

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

Revised 02/17/2022 (Effective 02/01/2022)

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	Brand Before Generic Drug Refer to topic #20077	Uses specific Drug PA Form - available via STAT-PA or Paper PA process	Uses specific Drug PA Form - available via Paper PA process only	Uses PA/DGA Form/Sec. VII Paper PA process only Refer to topic #15937	Monthly Changes to the PDL
--	--	---	--	--	---	----------------------------

- 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 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/Subsystem/Publications/ForwardHealthCommunications.aspx?panel=Forms>

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

Revised 02/17/2022 (Effective 02/01/2022)

Acne Agents, Topical			Analgesics/Anesthetics, Topical (cont)			Analgesics, Opioids Long-Acting (cont)			Analgesics, Opioids Short-Acting (cont)		
benzoyl peroxide OTC 2.5%, 5%, 10%	SCN	P	lidocaine 5% trans patch		P	hydrocodone ER tablet (Gen-Hysingla ER)		NP	Dilaudid Liquid		NP
clindamycin/benzoyl peroxide (Gen-Duac)		P	diclofenac 1.3% patch (Gen-Flector)		NP	hydrocodone ER capsule (Gen-Zohydro ER)		NP	Nucynta		NP
clindamycin gel (Gen-Cleocin T)		P	diclofenac 1.5% solution (Gen-Pennsaid)		NP	hydromorphone ER		NP	Oxaydo	SCN	NP
clindamycin solution		P	Flector		NP	methadone tablet, solution		NP	Qdolo solution	SCN	NP
erythromycin solution		P	Licart patch	SCN	NP	morphine ER capsules		NP	*Combination products containing any other strength of apap besides 325 mg.		
sodium sulfacetamide-sulfur cleanser & wash	SCN	P	Pennsaid	SCN	NP	oxycodone ER		NP	Analgesics, Opioids Short-Acting – Fentanyl Mucosal Agents		
sulfacetamide sodium suspension		P	Ztlido	SCN	NP	oxymorphone ER		NP	fentanyl citrate oral transmucosal lozenges		NP
Differin 0.1% cream, lotion	SCN	P	Analgesics, Miscellaneous			tramadol ER cap (Gen-Conzip)	SCN	NP	Abstral	SCN	NP
Differin 0.3% gel pump	SCN	P	acetaminophen	SCN	P	tramadol ER tab (Gen-Ryzolt)		NP	Fentora		NP
Retin-A (not micro)		P	acetaminophen chew tab 80mg, 160mg*		P	Belbuca Film		NP	Androgenic Agents		
NOTE: Topical federal legend acne drugs not listed are either non-preferred or noncovered.		NP	aspirin	SCN	P	Conzip	SCN	NP	oxandrolone tablet		P
Alzheimer's Agents			ibuprofen Rx		P	Kadian		NP	testosterone cypionate*		P
donepezil 5mg, 10mg		P	ibuprofen OTC	SCN	P	Nucynta ER		NP	testosterone enanthate*		P
donepezil ODT 5mg, 10mg		P	ibuprofen OTC chew tab 100mg*		P	Oxycontin		NP	testosterone gel, pump (Gen-Vogelxo)		P
memantine solution, tablet, titration pack*		P	naproxen Rx		P	Xtampza ER	SCN	NP	Androgel gel, pump		P
rivastigmine caps		P	naproxen OTC	SCN	P	Zohydro ER	SCN	NP	Depo-testosterone*		P
Exelon patch		P	butalbital/apap		NP	Analgesics, Opioids Short-Acting			methyltestosterone capsule		NP
donepezil 23mg		NP	butalbital/apap/caffeine		NP	codeine/apap		P	testosterone gel, pump (Gen-Androgel)		NP
galantamine tablets		NP	butalbital/apap/caffeine/codeine		NP	hydromorphone		P	testosterone gel (Gen-Testim)	SCN	NP
galantamine ER caps		NP	butalbital/asa/caffeine		NP	hydrocodone/apap 325mg		P	testosterone pump (Gen-Axiron and Fortesta)		NP
galantamine solution		NP	butalbital/asa/caffeine/codeine		NP	hydrocodone/ibuprofen		P	Androderm		NP
memantine ER caps (Gen-Namenda XR)*	DR	NP	Allzital	SCN	NP	morphine		P	Android capsule		NP
rivastigmine patch		NP	Bupap	SCN	NP	oxycodone solution, tablets		P	Fortesta		NP
Namzaric capsule		NP	Esgic		NP	oxycodone/apap 325mg		P	Jatenzo capsule	SCN	NP
Namzaric dose pack		NP	* Products are only covered for members 12 years of age or younger			tramadol 50mg tab		P	Methitest tablet		NP
*memantine products are not covered for members 17 years of age or younger			Analgesics, Opioids Long-Acting			tramadol/apap 325mg		P	Natestim nasal spray	SCN	NP
Analgesics/Anesthetics, Topical			fentanyl transdermal 12mcg, 25mcg, 50mcg, 75mcg, 100mcg		P	benzhydrocodone/apap tab		NP	Testim	SCN	NP
capsaicin OTC	SCN	P	morphine ER tablets		P	butorphanol spray		NP	Testred capsule		NP
diclofenac 1% gel (Gen-Voltaren RX)		P	tramadol ER tab (Gen-Ultram ER)		P	codeine		NP	Vogelxo		NP
diclofenac sodium 1% gel OTC (Gen-Voltaren OTC)		P	Butrans transdermal		P	dihydrocodeine/apap/caffeine		NP	Xyosted		NP
lidocaine 5% ointment		P	Hysingla ER		P	levorphanol		NP	* Policy for obtaining provider-administered drugs applies. Refer to topic #5697.		
			buprenorphine film (Gen-Belbuca Film)		NP	hydrocodone/apap*		NP	Angiotensin Modulators, ACE Inhibitors		
			buprenorphine transdermal		NP	hydromorphone liquid, suppository		NP	benazepril		P
			fentanyl transdermal 37.5mcg, 62.5mcg, 87.5mcg		NP	meperidine		NP	captopril		P
						oxycodone/apap*		NP	enalapril		P
						oxycodone/asa		NP			
						oxycodone capsules, concentrate		NP			
						oxymorphone		NP			
						pentazocine/naloxone		NP			
						tramadol 100mg tab		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

Brand Before Generic Drug Refer to topic #20077

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

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

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

Monthly Changes to the PDL

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

Revised 02/17/2022 (Effective 02/01/2022)

Angiotensin Modulators, ACE Inhibitors (cont)			Angiotensin Modulators, Combination			Antibiotics, GI (cont)			Antibiotics, Tetracyclines (cont)		
enalapril/HCTZ		P	amlodipine/benazepril		P	vancomycin 50mg/ml (Gen-Firvang)	SCN	NP	Solodyn ER 55mg, 65mg, 80mg, 105mg, 115mg		NP
fosinopril		P	amlodipine/olmesartan		P	Antibiotics, Inhaled			Vibramycin syrup, suspension		NP
lisinopril		P	amlodipine/olmesartan/HCTZ		P	Bethkis	SCN	P	Ximino ER	SCN	NP
lisinopril/HCTZ		P	amlodipine/valsartan		P	Kitabis Pak	SCN	P	Antibiotics, Topical		
ramipril		P	amlodipine/valsartan/HCTZ		P	tobramycin (Gen-Tobi)		NP	bacitracin ointment OTC	SCN	P
benazepril/HCTZ		NP	telmisartan/amlodipine		NP	tobramycin (Gen-Bethkis)		NP	bacitracin/polymyxin B oint. OTC	SCN	P
captopril/HCTZ	SCN	NP	trandolapril/verapamil		NP	tobramycin pak (Gen-Kitabis)		NP	mupirocin ointment		P
enalapril solution (Gen-Epaned)*	SCN	NP	Tarka		NP	Cayston		NP	neomycin/bacitracin zinc/ polymyxin B oint OTC	SCN	P
fosinopril/HCTZ		NP	Antibiotics, Beta-Lactam			Tobi		NP	neomycin/bacitracin zinc/ polymyxin B oint OTC	SCN	P
moexipril		NP	amoxicillin		P	Tobi Podhaler		NP	neomycin/bacitracin zinc/ polymyxin B/pramoxine oint. OTC	SCN	P
perindopril		NP	amoxicillin clavulanate chew tabs, tablets, suspension		P	Antibiotics, Macrolides/Ketolides			gentamicin cream, ointment		NP
quinapril		NP	ampicillin		P	azithromycin		P	mupirocin cream		NP
quinapril/HCTZ		NP	cefaclor caps		P	clarithromycin susp, tablets		P	Centany	SCN	NP
trandolapril		NP	cefadroxil caps, susp		P	erythromycin capsule, tablet, granule, suspension		P	Xepi 1% cream	SCN	NP
Epaned *	SCN	NP	cefdinir		P	E.E.S. filmtab, granules		P	Antibiotics, Vaginal		
Qbrelis solution	SCN	NP	cefixime capsule	SCN	P	Eryped		P	clindamycin		P
Prestalia	SCN	NP	cefprozil	SCN	P	Ery-Tab DR		P	Cleocin ovule		P
*Prior Authorization is not required for members 12 years of age and younger.			cefuroxime		P	Erythrocin		P	Clindesse		P
Angiotensin Modulators, ARBs and DRIs			cephalexin caps, susp		P	clarithromycin ER tab		NP	Nuessa	SCN	P
irbesartan		P	cephalexin 750mg	SCN	P	erythromycin filmtab		NP	Vandazole		P
irbesartan/HCTZ		P	dicloxacillin		P	Antibiotics, Tetracyclines			metronidazole		NP
losartan		P	penicillin		P	doxycycline hyclate capsule		P	Anticoagulants		
losartan/HCTZ		P	Suprax capsule, chew tab, suspension	SCN	P	doxycycline hyclate 20mg tabs		P	enoxaparin		P
olmesartan		P	amoxicillin clavulanate XR		NP	doxycycline monohydrate 50mg, 100mg capsules		P	warfarin		P
olmesartan/HCTZ		P	cefaclor susp	SCN	NP	doxycycline monohydrate tabs		P	Eliquis		P
valsartan		P	cefaclor tab ER		NP	minocycline caps		P	Eliquis Dose Pack		P
valsartan/HCTZ		P	cefadroxil tablet		NP	demeclocycline		NP	Pradaxa		P
Entresto		P	cefixime suspension		NP	doxycycline hyclate DR		NP	Xarelto		P
aliskiren tabs (Gen-Tekturna)	SCN	NP	cefepodoxime		NP	doxycycline hyclate tabs		NP	Xarelto Dose Pack		P
candesartan tablets		NP	cephalexin tabs		NP	doxycycline monohydrate susp		NP	fondaparinux		NP
candesartan/HCTZ		NP	Antibiotics, GI			doxycycline monohydrate 75mg, 150mg capsules		NP	Arixtra	SCN	NP
eprosartan mesylate	SCN	NP	metronidazole tablets		P	minocycline tabs		NP	Fragmin		NP
telmisartan		NP	neomycin		P	minocycline ER (Gen-Solodyn)		NP	Savaysa		NP
telmisartan/HCTZ		NP	tinidazole		P	tetracycline		NP	Xarelto suspension		NP
Benicar		NP	vancomycin capsule		P	Doryx DR		NP	Anticonvulsants		
Benicar/HCTZ		NP	Firvang 50mg/ml	SCN	P	Minolira ER	SCN	NP	carbamazepine chew tabs		P
Edarbi		NP	Xifaxan		P	Morgidox caps	SCN	NP	clobazam susp, tabs		P
Edarbyclor		NP	metronidazole capsule		NP	Nuzyra	SCN	NP	clonazepam tablets		P
Micardis		NP	nitazoxanide tablet (Gen-Alinia)		NP	Oracea		NP	divalproex tablets		P
Micardis/HCTZ		NP	Dificid tablet, suspension		NP						
Tekturna		NP	Solosec	SCN	NP						
Tekturna/HCTZ		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

Brand Before Generic Drug Refer to topic #20077

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

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

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

Monthly Changes to the PDL

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

Revised 02/17/2022 (Effective 02/01/2022)

Anticonvulsants (cont)			Anticonvulsants (cont)			Antidepressants, Other (cont)			Antiemetics (cont)		
divalproex ER tablets		P	tiagabine		NP	Marplan		P	Akynzeo		NP
ethosuximide		P	topiramate ER (Gen-Qudexe)		NP	Nardil		P	Emend Powder Packet		NP
gabapentin caps, tabs		P	vigabatrin		NP	bupropion XL (Gen-Forfivo XL)	SCN	NP	Gimoti nasal		NP
lamotrigine tablets		P	Aptiom		SCN NP	desvenlafaxine ER (No Brand)		NP	Sancuso	SCN	NP
lamotrigine dispertabs		P	Banzel	DR	NP	duloxetine 40mg DR caps		NP	Varubi	SCN	NP
lamotrigine Dose Pk		P	Briviact		NP	nefazodone		NP	Zuplenz		NP
lamotrigine ER tablets		P	Diacomit	DR	SCN NP	venlafaxine ER tablets		NP	Antiemetics/Antivertigo		
levetiracetam solution, tabs		P	Elepsia XR		SCN NP	Aplenzin ER		NP	dimenhydrinate OTC	SCN	P
levetiracetam ER tabs		P	Epidiolex	DR	SCN NP	Drizalma sprinkle DR		NP	meclizine RX		P
oxcarbazepine		P	Eprontia solution		SCN NP	Emsam		NP	meclizine OTC	SCN	P
oxcarbazepine suspension		P	Equetro		NP	Fetzima		NP	promethazine tablet, suppository, syrup		P
phenobarbital		P	Fintepla	DR	NP	Forfivo XL		NP	scopolamine patch		P
phenytoin		P	Fycopma		NP	Trintellix		NP	Diclegis	SCN	P
pregabalin (Gen-Lyrica)		P	Lamictal ODT		SCN NP	Viibryd	SCN	NP	doxylamine succinate / pyridoxine (Gen-Diclegis)		NP
primidone		P	Lamictal ODT Starter Kit		SCN NP	Antidepressants, SSRI			Antivert 50mg tablet	SCN	NP
topiramate		P	Lamictal XR		SCN NP	citalopram		P	Bonjesta	SCN	NP
topiramate sprinkle		P	Lamictal XR Starter Kit		SCN NP	escitalopram		P	Transderm-Scop	SCN	NP
valproic acid		P	Nayzilam nasal spray		NP	fluoxetine 10mg, 20mg, 40mg caps		P	Antiemetics, Cannabinoids		
zonisamide		P	Oxtellar XR		SCN NP	fluoxetine solution		P	dronabinol		NP
Carbatrol ER		P	Phenytek		SCN NP	fluvoxamine		P	Antifungals, Oral		
Celontin		P	Qudexy		NP	paroxetine		P	clotrimazole troche		P
Depakote sprinkle		P	Spritam		SCN NP	sertraline concentrate, tablets		P	fluconazole		P
Diastat		P	Sympazan	DR	SCN NP	Paxil suspension		P	griseofulvin suspension		P
Dilantin 30mg cap		P	Trileptal suspension		NP	fluoxetine 90mg caps		NP	griseofulvin ultra-microsize tabs		P
Dilantin Infatab		P	Trokendi XR		SCN NP	fluoxetine 10mg, 20mg, 60mg tabs		NP	itraconazole		P
Felbatol suspension, tablet		P	Valtoco nasal spray		SCN NP	fluvoxamine ER		NP	ketoconazole tablets		P
Gabitril	SCN	P	Vigadrone		NP	paroxetine 7.5mg (Gen-Brisdelle)		NP	nystatin		P
Lamictal Starter Kits	SCN	P	Vimpat		NP	paroxetine CR (Gen-Paxil CR)	SCN	NP	terbinafine		P
Lyrica		P	Vimpat solution		NP	sertraline capsules		NP	Noxafil		P
Peganone		P	Xcopri		SCN NP	Brisdelle	SCN	NP	Sporanox (liquid)		P
Roweepra	SCN	P	Antidepressants, Other			Pexeva	SCN	NP	flucytosine		NP
Sabril	SCN	P	bupropion		P	Sarafem	SCN	NP	griseofulvin microsize tablets		NP
Tegretol tab		P	bupropion SR		P	Antiemetics			itraconazole solution		NP
Tegretol suspension		P	bupropion XL (Gen-Wellbutrin)		P	granisetron		P	posaconazole (Gen-Noxafil)	SCN	NP
Tegretol XR		P	desvenlafaxine ER (Gen-Pristiq)		P	metoclopramide		P	voriconazole suspension, tab		NP
carbamazepine susp, tabs		NP	duloxetine DR 20mg, 30mg, 60mg caps		P	ondansetron tab, ODT, solution		P	Ancobon		NP
carbamazepine ER caps, tabs		NP	mirtazapine		P	prochlorperazine tabs, supp.		P	Brexafemme	SCN	NP
clonazepam ODT		NP	phenelzine		P	trimethobenzamide caps		P	Cresemba		NP
diazepam rectal		NP	tranylcypromine sulfate		P	Emend capsules		P	Oravig		NP
divalproex sprinkle		NP	trazodone		P	aprepitant capsules		NP	Tolsura		NP
felbamate suspension, tablet		NP	venlafaxine		P	metoclopramide ODT		NP	Vfend		NP
lamotrigine ODT		NP	venlafaxine ER capsules		P						
rufinamide (Gen-Banzel)	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

Brand Before Generic Drug Refer to topic #20077

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

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

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

Monthly Changes to the PDL

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

Revised 02/17/2022 (Effective 02/01/2022)

Antifungals, Topical			Antihistamines, Minimally Sedating (cont)			Antiparkinson's Agents (cont)			Antipsychotics (cont)		
ciclopirox solution		P	desloratadine ODT		NP	tolcapone		NP	haloperidol*		P
clotrimazole OTC	SCN	P	fexofenadine OTC	SCN	NP	Azilect		NP	loxapine*		P
clotrimazole Rx		P	levocetirizine solution		NP	Comtan		NP	olanzapine*		P
clotrimazole/betamethasone cream		P	Clarinox		NP	Dhivy tablet	SCN	NP	olanzapine ODT*		P
ketoconazole cream, shampoo		P	Clarinox D		NP	Gocovri ER	SCN	NP	perphenazine*		P
miconazole OTC	SCN	P	Semprex-D	SCN	NP	Inbrija	SCN	NP	pimozide*		P
nystatin		P	Antihypertensives, Sympatholytics			Kynmobi film	SCN	NP	quetiapine*		P
nystatin/triamcinolone cream, ointment		P	clonidine (oral)		P	Neupro patches		NP	quetiapine fumarate ER*		P
tolnaftate OTC cream, powder	SCN	P	guanfacine		P	Nouriaz tablets	SCN	NP	risperidone*		P
Alevazol	SCN	P	methyldopa		P	Ongentys	SCN	NP	thiothixene*	SCN	P
ciclopirox cream, gel, shampoo, suspension		NP	Catapres-TTS		P	Osmolex ER	SCN	NP	trifluoperazine*		P
clotrimazole/betamethasone lotion		NP	clonidine trans patch		NP	Rytary ER	SCN	NP	ziprasidone capsules*		P
econazole nitrate		NP	methyldopa/HCTZ	SCN	NP	Stalevo		NP	Latuda*	SCN	P
ketoconazole foam		NP	Antiparasitics, Topical			Tasmar		NP	Vraylar*	SCN	P
luliconazole cream		NP	permethrin OTC	SCN	P	Xadago	SCN	NP	asenapine (Gen-Saphris)		NP
miconazole/zinc/pet ointment	SCN	NP	permethrin Rx		P	Zelapar		NP	clozapine ODT*		NP
naftifine cream, gel		NP	Eurax Cream		P	Antipsoriatics, Oral			molindone tablets*		NP
oxiconazole cream		NP	Natroba		P	acitretin		P	olanzapine/fluoxetine*		NP
tavaborole solution (Gen-Kerydin)		NP	ivermectin lotion (Gen-Skllice)		NP	methoxsalen		NP	paliperidone ER tablets*		NP
Bensal HP	SCN	NP	malathion		NP	Antipsoriatics, Topical			thioridazine*		NP
Ertaczo		NP	spinosad		NP	calcipotriene cream, ointment, solution		P	Abilify MyCite*		NP
Exelderm	SCN	NP	Crotan Lotion	SCN	NP	Taclonex suspension		P	Adasuve*		NP
Extina	SCN	NP	Eurax Lotion	SCN	NP	Vectical	SCN	P	Caplyta*	SCN	NP
Jublia		NP	Lindane		NP	calcipotriene foam		NP	Fanapt*	SCN	NP
Kerydin	SCN	NP	Sklice		NP	calcipotriene/betamethasone dipropionate ointment		NP	Fazaclo*	SCN	NP
Luzu cream		NP	Antiparkinson's Agents			calcipotriene/betamethasone dipropionate suspension (Gen-Taclonex suspension)	SCN	NP	Lybalvi *		NP
Mentax	SCN	NP	amantadine		P	calcitriol ointment		NP	Nuplazid*	SCN	NP
Naftin	SCN	NP	benztropine		P	tazarotene cream		NP	Rexulti*		NP
Oxistat	SCN	NP	bromocriptine		P	Duobrii lotion		NP	Saphris*		NP
Thera Antifungal cream OTC	SCN	NP	carbidopa/levodopa		P	Enstilar	SCN	NP	Secuado patch*	SCN	NP
Vusion	SCN	NP	carbidopa/levodopa ER		P	Sorilux		NP	Symbyax*		NP
NOTE: Sprays and Kits are not covered.			carbidopa/levodopa ODT		P	Tazorac	SCN	NP	Versacloz*	SCN	NP
Antihistamines, Minimally Sedating			carbidopa/levodopa/entacapone		P	Antipsychotics			*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.		
cetirizine syrup, tablets	SCN	P	carbidopa 25mg tab		P	aripiprazole*		P	Antipsychotics, Injectable		
cetirizine D	SCN	P	pramipexole		P	aripiprazole ODT*	SCN	P	fluphenazine decanoate *		P
levocetirizine tablets		P	ropinirole		P	amitriptyline/perphenazine*	SCN	P	haloperidol decanoate*		P
loratadine syrup, tablets	SCN	P	selegiline		P	chlorthalimide*		P	Abilify Maintena*		P
loratadine D	SCN	P	trihexyphenidyl		P	clozapine*		P	Aristada*	SCN	P
desloratadine		NP	entacapone		NP	fluphenazine*	SCN	P	Aristada Initio ER*	SCN	P
			pramipexole ER		NP						
			rasagiline		NP						
			ropinirole ER		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

Brand Before Generic Drug Refer to topic #20077

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

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

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

Monthly Changes to the PDL

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

Revised 02/17/2022 (Effective 02/01/2022)

Antipsychotics, Injectable (cont)			BPH Agents, Alpha Reductase Inhibitors (cont)			Bile Salts			Bronchodilators, Beta Agonists (cont)		
Haldol Decanoate*		P	dutasteride/tamsulosin	SCN	NP	ursodiol		P	albuterol neb (2.5mg/3ml)		P
Invega Sustenna*		P	BPH Agents, Andrenergic			Bylway	SCN	NP	albuterol neb (100mg/20ml)		P
Invega Trinza*		P	alfuzosin		P	Chenodal	SCN	NP	albuterol neb low-dose (0.63mg/3ml)		P
Perseris ER*	SCN	P	doxazosin		P	Cholbam	SCN	NP	albuterol neb low-dose (1.25mg/3ml)		P
Risperdal Consta*		P	tamsulosin		P	Livmarli solution	SCN	NP	terbutaline tablets		P
Zyprexa Relprevv*		P	terazosin		P	Ocaliva	SCN	NP	Proair HFA		P
ziprasidone vial*		NP	silodosin capsule		NP	Reltone	SCN	NP	Serevent	SCN	P
Invega Hafyera*		NP	Cardura XL		NP	Bladder Relaxant Preparations			Ventolin HFA	SCN	P
*Policy for obtaining provider-administered drugs applies. Refer to topic #5697.			Rapaflo		NP	oxybutynin tablet, ER tablet, syrup		P	arformoterol (Gen-Brovana)	SCN	NP
Antivirals, Influenza			Beta Blockers			solifenacin tablet		P	formoterol (Gen-Perforomist)		NP
oseltamivir		P	acebutolol		P	Toviaz		P	levabuterol nebulizer		NP
rimantadine		NP	atenolol		P	darifenacin ER		NP	levabuterol HFA		NP
Relenza	SCN	NP	atenolol/chlorthalidone		P	tolterodine		NP	metaproterenol		NP
Tamiflu	SCN	NP	bisoprolol		P	tolterodine ER		NP	Arcapta		NP
Xofluza		NP	bisoprolol/HCTZ		P	tropium		NP	Brovana	SCN	NP
Antivirals, Other			carvedilol		P	tropium ER		NP	Perforomist	SCN	NP
acyclovir		P	labetalol		P	Detrol		NP	ProAir Digihaler		NP
valacyclovir		P	metoprolol		P	Detrol LA		NP	ProAir Respiclick		NP
famciclovir		NP	metoprolol ER		P	Gelnique		NP	Proventil HFA		NP
Antivirals, Topical			nadolol		P	Gemtesa	SCN	NP	Striverdi Respimat		NP
acyclovir ointment		P	propranolol		P	Myrbetriq ER		NP	Xopenex HFA	SCN	NP
Zovirax cream		P	propranolol ER		P	Oxytrol	SCN	NP	* NOTE: Product added temporarily during the public health COVID-19 emergency		
acyclovir cream		NP	sotalol		P	Vesicare LS		NP	Calcium Channel Blocking Agents		
Denavir	SCN	NP	betaxolol		NP	Bone Resorption Suppression			amlodipine		P
Xerese		NP	carvedilol ER		NP	alendronate		P	diltiazem		P
Anxiolytics			metoprolol/HCTZ		NP	calcitonin-salmon nasal		P	diltiazem ER capsules	SCN	P
alprazolam ER		P	nadolol bendroflumethiazide tablets		NP	ibandronate		P	nifedipine ER		P
alprazolam intensol, tablet		P	nebivolol (Gen-Bystolic)		NP	teriparatide		P	nifedipine IR		P
buspirone		P	pindolol		NP	alendronate sodium solution	SCN	NP	nimodipine		P
chlordiazepoxide		P	propranolol/HCTZ	SCN	NP	raloxifene		NP	verapamil tablets		P
diazepam solution, tablet		P	timolol		NP	risedronate		NP	verapamil ER tablet		P
lorazepam intensol, tablet		P	Bystolic	SCN	NP	Actonel	SCN	NP	verapamil SR tablet		P
alprazolam ODT		NP	Coreg CR	SCN	NP	Atelvia	SCN	NP	diltiazem ER tablets	SCN	NP
clorazepate		NP	Hemangeol*	SCN	NP	Boniva	SCN	NP	felodipine ER		NP
diazepam intensol		NP	Innderal XL		NP	Forteo		NP	isradipine		NP
meprobamate		NP	Innopran XL		NP	Fosamax Plus D		NP	nicardipine		NP
oxazepam		NP	Kapsargo sprinkles		NP	Tymlos		NP	nisoldipine	SCN	NP
Lozeev XR		NP	Sotylize		NP	Bronchodilators, Beta Agonists			verapamil ER capsule	SCN	NP
BPH Agents, Alpha Reductase Inhibitors			*Prior Authorization not required for members under 1 year of age.			albuterol		P	verapamil SR capsule		NP
dutasteride		P				albuterol ER	SCN	P			
finasteride		P				albuterol HFA*		P			
						albuterol neb (2.5mg/0.5ml)		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

Brand Before Generic Drug Refer to topic #20077

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

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

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

Monthly Changes to the PDL

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

Revised 02/17/2022 (Effective 02/01/2022)

Calcium Channel Blocking Agents (cont)			Cytokine and CAM Antagonists (cont)			Fluoroquinolones (cont)			Glucocorticoids, Inhaled (cont)			
verapamil ER PM	SCN	NP	Orencia subQ		P	levofloxacin tablets		P	fluticasone/salmeterol (Gen-Advair Diskus)	SCN	NP	
verapamil 360mg capsule		NP	Otezla		P	ciprofloxacin suspension		NP	fluticasone/salmeterol (Gen-Airduo Respiclick)		NP	
Cardizem LA		NP	Xeljanz tablets		P	levofloxacin solution		NP	AirDuo Digihaler		NP	
Katerzia suspension	SCN	NP	Actemra subQ	SCN	NP	moxifloxacin		NP	AirDuo Respiclick		NP	
Matzim LA		NP	Cosentyx		NP	ofloxacin		NP	Alvesco Inhaler	SCN	NP	
Nymalize		NP	Cimzia		NP	Baxdela tablet	SCN	NP	Armonair Digihaler	SCN	NP	
COPD Agents			Enspryng	SCN	NP	Cipro suspension		NP	Arnuity Ellipta	SCN	NP	
ipratropium nebulizer		P	Kevzara		NP	GI Motility, Chronic – Constipation			Asmanex HFA		NP	
ipratropium/albuterol nebulizer		P	Kineret		NP	Amitiza		P	Breo Ellipta Inhaler	SCN	NP	
Anoro Ellipta	SCN	P	Olumiant		NP	Linzess	SCN	P	Breztri Aerosphere HFA		NP	
Atrovent HFA		P	Rinvoq ER		NP	Movantik		P	Qvar Redihaler		NP	
Combivent Respimat		P	Siliq		NP	lubiprostone caps (Gen-Amitiza)	SCN	NP	Trelegy Ellipta	SCN	NP	
Spiriva		P	Simponi subQ		NP	Motegrity		NP	Wixela Inhalation	SCN	NP	
Stiolto Respimat		P	Skyrizi		NP	Relistor tablet		NP	Glucocorticoids, Oral			
Bevespi Aerosphere		NP	Stelara subQ		NP	Symproic		NP	budesonide EC capsule		P	
Breztri Aerosphere HFA		NP	Taltz		NP	Trulance	SCN	NP	dexamethasone elixir, intensol, solution, tablet		P	
Daliresp		NP	Tremfya		NP	GI Motility, Chronic – Diarrhea			hydrocortisone		P	
Duaklir Pressair	SCN	NP	Xeljanz solution		NP	Lotronex	SCN	P	methylprednisolone Dose PK		P	
Incruse Ellipta	SCN	NP	Xeljanz XR		NP	Xifaxan 550mg		P	methylprednisolone tablet		P	
Lonhala Magnair Kits	SCN	NP	Epinephrine, Self-Injected			alosetron		NP	prednisolone solution 5mg/5ml	SCN	P	
Seebri Neohaler		NP	epinephrine (AG EpiPen & AG EpiPen JR)	SCN	P	Viberzi	SCN	NP	prednisolone solution 15mg/5ml		P	
Spiriva Respimat		NP	EpiPen JR	SCN	P	Glucagon Agents			prednisolone sodium phosphate ODT	SCN	P	
Trelegy Ellipta	SCN	NP	EpiPen	SCN	P	glucagen 1mg hypokit & vial		P	prednisolone sodium phosphate solution 25mg/5ml		P	
Tudorza Pressair		NP	epinephrine (Gen-EpiPen & EpiPen JR)		NP	glucagon 1mg emerg. kit (Lilly)		P	prednisone dose pack, intensol, solution, tablet		P	
Utibron Neohaler		NP	epinephrine (Gen-Adrenaclick)		NP	Baqsimi nasal spray		P	cortisone		NP	
Yupelri	SCN	NP	Symjepi		NP	diazoxide suspension	SCN	NP	dexamethasone Dose PK		NP	
Cough and Cold – Narcotic Liquids			Erythropoiesis Stimulating Proteins			glucagon 1mg emerg.kit (Fresenius)		NP	prednisolone solution 10mg/5ml (Gen-Millipred)		NP	
guaifenesin/codeine		P	Aranesp		P	Gvoke	SCN	NP	prednisolone solution 20mg/5ml (Gen-Veripred)		NP	
phenylephrine/promethazine/codeine		P	Epogen		P	Proglycem suspension	SCN	NP	Alkindi sprinkle	SCN	NP	
promethazine/codeine		P	Retacrit	SCN	P	Zegalogue	SCN	NP	Decadron	SCN	NP	
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.				Fibromyalgia			Glucocorticoids, Inhaled					
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.				duloxetine DR 20mg, 30mg, 60mg caps				P	budesonide respules		P	
Cytokine and CAM Antagonists			Savella			Advair Diskus	SCN	P	Advair HFA	SCN	P	
Enbrel		P	duloxetine 40mg DR caps		NP	Asmanex		P	Dulera		P	
Humira		P	Fluoroquinolones			Flovent Diskus	SCN	P	Flovent HFA	SCN	P	
			ciprofloxacin			Pulmicort Flexhaler		P	Symbicort		P	
						budesonide/formoterol (Gen-Symbicort)	SCN	NP	Dexpak		NP	
									Dxevo tablet	SCN	NP	
									Emflaza	SCN	NP	
									Hemady	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

Brand Before Generic Drug Refer to topic #20077

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

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

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

Monthly Changes to the PDL

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

Revised 02/17/2022 (Effective 02/01/2022)

Glucocorticoids, Oral (cont)		
Medrol tablet		NP
Millipred dose pack, solution, tabs	SCN	NP
Ortikos ER capsule	SCN	NP
Rayos tablet DR	SCN	NP
TaperDex	SCN	NP
Tarpeyo DR capsule	DR	SCN
Gout Agents		
allopurinol		P
indomethacin		P
naproxen Rx		P
probenecid		P
probenecid/colchicine		P
Colcrys		P
colchicine capsule (Gen-Mitigare)		NP
colchicine tablet (Gen-Colcrys)		NP
febuxostat tab (Gen-Uloric)	SCN	NP
naproxen suspension		NP
Gloperba solution	SCN	NP
Mitigare	SCN	NP
Uloric		NP
Growth Hormone		
Genotropin		P
Norditropin	SCN	P
Humatrope		NP
Nutropin AQ		NP
Omnitrope		NP
Saizen		NP
Serostim	SCN	NP
Skytrofa	SCN	NP
Zomacton	SCN	NP
Zorbtive	SCN	NP
Headache Agents, Acute Treatment		
Ubrelvy	SCN	P
Emgality 100mg*		NP
Nurtec ODT	SCN	NP
Reyvow		NP
* NOTE: Emgality 100mg strength only for cluster headaches		
Headache Agents, Preventative Treatment		
Ajovy		P
Emgality 120mg		P
Aimovig		NP

Headache Agents, Preventative Treatment (cont)		
Nurtec ODT	SCN	NP
Qulipta		NP
Headache Agents, Triptans Injectable		
sumatriptan injectable		P
Zembrace	SCN	NP
Headache Agents, Triptans Non-Injectable		
eletriptan		P
naratriptan		P
rizatriptan		P
sumatriptan tablets		P
zolmitriptan ODT, tablets		P
Imitrex nasal spray		P
Zomig nasal spray	SCN	P
almotriptan		NP
frovatriptan		NP
sumatriptan nasal spray (Gen-Imitrex nasal spray)		NP
sumatriptan/naproxen tablets		NP
zolmitriptan nasal spray (Gen-Zomig nasal spray)		NP
Onzetra	SCN	NP
Tosymra nasal spray	SCN	NP
Treximet	SCN	NP
H. Pylori		
lansoprazole/amoxicillin/clarithromycin		P
Pylera		P
Talicia		NP
Helildac	SCN	NP
Omeclamox Pak	SCN	NP
Hepatitis B Agents		
entecavir tablet		P
lamivudine	SCN	P
Epivir HBV	SCN	P
Hepsera		P
adefovir dipivoxal		NP
Baraclude solution		NP
Vemlidy		NP
Hepatitis C Agents		
sofosbuvir/velpatasvir (Gen-Eplclusa)	SCN	P
Mavyret		P

Hepatitis C Agents (cont)		
ledipasvir/sofosbuvir (Gen-Harvoni)	SCN	NP
Eplclusa		NP
Harvoni		NP
Sovaldi		NP
Vosevi		NP
Zepatier		NP
Hepatitis C Agents-Interferon		
Pegasys	SCN	P
Peg-Intron Redipen		P
Hepatitis C Agents-Ribavirin		
ribavirin		P
H2 Antagonists		
cimetidine solution, tablet		P
famotidine RX tablet		P
famotidine RX suspension*		NP
nizatidine capsules, solution		NP
*Prior Authorization not required for members 18 years of age and younger		
Hypoglycemics, Alpha-Glucosidase Inhibitors		
acarbose		P
Glyset		P
miglitol		NP
Hypoglycemics, DPP-4 Inhibitors		
Janumet		P
Janumet XR		P
Januvia		P
Jentadueto		P
Tradjenta		P
alogliptin		NP
alogliptin/metformin		NP
alogliptin/pioglitazone		NP
Glyxambi		NP
Jentadueto XR		NP
Kazano		NP
Kombiglyze XR		NP
Nesina		NP
Onglyza		NP
Oseni		NP
Hypoglycemics, GLP 1		
Byetta		P
Trulicity		P

Hypoglycemics, GLP 1 (cont)		
Victoza	SCN	P
Adlyxin		NP
Bydureon BCise		NP
Rybelsus tablets	SCN	NP
Ozempic	SCN	NP
Hypoglycemics, GLP 1-Combinations		
Soliqua		NP
Xultophy	SCN	NP
Hypoglycemics, Insulins		
insulin aspart U-100 cartridge/pen/vial (Gen-Novolog)	SCN	P
insulin aspart/protamine pen/vial (Gen-Novolog Mix)	SCN	P
insulin lispro Jr Kwikpen (Gen-Humalog Jr Kwikpen)		P
insulin lispro mix (Gen-Humalog Mix)		P
insulin lispro U-100 Kwikpen/Vial (Gen-Humalog Kwikpen/Vial)	SCN	P
Humalog Jr. Kwikpen		P
Humalog Mix		P
Humalog U-100 Cartridge/Kwikpen/Vial		P
Humulin 70-30		P
Humulin N U-100 Kwikpen/Vial		P
Humulin R U-100 Vial		P
Humulin R U-500 Kwikpen/Vial		P
Novolog Mix	SCN	P
Novolog U-100 Cartridge/Pen/Vial	SCN	P
Admelog		NP
Afrezza	SCN	NP
Apidra		NP
Fiasp	SCN	NP
Humalog U-200 Kwikpen		NP
Lyumjev		NP
Novolin	SCN	NP
Hypoglycemics, Insulins Long-Acting		
Lantus		P
Levemir	SCN	P
insulin glargine-yfgn U-100 vial & pen (Gen-Semglee(YFGN))	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

Brand Before Generic Drug Refer to topic #20077

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

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

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

Monthly Changes to the PDL

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

Revised 02/17/2022 (Effective 02/01/2022)

Hypoglycemics, Insulins Long-Acting (cont)			Hypoglycemics, Sulfonylureas (cont)			Leukotriene Modifiers			Lipotropics, Other (cont)					
Basaglar		NP	glipizide/metformin		NP	montelukast chew tab, tablets		P	fluvastatin ER		NP			
Semglee U-100 vial & pen	SCN	NP	tolbutamide	SCN	NP	montelukast granules		NP	Altprev	SCN	NP			
Semglee (YFGN) U-100 vial & pen	SCN	NP	Hypoglycemics, Thiazolidinediones			zafirlukast		NP	Caduet		NP			
Toujeo Solostar		NP	pioglitazone		P	zileuton ER		NP	Ezallor sprinkles		NP			
Toujeo Max Solostar		NP	pioglitazone-glimepiride		NP	Zyflo	SCN	NP	Lescol XL		NP			
Tresiba Flextouch	SCN	NP	pioglitazone-metformin		NP	Lipotropics, ACL Inhibitors			Livalo	SCN	NP			
Tresiba vial	SCN	NP	Actoplus MET		NP	Nexletol	SCN	NP	Vytorin		NP			
Hypoglycemics, Meglitinides			Avandia	SCN	NP	Lipotropics, Apo-B Inhibitors			Zypitamag	SCN	NP			
repaglinide		P	Immunomodulators, Asthma			Lipotropics, Bile Acid Sequestrants			Lipotropics, PCSK9 Inhibitors					
nateglinide		NP	Fasenra		P	Juxtapid	SCN	NP	Praluent	SCN	NP			
repaglinide/metformin		NP	Xolair	SCN	P	Lipotropics, Bile Acid Sequestrants			Repatha		NP			
Hypoglycemics, Other			Nucala	SCN	NP	cholestyramine		P	Methotrexate					
metformin		P	Immunomodulators, Atopic Dermatitis			colestipol tablet		P	methotrexate tablet		P			
metformin ER (Gen-GlucoPhage)		P	Elidel		P	Welchol		P	methotrexate PF vial		P			
Farxiga		P	Protopic	SCN	P	colesevelam (Gen-Welchol)		NP	methotrexate vial		P			
Invokamet		P	pimecrolimus cream	SCN	NP	colestipol granules		NP	Otrexup Auto Injector	SCN	NP			
Invokana		P	tacrolimus		NP	Colestid granules		NP	Rasuvo Auto Injector		NP			
Jardiance		P	Dupixent		NP	Lipotropics, Fibrin Acids			Reditrex	SCN	NP			
Symlin		P	Eucrisa 2%	SCN	NP	fenofibrate tab (Gen-Tricor)		P	Trexall tablet	SCN	NP			
Synjardy		P	Opzelura		NP	fenofibric acid (Gen-Trilipix)		P	Movement Disorders					
Welchol		P	Immunomodulators, Topical			gemfibrozil		P	tetrabenazine	DR	P			
Xigduo XR		P	immunomod 5% cream		P	fenofibrate (Gen-Antara, Fenoglide, Lipofen, Lofibra)		NP	Austedo	DR	P			
colesevelam (Gen-Welchol)		NP	imiquimod 3.75% cream		NP	fenofibric acid (Gen-Fibracor)		NP	Ingrezza	DR	SCN	P		
metformin ER (Gen-Glumetza ER)		NP	Zyclara		NP	Antara	SCN	NP	Multiple Sclerosis Agents					
metformin ER OSM-tab		NP	Intranasal Rhinitis Agents			Fenoglide		NP	dalfampridine ER	DR	SCN	P		
metformin solution (Gen-Riomet solution)	SCN	NP	azelastine (Gen-Astelin)		P	Lipofen	SCN	NP	dimethyl fumarate DR caps (Gen-Tecfidera)	SCN	P			
Cycloset		NP	fluticasone RX		P	Lipotropics, Niacin			Aubagio		P			
Glumetza ER		NP	ipratropium		P	niacin ER tabs (RX)		P	Avonex		P			
Invokamet XR		NP	Beconase AQ	SCN	P	Lipotropics, Omega-3 Acids			Betaseron		P			
Qtern		NP	azelastine (Gen-Astepro)		NP	omega-3 acid ethyl esters		P	Copaxone 20mg, 40mg		P			
Segluromet		NP	azelastine/fluticasone (Gen-Dymista)		NP	icosapent ethyl (Gen-Vascepa)		NP	Gilenya		P			
Steglatro		NP	flunisolide		NP	Vascepa	SCN	NP	Rebif	SCN	P			
Steglujan		NP	mometasone furoate spray*		NP	Lipotropics, Other			Tecfidera	SCN	P			
Synjardy XR		NP	olopatadine nasal spray		NP	atorvastatin		P	glatiramer	SCN	NP			
Trijardy XR		NP	Astepro		NP	ezetimibe		P	Bafiertam DR capsule	SCN	NP			
Hypoglycemics, Sulfonylureas			Dymista		NP	lovastatin		P	Extavia		NP			
glimepiride		P	Omnaris	SCN	NP	pravastatin		P	Glatopa		NP			
glipizide		P	Qnasl		NP	rosuvastatin		P	Kesimpta		NP			
glipizide ER		P	Xhance	SCN	NP	simvastatin		P	Mavenclad	SCN	NP			
glyburide		P	Zetonna	SCN	NP	amlodipine/atorvastatin		NP	Mayzent		NP			
glyburide/metformin		P	*Prior Authorization not required for members 6 years of age and younger.						ezetimibe/simvastatin		NP	Plegridy	SCN	NP
						fluvastatin		NP	Ponvory		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

Brand Before Generic Drug Refer to topic #20077

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

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

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

Monthly Changes to the PDL

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

Revised 02/17/2022 (Effective 02/01/2022)

Multiple Sclerosis Agents (cont)				NSAIDs (cont)				Ophthalmics, Allergic Conjunctivitis (cont)				Ophthalmics, Antibiotic-Steroid Combinations (cont)			
Vumerity DR capsule		SCN	NP	ketoprofen ER caps		SCN	NP	Alocril			NP	Pred-G ointment			NP
Zeposia capsule			NP	ketorolac nasal spray (Gen-Sprix)		SCN	NP	Alomide			NP	Tobradex ST			NP
Neuropathic Pain				meclofenamate		SCN	NP	Bepreve			NP	Zylet			NP
duloxetine DR 20mg, 30mg, 60mg caps			P	mefenamic acid			NP	Lastacaft			NP	Ophthalmics, Anti-Inflammatories			
gabapentin			P	meloxicam capsule (Gen-Vivlodex)		SCN	NP	Zerviate drops		SCN	NP	dexamethasone			P
pregabalin (Gen-Lyrica)			P	naproxen CR			NP	Ophthalmics, Antibacterial				diclofenac eye drop			P
Lyrica			P	naproxen/esomeprazole DR (Gen-Vimovo)			NP	ciprofloxacin solution			P	fluorometholone			P
duloxetine 40mg DR caps			NP	naproxen EC		SCN	NP	erythromycin			P	flurbiprofen			P
pregabalin ER (Gen-Lyrica CR)	DR		NP	naproxen sodium Rx			NP	gentamicin drops			P	ketorolac LS 0.4%			P
Drizalma sprinkle DR			NP	naproxen suspension		SCN	NP	moxifloxacin (Gen-Vigamox)			P	prednisolone acetate			P
Gralise	DR	SCN	NP	oxaprozin			NP	ofloxacin			P	Durezol			P
Horizant	DR		NP	piroxicam			NP	polymyxin/trimethoprim			P	Flarex			P
Lyrica CR	DR		NP	tolmetin			NP	sulfacetamide solution			P	FML Forte			P
NSAIDs				Cambia		SCN	NP	tobramycin			P	Ilievro			P
celecoxib cap			P	Duexis		SCN	NP	Ciloxan ointment			P	Lotemax suspension			P
diclofenac potassium 50mg tab			P	Elyxyb solution		SCN	NP	Tobrex ointment			P	Maxidex			P
diclofenac sodium			P	Indocin suppository, suspension		SCN	NP	bacitracin			NP	Pred Mild		SCN	P
diclofenac ER			P	Lofena 25mg tablet		SCN	NP	bacitracin/polymyxin			NP	bromfenac			NP
flurbiprofen			P	Nalfon		SCN	NP	gatifloxacin			NP	difluprednate emulsion (Gen-Durezol)			NP
ibuprofen Rx			P	Naprelan CR			NP	levofloxacin			NP	loteprednol (Gen-Lotemax)			NP
ibuprofen OTC chew tab 100mg*			P	Relafen DS		SCN	NP	moxifloxacin (Gen-Moxeza)		SCN	NP	omnipred			NP
ibuprofen OTC		SCN	P	Sprix		SCN	NP	neomycin/bacitracin/polymyxin ointment			NP	prednisolone sodium phosphate			NP
indomethacin caps			P	Tivorbex		SCN	NP	neomycin/polymyxin/gramicidin drops			NP	Acuvail			NP
ketorolac			P	Vimovo		SCN	NP	sulfacetamide ointment			NP	Bromsite			NP
meloxicam tablets			P	Vivlodex		SCN	NP	triple antibiotic			NP	FML Liquifilm			NP
nabumetone			P	Qmiiz		SCN	NP	Azasite			NP	FML S.O.P.		SCN	NP
naproxen Rx			P	Zipsor		SCN	NP	Besivance			NP	Inveltys		SCN	NP
naproxen DS Rx			P	Zorvolex		SCN	NP	Moxeza			NP	Lotemax			NP
naproxen OTC		SCN	P	* Products are only covered for members 12 years of age or younger				Natacyn			NP	Nevanac			NP
sulindac			P	Ophthalmics, Allergic Conjunctivitis				Zymaxid			NP	Prolensa			NP
diclofenac sodium/misoprostol tablet			NP	cromolyn			P	Ophthalmics, Antibiotic-Steroid Combinations				Ophthalmics, Anti-Inflammatory / Immunomodulator			
diclofenac solution			NP	ketorolac 0.5%			P	neomycin/polymyxin/dexamethasone			P	Restasis		SCN	P
diffunisal			NP	ketotifen OTC		SCN	P	sulfacetamide/prednisolone			P	cyclosporine eye emulsion (Gen-Restasis)			NP
etodolac			NP	olopatadine 0.1% (Gen-Patanol)			P	Blephamide		SCN	P	Cequa solution			NP
etodolac XL			NP	Alaway OTC		SCN	P	Pred-G drops			P	Eysuvis eye drops		SCN	NP
fenoprofen		SCN	NP	Alrex			P	Tobradex ointment, suspension			P	Restasis Multidose		SCN	NP
ibuprofen-famotidine (Gen-Duexis)		SCN	NP	Pazeo			P	neomycin/bacitracin/polymyxin/HC			NP	Tyrvaya nasal spray		SCN	NP
indomethacin ER			NP	azelastine			NP	neomycin/polymyxin/HC drops			NP	Xiidra			NP
ketoprofen			NP	bepotastine drops (Gen-Bepreve)			NP	tobramycin/dexamethasone			NP				
				epinastine			NP	Blephamide S.O.P.		SCN	NP				
				olopatadine 0.2% (Gen-Pataday)			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

Brand Before Generic Drug Refer to topic #20077

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

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

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

Monthly Changes to the PDL

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

Revised 02/17/2022 (Effective 02/01/2022)

Ophthalmics, Glaucoma-Beta Blockers		
carteolol		P
levobunolol		P
timolol (Gen-Timoptic/XE)		P
Betoptic S		P
betaxolol		NP
timolol (Gen-Istalol)		NP
timolol (Gen-Timoptic Ocodose)		NP
Istalol		NP
Timoptic Ocodose		NP
Ophthalmics, Glaucoma-Other		
brimonidine 0.2%		P
dorzolamide		P
dorzolamide w/timolol		P
pilocarpine		P
Alphagan P 0.15%	SCN	P
Azopt 1%		P
Combigan	SCN	P
Isopto Carpine 2%		P
Rhopressa	SCN	P
Rocklatan		P
Simbrinza		P
apraclonidine		NP
brimonidine tartrate 0.15%		NP
brinzolamide 1% drops (Gen-Azopt)		NP
Alphagan P 0.1%	SCN	NP
Cosopt PF		NP
lopidine		NP
Ophthalmics, Glaucoma-Prostaglandins		
latanoprost		P
Travatan Z		P
bimatoprost 0.03% 2.5ml, 5ml		NP
bimatoprost 0.03% 7.5ml		NP
travoprost (Gen-Travatan Z)		NP
Lumigan 0.01% 2.5ml, 5ml	SCN	NP
Lumigan 0.01% 7.5ml	SCN	NP
Vyzulta solution		NP
Xelpros		NP
Zioptan		NP
Opioid Dependency Agents-Buprenorphine		
buprenorphine/naloxone tab	DR	P

Opioid Dependency Agents-Buprenorphine (cont)			
Sublocade*	DR	SCN	P
Suboxone Film	DR	SCN	P
Zubsolv	DR	SCN	P
buprenorphine tabs (without naloxone)	DR		NP
buprenorphine/naloxone film	DR		NP
Bunavail	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
naloxone nasal spray (Gen-Narcan spray)			NP
Kloxxado spray		SCN	NP
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 solution/suspension			P
ofloxacin			P
Cipro HC			P
Ciprodex			P
Coly-mycin S			P
ciprofloxacin		SCN	NP
ciprofloxacin/dexamethasone suspension (Gen-Ciprodex)			NP
ciprofloxacin/fluocinolone (Gen-Otovel)			NP
Otovel			NP
Otics, Anti-Infectives & Anesthetics			
acetic acid			P
acetic acid HC			NP

Pancreatic Enzymes		
Zenpep DR	SCN	P
Creon DR		NP
Pancreaze DR		NP
Pertzye DR 4,000*		NP
Pertzye DR 8,000, 16,000, 24,000 Units		NP
Viokace		NP
*Prior Authorization not required for members 1 year of age and younger.		
Phosphate Binders		
calcium acetate 667mg cap, tab		P
Phoslyra	SCN	P
Renagel		P
lanthanum carbonate		NP
sevelamer (Gen-Renagel)		NP
sevelamer (Gen-Renvela)		NP
Auryxia	SCN	NP
Fosrenol		NP
Magnebind		NP
Renvela		NP
Velphoro	SCN	NP
Platelet Aggregation Inhibitors		
aspirin	SCN	P
aspirin/dipyridamole		P
clopidogrel		P
dipyridamole		P
prasugrel		P
Brilinta		P
Yosprala	SCN	NP
Zontivity		NP
Prenatal Vitamins		
prenatal vitamin plus low iron tablet	SCN	P
Completenate tablet chew	SCN	P
Elite-OB caplet	SCN	P
Folivane-OB capsule	SCN	P
M-Natal Plus tablet	SCN	P
PNV 29-1 tablet	SCN	P
Preplus CA-FE 27mg-FA 1mg tablet	SCN	P
Pretab 29mg-1mg tablet	SCN	P
Purefe OB plus capsule	SCN	P
Purefe plus capsule	SCN	P

Prenatal Vitamins (cont)			
SE-Natal 19 chewable tablet	SCN	P	
SE-Natal 19 tablet	SCN	P	
Taron-C DHA capsule	SCN	P	
Thrivite 19 tablet	SCN	P	
Thrivite RX tablet	SCN	P	
Tricare Prenatal tablet	SCN	P	
Trinatal RX 1 tablet	SCN	P	
Virt-C DHA softgel	SCN	P	
Virt-PN DHA softgel	SCN	P	
Vol-Plus 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.			
Proton Pump Inhibitors			
esomeprazole magnesium		P	
lansoprazole DR RX		P	
omeprazole DR RX		P	
pantoprazole		P	
Nexium DR packet		P	
Prilosec suspension		P	
Protonix suspension		P	
dexlansoprazole capsules (Gen-Dexilant DR)	SCN	NP	
esomeprazole DR packet (Gen-Nexium DR packet)	SCN	NP	
esomeprazole strontium		NP	
lansoprazole ODT solutab (Gen-Prevacid solutab)		NP	
omeprazole-bicarb RX		NP	
pantoprazole suspension (Gen-Protonix suspension)		NP	
rabeprazole		NP	
Dexilant DR 30mg, 60mg		NP	
Prevacid Solutab		NP	
Zegerid		NP	
Pulmonary Arterial Hypertension			
ambrisentan tablet		P	
sildenafil tablet	DR	P	
tadalafil tablet	DR	SCN	P
Opsumit		P	
Tracleer tablet		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

Brand Before Generic Drug Refer to topic #20077

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

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

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

Monthly Changes to the PDL

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

Revised 02/17/2022 (Effective 02/01/2022)

Pulmonary Arterial Hypertension (cont)				Skeletal Muscle Relaxants (cont)				Steroids, Topical Medium (cont)				Steroids, Topical Very High (cont)			
bosentan tablet (Gen-Tracleer tablet)			NP	tizanidine tablet			P	hydrocortisone valerate			NP	Olux-E		SCN	NP
sildenafil suspension	DR	SCN	NP	carisoprodol			NP	prednicarbate cream	SCN		NP	Ultravate lotion		SCN	NP
Adempas			NP	carisoprodol compound			NP	prednicarbate ointment			NP	Stimulants			
Alyq	DR		NP	chlorzoxazone 375mg, 750mg tablets			NP	Beser lotion	SCN		NP	dexamethylphenidate	DR		P
Orenitram ER		SCN	NP	cyclobenzaprine 7.5mg tablet			NP	Cloderm			NP	methylphenidate tab (Gen-Ritalin)	DR		P
Revatio suspension	DR		NP	cyclobenzaprine ER capsule			NP	Cordran Tape			NP	methylphenidate CD	DR		P
Tracleer suspension			NP	metaxalone			NP	Cutivate lotion	SCN		NP	methylphenidate chew tab (Gen-Methylin chew)	DR		P
Tyvaso		SCN	NP	orphenadrine			NP	Dermatop			NP	methylphenidate ER tab (Gen-Metadate ER and Methylin ER)	DR		P
Uptravi			NP	tizanidine capsule			NP	Luxiq	SCN		NP	methylphenidate LA caps (Gen-Ritalin LA)	DR		P
Ventavis			NP	Amrix			NP	Pandel	SCN		NP	methylphenidate sol (Gen-Methylin sol)	DR		P
Sedative Hypnotics				Flexmid			NP	Synalar	SCN		NP	Aptensio XR	DR		P
eszopiclone			P	Lorzone	SCN		NP	Steroids, Topical High				Concerta	DR		P
melatonin tablets			P	Metaxall	SCN		NP	betamethasone valerate			P	Daytrana	DR	SCN	P
temazepam 15mg, 30mg			P	Norgesic Forte tablet	SCN		NP	triamcinolone acetonide			P	Focalin	DR		P
triazolam			P	Soma			NP	amcinonide			NP	Focalin XR	DR		P
zaleplon			P	Steroids, Topical Low				betamethasone dipropionate			NP	Methylin solution	DR	SCN	P
zolpidem			P	hydrocortisone			P	desoximetasone			NP	Quillichew ER	DR	SCN	P
Rozerem			P	hydrocortisone OTC	SCN		P	diflorasone diacetate			NP	Quillivant XR	DR	SCN	P
doxepin tablet (Gen-Silenor)		SCN	NP	Derma-Smoother-FS	SCN		P	fluocinonide			NP	Vyvanse	DR		P
estazolam			NP	Scalpicin 1% liquid	SCN		P	halcinonide	0.1 % Gen-Halog)	SCN	NP	Vyvanse chewable	DR		P
flurazepam		SCN	NP	alclometasone dipropionate cream, ointment			NP	triamcinolone aerosol spray			NP	amphetamine ER susp (Gen-Adzenys ER susp)	DR	SCN	NP
ramelteon tab (Gen-Rozerem)			NP	desonide cream, ointment, lotion			NP	Diprolone ointment			NP	dextroamphetamine-amphetamine*	DR		NP
temazepam 7.5mg, 22.5mg			NP	fluocinolone oil			NP	Halog cream, ointment, solution			NP	dextroamphetamine-amphetamine ER	DR		NP
zolpidem ER			NP	hydrocortisone acetate/urea			NP	Kenalog aerosol spray			NP	amphetamine sulfate (Gen-Evekeo)*	DR		NP
zolpidem SL			NP	hydrocortisone/min oil/pet ointment			NP	Sernivo 0.05% spray	SCN		NP	dexamethylphenidate ER caps	DR		NP
Belsomra			NP	Capex Shampoo	SCN		NP	Topicort 0.05% ointment			NP	dextroamphetamine*	DR		NP
Dayvigo			NP	Desonate			NP	Topicort 0.25% spray			NP	dextroamphetamine ER	DR		NP
Edluar			NP	Texacort	SCN		NP	Trianax	SCN		NP	dextroamphetamine sol*	DR	SCN	NP
Intermezzo			NP	Steroids, Topical Medium				Steroids, Topical Very High				methylphenidate ER caps (Gen-Aptensio XR)	DR		NP
Silenor			NP	fluticasone cream, ointment			P	clobetasol cream, ointment, solution, gel, emollient			P	methylphenidate ER tablet (Gen-Concerta)	DR		NP
Sickle Cell Anemia				mometasone furoate			P	halobetasol propionate cream, ointment			P				
hydroxyurea			P	betamethasone valerate foam			NP	Clobex lotion, shampoo	SCN		P				
Droxia			P	clocortolone			NP	betamethasone dipropionate aug			NP				
Endari		SCN	P	flurandrenolide lotion, cream			NP	clobetasol foam, lotion, shampoo, spray			NP				
Siklos		SCN	P	flurandrenolide ointment	SCN		NP	halobetasol propionate foam			NP				
Oxbryta		SCN	NP	fluticasone lotion			NP	Apexicon E	SCN		NP				
Skeletal Muscle Relaxants				fluocinolone cream	SCN		NP	Bryhali lotion			NP				
baclofen			P	fluocinolone solution, ointment			NP	Clobex spray	SCN		NP				
chlorzoxazone 500mg tablet			P	hydrocortisone butyrate cream, ointment, lotion, solution			NP	Impeklo lotion	SCN		NP				
cyclobenzaprine tablet			P												
dantrolene sodium			P												
methocarbamol			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

Brand Before Generic Drug Refer to topic #20077

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

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

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

Monthly Changes to the PDL

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

Revised 02/17/2022 (Effective 02/01/2022)

Stimulants (cont)			
methylphenidate ER 72mg tab (Gen-Relexxii)	DR	SCN	NP
methamphetamine	DR		NP
Adderall	DR	SCN	NP
Adderall XR	DR		NP
Adhansia XR	DR	SCN	NP
Adzenys ER susp	DR	SCN	NP
Adzenys XR ODT	DR	SCN	NP
Azstarys	DR	SCN	NP
Cotempla XR	DR	SCN	NP
Dexedrine*	DR	SCN	NP
Dyanavel XR	DR	SCN	NP
Evekeo*	DR		NP
Evekeo ODT*	DR		NP
Jornay PM	DR	SCN	NP
Mydayis ER	DR		NP
Relexxii ER	DR	SCN	NP
Ritalin LA	DR		NP
Zenzedi*	DR		NP

*Prior Authorization not required for members 6 years of age and younger.

Stimulants, Related Agents			
atomoxetine			P
clonidine ER			P
guanfacine ER			P
Qelbree ER		SCN	NP

Stimulants, Related Agents – Wake Promoting			
armodafinil			P
modafinil			P
Sunosi		SCN	NP

Ulcerative Colitis			
balsalazide			P
sulfasalazine			P
Apriso			P
Azulfidine			P
Canasa			P
Lialda			P
Rowasa Kits		SCN	P
Uceris ER			P
budesonide ER (Gen-Uceris ER)			NP
mesalamine DR cap (Gen-Delzicol)			NP
mesalamine DR tab (Gen-Lialda)			NP

Ulcerative Colitis (cont)			
mesalamine ER caps (Gen-Apriso)		SCN	NP
mesalamine kits		SCN	NP
mesalamine rectal			NP
Asacol HD			NP
Delzicol			NP
Dipentum			NP
Pentasa			NP
Uceris foam			NP
Zeposia capsule			NP

Brand Name Drugs with Generic Copay	
Drug Name	Start Date
Adderall	01/01/2021
Adderall XR	01/01/2021
Alphagan P 0.15%	01/01/2012
Carbatrol ER	01/01/2021
Catapres-TTS	01/01/2014
Colcrys	01/01/2022
Concerta	01/01/2018
Depakote sprinkle	01/01/2021
Diastat	01/01/2022
Differin 0.1% cream	01/01/2012
Differin 0.3% gel pump	02/01/2017
Felbatol suspension	01/01/2021
Felbatol tablet	01/01/2021
Humalog Jr Kwipen	05/01/2020
Humalog Mix	05/01/2020
Humalog U-100 Kwipen/Vial	07/01/2019
Novolog Mix	01/01/2020
Novolog U-100 Pen/Vial	01/01/2020
Retin-A (not micro)	07/01/2016
Suboxone film	07/01/2020
Tegretol suspension	01/01/2016
Tegretol tablet	01/01/2016
Tegretol XR	01/01/2021
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

Brand Before Generic Drug Refer to topic #20077

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

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

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

Monthly Changes to the PDL