Fenoglide			NP	
Fibrocor		SCN	NP	
Lipofen		SCN	NP	
Triglide		SCN	NP	
Lipotropics, Niacin				
niacin ER tabs (RX)			P	
Niacor			P	
Lipotropics, Omega-3 Acids				
omega-3 acid ethyl esters		DAPO	P	
Vascepa		SCN	DAPO	NP
Lipotropics, Other				
atorvastatin			P	
ezetimibe			P	
lovastatin			P	
pravastatin			P	
rosuvastatin			P	
simvastatin			P	
amlodipine/atorvastatin			NP	
ezetimibe/simvastatin			NP	
fluvastatin			NP	
fluvastatin ER			NP	

Lipotropics, Other (cont)		
Altoprev	SCN	NP
Caduet		NP
Lescol XL		NP
Livalo	SCN	NP
Vytorin		NP
Zypitamag	SCN	NP
Lipotropics, PCSK9 Inhibitors		
Praluent		NP
Repatha		NP
Methotrexate		
methotrexate tablet		P
methotrexate PF vial		P
methotrexate vial		P
Otrexup Auto Injector	SCN	NP
Rasuvo Auto Injector		NP
Trexall tablet	SCN	NP
Migraine Agents, CGRP Antagonists		
Aimovig		NP
Migraine Agents, Other		
rizatriptan		P
sumatriptan nasal spray		P
sumatriptan tablets		P
Relpax		P
almotriptan		NP
eletriptan		NP
frovatriptan		NP
naratriptan		NP
sumatriptan/naproxen tablets		NP
zolmitriptan tablets		NP
zolmitriptan ODT		NP
Cambia	SCN	NP
Onzetra	SCN	NP
Treximet	SCN	NP
Zomig Nasal Spray	SCN	NP
Migraine Agents, Injectable		
sumatriptan injectable		P
Sumavel		NP
Zembrace	SCN	NP

Uses PA/PDL Exemption Form - available via STAT-PA or Paper PA process

Uses PA/DGA Form/Sec. VI Paper PA process only Refer to topic #15937

Uses specific Drug PA Form - available via STAT-PA or Paper PA process

Uses specific Drug PA Form - available via Paper PA process only

Monthly Changes to the PDL

Uses PA/DGA Form/Sec. VII Paper PA process only Refer to topic #15937

Wisconsin Medicaid, BadgerCare Plus Standard, and SeniorCare Preferred Drug List- Quick Reference

Revised 10/01/2018 (Effective 10/01/2018)

Multiple Sclerosis Agents, Immunomodulators			
Aubagio			P
Avonex			P
Betaseron			P
Copaxone 20mg			P
Copaxone 40mg			P
Gilenya			P
Rebif		SCN	P
Rebif Rebidose		SCN	P
glatiramer		SCN	NP
Extavia			NP
Glatopa			NP
Plegridy		SCN	NP
Tecfidera		SCN	NP
Multiple Sclerosis Agents, Other			
dalfampridine ER		SCN	NP
Ampyra ER		SCN	NP
Neuropathic Pain			
duloxetine 20mg DR caps			P
duloxetine 30mg DR caps			P
duloxetine 60mg DR caps			P
gabapentin			P
Lyrica			P
duloxetine 40mg DR caps			NP
Gralise		SCN	DR
Horizant			DR
Lyrica CR			NP
NSAIDS			
celecoxib cap			P
diclofenac potassium			P
diclofenac sodium			P
diclofenac ER			P
flurbiprofen			P
ibuprofen Rx			P
ibuprofen OTC		SCN	P
indomethacin			P
ketoprofen			P
ketorolac			P
meloxicam tablets			P
nabumetone			P

NSAIDS (cont)			
naproxen Rx			P
naproxen DS Rx			P
naproxen OTC		SCN	P
sulindac			P
diclofenac sodium/misoprostol			NP
diclofenac solution			NP
diflunisal			NP
etodolac			NP
etodolac XL			NP
fenoprofen		SCN	NP
indomethacin ER			NP
ketoprofen ER		SCN	NP
meclofenamate		SCN	NP
mefenamic acid			NP
naproxen CR			NP
naproxen sodium Rx			NP
naproxen suspension		SCN	NP
oxaprozin			NP
piroxicam			NP
tolmetin			NP
Duexis		SCN	NP
Indocin suppository		SCN	NP
Indocin suspension		SCN	NP
Nalfon 400mg cap		SCN	NP
Naprelan CR			NP
Sprix		SCN	NP
Tivorbex		SCN	NP
Vimovo		SCN	NP
Vivlodex		SCN	NP
Zipsor		SCN	NP
Zorvolex		SCN	NP
Ophthalmics, Allergic Conjunctivitis			
cromolyn			P
ketorolac 0.5%			P
ketotifen OTC		SCN	P
olopatadine 0.1% (Patanol)			P
Alaway OTC		SCN	P
Alrex			P
Pazeo			P
azelastine			NP

Ophthalmics, Allergic Conjunctivitis (cont)			
epinastine			NP
olopatadine 0.2% (Pataday)			NP
Alocril			NP
Alomide			NP
Bepreve			NP
Emadine			NP
Lastacaft			NP
Pataday			NP
Ophthalmics, Antibacterial			
ciprofloxacin solution			P
erythromycin			P
gentamicin			P
ofloxacin			P
polymyxin/trimethoprim			P
sulfacetamide oint			P
sulfacetamide solution			P
tobramycin			P
Ciloxan ointment			P
Moxeza			P
Tobrex ointment			P
Vigamox			P
bacitracin			NP
bacitracin/polymyxin			NP
gatifloxacin			NP
levofloxacin			NP
moxifloxacin (Vigamox)			NP
neomycin / bacitracin / polymyxin ointment			NP
neomycin / polymyxin / gramicidin			NP
triple antibiotic			NP
Azasite			NP
Besivance			NP
Natacyn			NP
Zymaxid			NP
Ophthalmics, Antibiotic-Steroid Combinations			
neomycin/polymyxin/dexamethasone			P
sulfacetamide/prednisolone			P
Blephamide		SCN	P

Ophthalmics, Antibiotic-Steroid Combinations (cont)			
Pred-G ointment			P
Pred-G drops			P
Tobradex suspension			P
Tobradex ointment			P
neomycin/bacitracin/poly/HC			NP
tobramycin/dexamethasone			NP
neomycin/polymyxin/HC			NP
Blephamide S.O.P.		SCN	NP
Tobradex ST			NP
Zylet			NP
Ophthalmics, Anti-Inflammatories			
dexamethasone			P
fluorometholone			P
flurbiprofen			P
ketorolac LS 0.4%			P
prednisolone acetate			P
prednisolone sod phosphate			P
Durezol			P
Flarex			P
FML Forte			P
FML S.O.P.		SCN	P
Ilevro			P
Lotemax solution			P
Maxidex			P
Pred Mild		SCN	P
bromfenac			NP
diclofenac			NP
omnipred			NP
Acuvail			NP
Bromsite			NP
FML Liquifilm			NP
Lotemax gel			NP
Lotemax ointment			NP
Nevanac			NP
Prolensa			NP
Ophthalmics, Anti-Inflammatory / Immunomodulator			
Restasis		SCN	P
Restasis Multidose		SCN	P

Uses PA/PDL Exemption Form - available via STAT-PA or Paper PA process

Uses PA/DGA Form/Sec. VI Paper PA process only Refer to topic #15937

Uses specific Drug PA Form - available via STAT-PA or Paper PA process

Uses specific Drug PA Form - available via Paper PA process only

Monthly Changes to the PDL

Uses PA/DGA Form/Sec. VII Paper PA process only Refer to topic #15937

Wisconsin Medicaid, BadgerCare Plus Standard, and SeniorCare Preferred Drug List- Quick Reference

Revised 10/01/2018 (Effective 10/01/2018)

Ophthalmics, Anti-Inflammatory / Immunomodulator (cont)			
Xiidra			NP
Ophthalmics, Glaucoma-Beta Blockers			
carteolol			P
levobunolol			P
timolol (Gen-Timoptic/XE)			P
Betoptic S			P
betaxolol			NP
Istalol			NP
timolol (Gen-Istalol)			NP
Timoptic Ocudose			NP
Ophthalmics, Glaucoma-Other			
brimonidine 0.2%			P
dorzolamide			P
dorzolamide w/timolol			P
pilocarpine			P
Alphagan P 0.15%	SCN		P
Azopt			P
Combigan	SCN		P
Isopto Carpine 2%			P
Simbrinza			P
apraclonidine			NP
brimonidine tartrate 0.15%			NP
Alphagan P 0.1%	SCN		NP
Cosopt PF			NP
lopidine			NP
Rhopressa	SCN		NP
Ophthalmics, Glaucoma-Prostaglandins			
latanoprost			P
Travatan Z			P
bimatoprost 0.03% 2.5ml			NP
bimatoprost 0.03% 5ml			NP
bimatoprost 0.03% 7.5ml			NP
Lumigan 0.01% 2.5ml	SCN		NP
Lumigan 0.01% 5ml	SCN		NP
Lumigan 0.01% 7.5ml	SCN		NP
Vyzulta solution			NP
Zioptan			NP
Opioid Dependency Agents-Buprenorphine			
Suboxone Film	DR	SCN	P

Opioid Dependency Agents-Buprenorphine (cont)			
Zubsolv	DR	SCN	P
buprenorphine tabs (without naloxone)	DR		NP
buprenorphine/naloxone film	DR		NP
buprenorphine/naloxone tab	DR		NP
Bunavail	DR	SCN	NP
Sublocade*	DR	SCN	NP
*Policy for obtaining provider-administered drugs applies. Refer to topic #5697.			
Opioid Dependency Agents-Rescue Agent			
naloxone syringe			P
naloxone vial			P
Narcan spray		SCN	P
Opioid Dependency Agents-methadone			
methadone dispersible tab	DR		P
methadone concentrate	DR		P
Opioid Dependency and Alcohol Abuse / Dependency Agents			
naltrexone tab	DR		P
Vivitrol injection*	DR	SCN	P
*Policy for obtaining provider-administered drugs applies. Refer to topic #5697.			
Otics, Antibiotics			
neomycin/polymyxin/HC			P
ofloxacin			P
Cipro HC			P
Coly-mycin S			P
ciprofloxacin	SCN		NP
Ciprodex*			NP
Otovel			NP
*Prior Authorization not required for members 6 years of age and younger.			
Otics, Anti-Infectives & Anesthetics			
acetic acid			P
acetic acid HC			NP
Pancreatic Enzymes			
Zenpep DR		SCN	P

Pancreatic Enzymes (cont)			
Creon DR			NP
Pancrease DR			NP
Pertzye DR 4,000*			NP
Pertzye DR 8,000			NP
Pertzye DR 16,000			NP
Pertzye DR 24,000			NP
Viokace			NP
*Prior Authorization not required for members 1 year of age and younger.			
Phosphate Binders			
calcium acetate 667mg caps			P
calcium acetate 667mg tabs			P
Phoslyra	SCN		P
Renagel			P
lanthanum carbonate			NP
sevelamer powder pack			NP
sevelamer tab			NP
Auryxia	SCN		NP
Eliphos	SCN		NP
Fosrenol			NP
Magnebind			NP
Renvela			NP
Velphoro	SCN		NP
Platelet Aggregation Inhibitors			
aspirin	SCN		P
clopidogrel			P
dipyridamole			P
Aggrenox			P
Brilinta			P
aspirin/dipyridamole			NP
ticlopidine			NP
Effient			NP
prasugrel			NP
Yosprala	SCN		NP
Zontivity			NP
Prenatal Vitamins			
prenatal vitamin plus low iron	SCN		P
Completenate tablet chew	SCN		P
Elite-OB caplet	SCN		P

Prenatal Vitamins (cont)			
Folivane-OB capsule	SCN		P
PNV 29-1 tablet	SCN		P
Preplus CA-FE 27mg-FA 1mg tab	SCN		P
Pretab 29mg-1mg tablet	SCN		P
SE-Natal 19 chewable tablet	SCN		P
SE-Natal 19 tablet	SCN		P
Taron-C DHA capsule	SCN		P
Thrivite 19 tablet	SCN		P
Trinatal RX 1 tablet	SCN		P
Virt-PN DHA softgel	SCN		P
Vol-Nate tablet	SCN		P
Vol-Plus tablet	SCN		P
Vol-Tab RX tablet	SCN		P
Zatean-PN DHA capsule	SCN		P
NOTE: Prenatal Vitamins listed are covered legend and OTC by active ingredient. Prenatal Vitamins not listed are either non-preferred or non-covered.			NP
Proton Pump Inhibitors			
esomeprazole magnesium			P
lansoprazole DR			P
omeprazole RX			P
pantoprazole			P
Nexium Packet			P
Prilosec suspension			P
Protonix suspension			P
esomeprazole strontium			NP
lansoprazole ODT (solutab)			NP
omeprazole-bicarb RX			NP
rabeprazole			NP
Aciphex Sprinkle DR caps	SCN		NP
Dexilant DR 30mg			NP
Dexilant DR 60mg			NP
Prevacid Solutab			NP
Zegerid			NP
Pulmonary Arterial Hypertension			
sildenafil	DR		P
Addirca	DR	SCN	P
Letairis			P

Uses PA/PDL Exemption Form - available via STAT-PA or Paper PA process

Uses PA/DGA Form/Sec. VI Paper PA process only Refer to topic #15937

Uses specific Drug PA Form - available via STAT-PA or Paper PA process

Uses specific Drug PA Form - available via Paper PA process only

Monthly Changes to the PDL

Uses PA/DGA Form/Sec. VII Paper PA process only Refer to topic #15937

Wisconsin Medicaid, BadgerCare Plus Standard, and SeniorCare Preferred Drug List- Quick Reference

Revised 10/01/2018 (Effective 10/01/2018)

Pulmonary Arterial Hypertension (cont)			
Tracleer tablet			P
tadalafil tablet		SCN	NP
Adempas			NP
Opsumit			NP
Orenitram ER		SCN	NP
Revatio suspension	DR		NP
Tracleer suspension			NP
Tyvaso		SCN	NP
Uptravi			NP
Ventavis			NP
Sedative Hypnotics			
estazolam			P
eszopiclone			P
temazepam 15mg			P
temazepam 30mg			P
triazolam			P
zaleplon			P
zolpidem			P
Rozerem			P
flurazepam		SCN	NP
temazepam 7.5mg			NP
temazepam 22.5mg			NP
zolpidem ER			NP
zolpidem SL			NP
Belsomra			NP
Edluar			NP
Intermezzo			NP
Silenor			NP
Zolpimist		SCN	NP
Skeletal Muscle Relaxants			
baclofen			P
chlorzoxazone			P
cyclobenzaprine			P
dantrolene sodium			P
methocarbamol			P
tizanidine tablets			P
carisoprodol			NP
carisoprodol compound			NP
cyclobenzaprine 7.5mg tablet			NP
metaxalone			NP

Skeletal Muscle Relaxants (cont)			
orphenadrine			NP
tizanidine capsules			NP
Amrix			NP
Dantrium			NP
Fexmid			NP
Lorzone		SCN	NP
Metaxall		SCN	NP
Soma			NP
Steroids, Topical Low			
fluocinolone oil			P
hydrocortisone			P
hydrocortisone OTC		SCN	P
Scalpicin 1% liquid		SCN	P
alclometasone dipropionate cream			NP
alclometasone dipropionate oint			NP
desonide cream/ointment			NP
desonide lotion			NP
hydrocortisone acetate/urea			NP
Capex Shampoo		SCN	NP
Derma-Smoother-FS		SCN	NP
Desonate			NP
Texacort		SCN	NP
Steroids, Topical Medium			
fluticasone cream/ointment			P
mometasone furoate			P
betamethasone valerate foam			NP
clocortolone			NP
flurandrenolide lotion/cream			NP
flurandrenolide ointment		SCN	NP
fluticasone lotion			NP
fluocinolone acetate cream		SCN	NP
fluocinolone 0.01% soln/ointment			NP
hydrocortisone butyrate lipid cream			NP
hydrocortisone butyrate			NP
hydrocortisone butyrate lotion		SCN	NP
hydrocortisone valerate			NP
prednicarbate cream		SCN	NP

Steroids, Topical Medium (cont)			
prednicarbate ointment			NP
Cloderm			NP
Cordran Tape			NP
Cutivate lotion		SCN	NP
Dermatop			NP
Luxiq		SCN	NP
Pandel		SCN	NP
Synalar		SCN	NP
Steroids, Topical High			
betamethasone valerate			P
triamcinolone acetonide			P
amcinonide			NP
betamethasone dipropionate			NP
desoximetasone			NP
diflorasone diacetate			NP
fluocinonide			NP
fluocinonide-e			NP
Diprolene ointment			NP
Halog		SCN	NP
Kenalog aerosol spray			NP
Sernivo 0.05% spray		SCN	NP
Topicort 0.05% ointment			NP
Topicort 0.25% spray			NP
Triaxex		SCN	NP
Steroids, Topical Very High			
clobetasol cream/foam/ointment/solution/gel/emollient			P
halobetasol propionate			P
Clobex Lotion		SCN	P
Clobex Shampoo		SCN	P
betamethasone dipropionate aug			NP
clobetasol lotion			NP
clobetasol shampoo			NP
clobetasol spray			NP
Apexicon E		SCN	NP
Clobex spray		SCN	NP
Olux-E		SCN	NP
Ultravate lotion		SCN	NP

Stimulants			
dexamethylphenidate		DR	P
methylphenidate tab		DR	P
methylphenidate CD		DR	P
methylphenidate chew tab		DR	P
methylphenidate ER tab (Gen-Metadate ER)		DR	P
methylphenidate ER capsule		DR	P
methylphenidate solution		DR	P
Aptensio XR		DR	P
Concerta		DR	P
Daytrana		DR	P
Focalin		DR	P
Focalin XR		DR	P
Metadate CD		DR	P
Metadate ER tablet		DR	P
Methylin solution		DR	P
Quillichew ER		DR	P
Quillivant XR		DR	P
Vyvanse*		DR	P
Vyvanse chewable*		DR	P
amphetamine salt combo*		DR	NP
amphetamine salt combo ER		DR	NP
dexamethylphenidate ER Cap		DR	NP
dextroamphetamine *		DR	NP
dextroamphetamine ER		DR	NP
dextroamphetamine solution*		DR	NP
methylphenidate ER tablet (Gen-Concerta)		DR	NP
methamphetamine		DR	NP
Adderall XR		DR	NP
Adzenys ER susp		DR	NP
Adzenys XR ODT		DR	NP
Cotempla XR		DR	NP
Dexedrine*		DR	NP
Dyanavel XR		DR	NP
Evekeo*		DR	NP
Mydayis ER		DR	NP
Procentra*		DR	NP
Ritalin LA		DR	NP

Uses PA/PDL Exemption Form - available via STAT-PA or Paper PA process

Uses PA/DGA Form/Sec. VI Paper PA process only Refer to topic #15937

Uses specific Drug PA Form - available via STAT-PA or Paper PA process

Uses specific Drug PA Form - available via Paper PA process only

Monthly Changes to the PDL

Uses PA/DGA Form/Sec. VII Paper PA process only Refer to topic #15937

Wisconsin Medicaid, BadgerCare Plus Standard, and SeniorCare Preferred Drug List- Quick Reference

Revised 10/01/2018 (Effective 10/01/2018)

Stimulants (cont)		
Zenzedi*	DR	NP
* PA required for the treatment of Binge Eating Disorder (BED). Use Sec VI of the PA/DGA (Refer to topic #15937)		
*Prior Authorization not required for members 6 years of age and younger.		
Stimulants-Related Agents		
atomoxetine		P
clonidine ER tab		P
guanfacine ER		P
Kapvay	SCN	P
armodafinil		NP
modafinil		NP
Nuvigil	SCN	NP
Ulcerative Colitis		
balsalazide		P
sulfasalazine		P
Apriso		P
Canasa		P
Lialda		P
Rowasa Kits	SCN	P
budesonide ER tablet		NP
mesalamine tabs		NP
mesalamine kits	SCN	NP
Asacol HD		NP
Delzicol		NP
Dipentum		NP
Giazo		NP
Pentasa		NP
Uceris		NP

Brand Name Drugs with Generic Copay	
Drug Name	Start Date
Adderall XR	01/01/2012
Aldara	01/01/2014
Alphagan P 0.15%	01/01/2012
Catapres -TTS	01/01/2014
Concerta	01/01/2018
Differin 0.1% Cream	01/01/2012
Differin 0.3% gel pump	02/01/2017
Pulmicort respules	01/01/2016
Retin-A (not micro)	07/01/2016
Tegretol tablet	01/01/2016
Tegretol suspension	01/01/2016
Tegretol XR 100mg	04/06/2016
Tegretol XR 200mg	01/01/2012
Tegretol XR 400 mg	01/01/2012
Tobradex suspension	01/01/2012

Uses PA/PDL Exemption Form - available via STAT-PA or Paper PA process

Uses PA/DGA Form/Sec. VI Paper PA process only Refer to topic #15937

Uses specific Drug PA Form - available via STAT-PA or Paper PA process

Uses specific Drug PA Form - available via Paper PA process only

Monthly Changes to the PDL

Uses PA/DGA Form/Sec. VII Paper PA process only Refer to topic #15937