

MEDICAID PHARMACY PRIOR AUTHORIZATION ADVISORY COMMITTEE
Recommendations Summary
November 4, 2020

In Attendance:

	Committee Member	Yes or No
1	Rosanne Barber	Yes
2	Ward Brown, M.D.	No
3	Catherine Decker, Pharm.D.	Yes
4	Kevin Izard, M.D.	Yes
5	Steve Maike, RPh	Yes
6	William Raduege, M.D.	Yes
7	Robert Rohloff, M.D.	Yes
8	Pat Towers	No
9	Alicia Walker, Pharm.D.	No
10	Michael Witkovsky, M.D.	Yes

**This meeting is traditionally in-person, but was held via webinar on November 4, 2020, given the COVID-19 outbreak*

NOVEMBER 2020 THERAPEUTIC DRUG CLASS

ALZHEIMER'S AGENTS
ANTICONSULSANTS
ANTIDEPRESSANTS, OTHER
ANTIDEPRESSANTS, SSRIs
ANTIHISTAMINES, MINIMALLY SEDATING
ANTIHYPERTENSIVES, SYMPATHOLYTICS
ANTIHYPERTENSIVES, ORAL
ANTIPARKINSON'S AGENTS
ANTIPSORIATICS, ORAL
ANTIPSORIATICS, TOPICAL
ANTIPSYCHOTICS
ANXIOLYTICS
BILE SALTS
BRONCHODILATORS, BETA AGONIST
COPD AGENTS
COUGH AND COLD/NARCOTICS
CYTOKINE AND CAM ANTAGONISTS
EPINEPHRINE, SELF-INJECTED
ERYTHROPOIESIS STIMULATING PROTEINS
GLUCOCORTICOIDS, INHALED
GLUCOCORTICOIDS, ORAL
HISTAMINE II RECEPTOR BLOCKERS
IMMUNOMODULATORS FOR ATOPIC DERMATITIS
IMMUNOMODULATORS, TOPICAL
INTRANASAL RHINITIS AGENTS
LEUKOTRIENE MODIFIERS
METHOTREXATE
MOVEMENT DISORDERS – *NEW CLASS*
NEUROPATHIC PAIN (ANALGESICS/ANESTHETICS TOPICAL AND FIBROMYALGIA)
NSAIDS
OPHTHALMIC ANTIBIOTIC/STEROID COMBINATIONS
OPHTHALMIC ANTIBIOTICS
OPHTHALMIC ANTIINFLAMMATORIES
OPHTHALMIC ANTIINFLAMMATORIES/IMMUNOMODULATORS
OPHTHALMICS FOR ALLERGIC CONJUNCTIVITIS
OPHTHALMICS, GLAUCOMA AGENTS
OTIC ANTIBIOTICS
OTIC ANTI-INFECTIVES
SEDATIVE HYPNOTICS
STERIODS, TOPICAL-HIGH POTENCY
STERIODS, TOPICAL-LOW POTENCY
STERIODS, TOPICAL-MEDIUM POTENCY
STERIODS, TOPICAL-VERY HIGH POTENCY
STIMULANTS AND RELATED AGENTS

Recommendations Summary:

The following drug classes presented for review had no recommended changes since the November 6, 2019 Wisconsin Medicaid Pharmacy PA Advisory Committee (PAC) meeting and were approved by the PAC in a block vote.

Drug Classes with no recommended changes included in the Committee block vote:

- Alzheimer's Agents
 - Antidepressants, Other
 - Antidepressants, SSRIs
 - Antihypertensives, Sympatholytics
 - Antipsoriatics, Oral
 - Bile Salts
 - Cough and Cold, Narcotic
 - Histamine II Receptor Blocker
 - Immunomodulators, Topical
 - Leukotriene Modifiers
 - Methotrexate
 - Ophthalmics Anti-Inflammatory/Immunomodulator
 - Otic Anti-Infectives & Anesthetics
 - Steroids, Topical Low
 - Steroids, Topical Medium
 - Steroids, Topical Very High
-
- Discussion: No discussion
 - Kevin Izard made a motion to accept staff recommendations as presented.
 - Second – William Raduege
 - Six members were in favor of the motion. Roseanne Barber was not present.
 - Motion passes

The following drug classes presented for review had recommended changes since the November 6, 2019 Wisconsin Medicaid Pharmacy PA Advisory Committee (PAC) meeting and were approved by the PAC in a block vote.

Drug Classes with Preferred/Non-Preferred status changes included in the Committee block vote:

- Anticonvulsants
- Antihistamines, Minimally Sedating
- Antihyperuricemics
- Antiparkinson's Agents
- Antipsoriatics, Topical
- Antipsychotics
- Anxiolytics
- Bronchodilators, Beta Agonist
- COPD Agents
- Cytokine and Cam Antagonists
- Epinephrine, Self-Injected
- Erythropoiesis Stimulating Proteins
- Glucocorticoids, Inhaled
- Glucocorticoids, Oral
- Immunomodulators, Atopic Dermatitis
- Intranasal Rhinitis Agents
- Movement Disorders – New Class
- Neuropathic Pain (Analgesics/Anesthetics, Topical and Fibromyalgia)
- NSAIDS
- Ophthalmic Antibiotic-Steroid Combinations
- Ophthalmic Antibiotics
- Ophthalmics, Anti-Inflammatories
- Ophthalmics For Allergic Conjunctivitis
- Ophthalmics, Glaucoma Agents
- Otic Antibiotics
- Sedative Hypnotics
- Steroids, Topical High
- Stimulants and Related Agents

- Discussion:
 - Anticonvulsants: Kelsey Brundage stated that the Department recognizes the importance of quick access to emergency seizure medications. Non-preferred drugs in this class are available through STAT PA as well as the Expedited Emergency Supply process to address this issue.
 - Bronchodilators, Beta Agonist: Kelsey Brundage stated that a number of albuterol HFA products were moved to preferred in response to the COVID-19 pandemic and possible shortages of these medications. The Department will continue to monitor the availability of these products and when appropriate, return certain products to non-preferred status.
 - Immunomodulators, Atopic Dermatitis: Kelsey Brundage noted that in the closed session, the Committee discussed the testimony from the morning session regarding the submission of prior authorization requests for Dupixent for atopic dermatitis. Patient-based clinical reviews occur with prior authorization requests that are reviewed and

evaluated by clinical consultants who adjudicate these cases, and case-by-case exceptions are considered.

- Steve Maike made a motion to accept staff recommendations as presented.
 - Second – Roseanne Barber
 - All members were in favor of the motion
 - Motion passes

Wisconsin Medicaid ANTICONVULSANTS		Recommendations				
Brand Name	Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
CLONAZEPAM (ORAL)	19.5%	P	P			
PHENOBARBITAL TABLET (ORAL)	0.7%	P	P			
CLONAZEPAM ODT (ORAL)	0.2%	NP	NP			
PHENOBARBITAL ELIXIR (ORAL)	0.2%	P	P			
DIAZEPAM DEVICE (AG) (RECTAL)	0.3%	P	P			
DIAZEPAM (AG) (RECTAL)	0.0%	P	P			
NAYZLAM (NASAL)	0.1%	NP	NP			
VALTOCO (NASAL)	0.0%	NR	NP			
TRILEPTAL SUSPENSION (ORAL)	0.0%	NP	NP			
TEGRETOL XR (ORAL)	0.1%	NP	P			
CARBATROL (ORAL)	0.1%	NP	P			
TEGRETOL SUSPENSION (ORAL)	0.1%	P	P			
TEGRETOL TABLET (ORAL)	1.1%	P	P			
OXCARBAZEPINE TABLETS (ORAL)	4.1%	P	P			
CARBAMAZEPINE TABLET (ORAL)	0.1%	NP	NP			
CARBAMAZEPINE CHEWABLE TABLET (ORAL)	0.4%	P	P			
EQUETRO (ORAL)	0.0%	NP	NP			
CARBAMAZEPINE ER (GENERIC CARBATROL) (ORAL)	0.8%	P	NP			
CARBAMAZEPINE XR (ORAL)	0.3%	P	NP			
CARBAMAZEPINE XR (AG) (ORAL)	0.4%	P	NP			
CARBAMAZEPINE SUSPENSION (ORAL)	0.0%	NP	NP			
OXCARBAZEPINE SUSPENSION (ORAL)	0.5%	P	P			
OXTELLAR XR (ORAL)	0.2%	NP	NP			
APTiom (ORAL)	0.1%	NP	NP			
FELBATOL TABLET (ORAL)	0.1%	NP	P			
FELBATOL SUSPENSION (ORAL)	0.0%	NP	P			
DEPAKOTE SPRINKLE (ORAL)	0.2%	NP	P			
PRIMIDONE (AG) (ORAL)	0.0%	P	P			
DIVALPROEX TABLET (ORAL)	4.5%	P	P			
VALPROIC ACID SOLUTION (ORAL)	0.9%	P	P			
PRIMIDONE (ORAL)	0.8%	P	P			
PHENYTOIN SUSPENSION (AG) (ORAL)	0.0%	P	P			
DILANTIN INFATAB (ORAL)	0.0%	P	P			
PHENYTOIN SUSPENSION (ORAL)	0.0%	P	P			
DIVALPROEX ER (ORAL)	6.3%	P	P			
CELONTIN (ORAL)	0.0%	P	P			
VALPROIC ACID CAPSULE (ORAL)	0.1%	P	P			
PEGANONE (ORAL)	0.0%	P	P			
PHENYTOIN CAPSULE (ORAL)	0.8%	P	P			
PHENYTOIN CHEWABLE TABLET (ORAL)	0.1%	P	P			
ETHOSUXIMIDE CAPSULE (AG) (ORAL)	0.0%	P	P			
DILANTIN 30 MG CAPSULE (ORAL)	0.1%	P	P			
DIVALPROEX SPRINKLE (AG) (ORAL)	0.0%	P	NP			
PHENYTOIN EXT CAPSULE (GENERIC PHENYTEK) (ORAL)	0.1%	P	P			
DIVALPROEX SPRINKLE (ORAL)	1.2%	P	NP			
PHENYTEK (ORAL)	0.0%	NP	NP			
ETHOSUXIMIDE SYRUP (ORAL)	0.2%	P	P			
ETHOSUXIMIDE CAPSULE (ORAL)	0.2%	P	P			
FELBAMATE TABLET (ORAL)	0.3%	P	NP			
FELBAMATE SUSPENSION (ORAL)	0.2%	P	NP			
XCOPRI TITRATION PAK (ORAL)	0.0%	NR	NP			
QUDEXY XR (ORAL)	0.0%	NP	NP			
GABITRIL (ORAL)	0.0%	P	P			
LAMOTRIGINE TABLET (ORAL)	21.4%	P	P			
TOPIRAMATE TABLETS (ORAL)	13.5%	P	P			
LEVETIRACETAM SOLUTION (ORAL)	2.8%	P	P			
ZONISAMIDE (ORAL)	2.0%	P	P			
LEVETIRACETAM TABLETS (ORAL)	8.1%	P	P			
TOPIRAMATE ER (QUDEXY) (AG) (ORAL)	0.0%	NP	NP			
CLOBAZAM TABLET (ORAL)	0.8%	P	P			
LAMICTAL TABLET DOSE PACK (ORAL)	0.0%	P	P			
LEVETIRACETAM ER (ORAL)	0.5%	P	P			
LAMOTRIGINE DISPERSIBLE TABLET (ORAL)	0.5%	P	P			
TOPIRAMATE SPRINKLE (ORAL)	0.3%	P	P			
BANZEL TABLET (ORAL)	0.1%	NP	NP			
CLOBAZAM SUSPENSION (ORAL)	0.4%	P	P			
LAMICTAL ODT DOSE PACK (ORAL)	0.0%	NP	NP			
LAMOTRIGINE XR (ORAL)	0.7%	NP	P			
TIAGABINE (ORAL)	0.0%	NP	NP			
SPRITAM (ORAL)	0.0%	NP	NP			
VIMPAT TABLET (ORAL)	1.4%	NP	NP			
VIMPAT SOLUTION (ORAL)	0.2%	NP	NP			
FYCOMPA TABLET (ORAL)	0.2%	NP	NP			
LAMOTRIGINE ODT DOSE PACK (ORAL)	0.0%	NP	NP			
FYCOMPA TABLET (ORAL)	0.0%	NP	Alternate			
LAMICTAL ODT (ORAL)	0.1%	NP	NP			
BANZEL SUSPENSION (ORAL)	0.1%	NP	NP			
LAMICTAL XR (ORAL)	0.1%	NP	NP			
LAMOTRIGINE ODT (ORAL)	0.1%	NP	NP			
TROKENDI XR (ORAL)	0.3%	NP	NP			
LAMOTRIGINE TABLET DOSE PACK (ORAL)	0.0%	P	P			
FYCOMPA SUSPENSION (ORAL)	0.0%	NP	NP			
SYMPAZAN (ORAL)	0.0%	NP	NP			
FYCOMPA SUSPENSION (ORAL)	0.0%	NP	Alternate			
LAMICTAL XR DOSE PACK (ORAL)	0.0%	NP	NP			
XCOPRI TABLET (ORAL)	0.0%	NR	NP			
BRVIACT TABLET (ORAL)	0.2%	NP	NP			
BRVIACT SOLUTION (ORAL)	0.0%	NP	NP			
EPIDIOLEX (ORAL)	0.4%	NP	P			
SABRL POWDER PACK (ORAL)	0.1%	P	P			
SABRL TABLET (ORAL)	0.0%	P	P			
DIACOMIT POWDER PACK (ORAL)	0.0%	NP	NP			
DIACOMIT CAPSULE (ORAL)	0.0%	NP	NP			
FINTEPLA (ORAL)	0.0%	NR	NP			
VIGADRONE 500 MG POWDER PACKET	0.0%	NP	NP			
VIGABATRIN 500 MG POWDER PACKET	0.0%	NP	NP			
VIGABATRIN TABLET (ORAL)	0.0%	NP	NP			

Wisconsin Medicaid		Recommendations				
ANTIHISTAMINES, MINIMALLY SEDATING						
Brand Name	Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
LORATADINE TABLETS OTC (ORAL)	34.2%	P	P			
CETIRIZINE TABLETS OTC (ORAL)	47.3%	P	P			
CETIRIZINE SOLUTION (ORAL)	9.9%	P	P			
LEVOCETIRIZINE TABLETS (ORAL)	0.4%	NP	P			
CETIRIZINE SOLUTION OTC (ORAL)	3.6%	P	P			
LORATADINE SOLUTION OTC (ORAL)	2.3%	P	P			
FEXOFENADINE 60, 180 MG OTC (ORAL)	0.3%	NP	NP			
DES Loratadine (ORAL)	0.0%	NP	NP			
LORATADINE-D OTC (ORAL)	1.5%	P	P			
CETIRIZINE-D OTC (ORAL)	0.3%	P	P			
CLARINEX-D 12 HOUR (ORAL)	0.0%	NP	NP			
LEVOCETIRIZINE SOLUTION (ORAL)	0.0%	NP	NP			
CLARINEX TABLET (ORAL)	0.0%	NP	NP			
DES Loratadine ODT (ORAL)	0.0%	NP	NP			

Wisconsin Medicaid		Recommendations				
ANTIHYPERURICEMICS						
Brand Name	Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
COLCRYS (ORAL)	0.0%	NP	NP			
ALLOPURINOL (ORAL)	79.7%	P	P			
COLCHICINE TABLET (AG) (ORAL)	0.3%	NP	NP			
PROBENECID / COLCHICINE (ORAL)	1.8%	P	P			
MITIGARE (ORAL)	0.0%	NP	P			
PROBENECID (ORAL)	0.8%	P	P			
FEBUXOSTAT (ORAL)	0.0%	NP	NP			
MITIGARE (ORAL)	0.0%	NP	Alternate			
COLCHICINE TABLET (ORAL)	0.1%	NP	NP			
ULORIC (ORAL)	4.2%	NP	NP			
COLCHICINE CAPSULE (AG) (ORAL)	13.1%	P	NP			
GLOPERBA (ORAL)	0.0%	NR	NP			

Wisconsin Medicaid		Recommendations					
ANTIPARKINSON'S AGENTS		Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
Brand Name							
AZILECT (ORAL)		0.0%	NP	NP			
ZELAPAR (ORAL)		0.0%	NP	NP			
ROPINIROLE (ORAL)		27.2%	P	P			
PRAMIPEXOLE (ORAL)		17.4%	P	P			
AMANTADINE SYRUP (ORAL)		0.4%	P	P			
BENZTROPINE (ORAL)		33.3%	P	P			
TRIHXYPHENIDYL TABLET (ORAL)		5.1%	P	P			
CARBIDOPA / LEVODOPA (ORAL)		8.1%	P	P			
AMANTADINE CAPSULE (ORAL)		2.6%	P	P			
CARBIDOPA / LEVODOPA ER (ORAL)		1.8%	P	P			
TRIHXYPHENIDYL ELIXIR (ORAL)		0.2%	P	P			
SELEGILINE CAPSULE (ORAL)		0.0%	P	P			
NEUPRO (TRANSDERM)		0.5%	NP	NP			
AMANTADINE TABLET (ORAL)		1.6%	P	P			
SELEGILINE TABLET (ORAL)		0.0%	P	P			
ROPINIROLE ER (ORAL)		0.2%	NP	NP			
CARBIDOPA / LEVODOPA ODT (ORAL)		0.1%	P	P			
CARBIDOPA/LEVODOPA/ENTACAPONE (ORAL)		0.1%	P	P			
ENTACAPONE (ORAL)		0.1%	NP	NP			
COMTAN (ORAL)		0.0%	NP	NP			
RASAGILINE (ORAL)		0.2%	NP	NP			
BROMOCRIPTINE (ORAL)		0.7%	P	P			
STALEVO (ORAL)		0.0%	NP	NP			
OSMOLEX ER (ORAL)		0.0%	NP	NP			
RYTARY (ORAL)		0.3%	NP	NP			
PRAMIPEXOLE ER (ORAL)		0.0%	NP	NP			
CARBIDOPA (ORAL)		0.1%	P	P			
XADAGO (ORAL)		0.0%	NP	NP			
INBRUA (INHALATION)		0.0%	NP	NP			
KYNMOBI (SUBLINGUAL)		0.0%	NR	NP			
NOURIANZ (ORAL)		0.0%	NR	NP			
GOCOVRI (ORAL)		0.0%	NP	NP			
TOLCAPONE (ORAL)		0.0%	NP	NP			

Wisconsin Medicaid		Recommendations					
ANTIPSORIATICS, TOPICAL		Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
Brand Name							
TACLONEX SCALP (TOPICAL)		10.2%	P	P			
VECTICAL (TOPICAL)		1.0%	P	P			
SORILUX (TOPICAL)		0.0%	NP	NP			
CALCIPOTRIENE SOLUTION (TOPICAL)		9.2%	P	P			
ENSTILAR (TOPICAL)		3.5%	NP	NP			
CALCIPOTRIENE CREAM (TOPICAL)		48.6%	P	P			
CALCIPOTRIENE OINTMENT (TOPICAL)		23.5%	P	P			
CALCIPOTRIENE/BETAMETHASONE SUSPENSION (AG) (TOPICAL)		0.3%	NR	NP			
CALCITRIOL OINTMENT (TOPICAL)		0.0%	NP	NP			
CALCIPOTRIENE/BETAMETHASONE OINTMENT (AG) (TOPICAL)		1.0%	NP	NP			
CALCIPOTRIENE/BETAMETHASONE OINTMENT (TOPICAL)		1.6%	NP	NP			
DUOBRII (TOPICAL)		1.3%	NP	NP			
CALCIPOTRIENE/BETAMETHASONE SUSPENSION (TOPICAL)		0.0%	NR	NP			

Wisconsin Medicaid		Recommendations					
ANTIPSYCHOTICS		Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
Brand Name							
CLOZAPINE (AG) (ORAL)	0.0%	P	P				
RISPERIDONE TABLET (ORAL)	12.9%	P	P				
QUETIAPINE TABLETS (ORAL)	26.6%	P	P				
OLANZAPINE TABLET (ORAL)	8.6%	P	P				
ARIPIPRAZOLE TABLET (ORAL)	19.9%	P	P				
QUETIAPINE ER (ORAL)	1.7%	P	P				
ZIPRASIDONE CAPSULE (ORAL)	3.9%	P	P				
QUETIAPINE ER (AG) (ORAL)	0.0%	P	P				
RISPERIDONE SOLUTION (ORAL)	0.4%	P	P				
OLANZAPINE ODT (ORAL)	0.6%	P	P				
CLOZAPINE (ORAL)	2.3%	P	P				
RISPERIDONE ODT (ORAL)	0.3%	P	P				
LATUDA (ORAL)	6.8%	P	P				
SAPHRIS (SUBLINGUAL)	0.4%	NP	NP				
PALIPERIDONE (ORAL)	0.9%	NP	NP				
FANAPT TABLET (ORAL)	0.1%	NP	NP				
PALIPERIDONE (AG) (ORAL)	0.2%	NP	NP				
CLOZAPINE ODT (ORAL)	0.1%	NP	NP				
ARIPIPRAZOLE SOLUTION (ORAL)	0.1%	P	P				
CLOZAPINE ODT (AG) (ORAL)	0.0%	NP	NP				
VRAYLAR (ORAL)	2.5%	NP	P				
VRAYLAR (ORAL)	0.0%	NP	Alternate				
REXULTI (ORAL)	1.1%	NP	NP				
CAPLYTA (ORAL)	0.1%	NR	NP				
SECUADO (TRANSDERMAL)	0.0%	NR	NP				
ARIPIPRAZOLE ODT (ORAL)	0.2%	P	P				
ABILIFY MYCITE (ORAL)	0.0%	NP	NP				
NUPLAZID TABLET (ORAL)	0.0%	NP	NP				
NUPLAZID CAPSULE (ORAL)	0.0%	NP	NP				
VERSACLOZ (ORAL)	0.0%	NP	NP				
OLANZAPINE/FLUOXETINE (ORAL)	0.0%	NP	NP				
SYMBYAX (ORAL)	0.0%	NP	NP				
HALDOL DECANOATE (INTRAMUSC)	0.0%	P	P				
HALOPERIDOL DECANOATE (INJECTION)	0.9%	P	P				
FLUPHENAZINE DECANOATE (INJECTION)	0.3%	P	P				
ZIPRASIDONE (INTRAMUSC)	0.0%	NR	NP				
RISPERDAL CONSTA (INTRAMUSC)	0.7%	P	P				
ZYPREXA RELPREVV (INTRAMUSC)	0.0%	P	P				
INVEGA SUSTENNA (INTRAMUSC)	2.0%	P	P				
PERSERIS (SUBCUTANEOUS)	0.0%	NP	P				
ARISTADA INITIO (INTRAMUSC)	0.0%	P	P				
ABILIFY MAINTENA (INTRAMUSC.)	1.0%	P	P				
ARISTADA (INTRAMUSC)	0.7%	P	P				
INVEGA TRINZA (INTRAMUSC)	0.2%	P	P				
HALOPERIDOL LACTATE CONC (ORAL)	0.1%	P	P				
HALOPERIDOL (ORAL)	2.3%	P	P				
PERPHENAZINE (ORAL)	0.2%	P	P				
LOXAPINE (ORAL)	0.3%	P	P				
TRIFLUOPERAZINE (ORAL)	0.1%	P	P				
THIORIDAZINE (ORAL)	0.0%	NP	NP				
AMITRIPTYLINE / PERPHENAZINE (ORAL)	0.0%	P	P				
THIOTHIXENE (ORAL)	0.1%	P	P				
PIMOZIDE (ORAL)	0.0%	P	P				
ADASUVE (INHALATION)	0.0%	NP	NP				
FLUPHENAZINE TABLET (ORAL)	0.6%	P	P				
FLUPHENAZINE ELIXIR/SOLN (ORAL)	0.0%	P	P				
CHLORPROMAZINE (ORAL)	0.5%	P	P				
MOLINDONE (ORAL)	0.0%	NP	NP				

Wisconsin Medicaid		Recommendations					
ANXIOLYTICS		Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
Brand Name							
DIAZEPAM TABLET (ORAL)	9.9%	P	P				
ALPRAZOLAM TABLET (ORAL)	32.0%	P	P				
LORAZEPAM TABLET (ORAL)	25.5%	P	P				
CHLORDIAZEPOXIDE (ORAL)	0.6%	P	P				
BUSPIRONE (ORAL)	29.8%	P	P				
ALPRAZOLAM ER (ORAL)	1.0%	P	P				
LORAZEPAM INTENSOL (ORAL)	0.2%	P	P				
DIAZEPAM SOLUTION (ORAL)	0.5%	P	P				
DIAZEPAM INTENSOL (ORAL)	0.1%	NP	NP				
ALPRAZOLAM ODT (ORAL)	0.0%	NP	NP				
OXAZEPAM (ORAL)	0.0%	NP	NP				
CLORAZEPATE (ORAL)	0.3%	P	NP				
ALPRAZOLAM INTENSOL (ORAL)	0.0%	P	P				
MEPROBAMATE (ORAL)	0.0%	NP	NP				

Wisconsin Medicaid		Recommendations					
BRONCHODILATORS, BETA AGONIST		Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
Brand Name							
SEREVENT (INHALATION)	0.3%	P	P				
STRIVERDI RESPIMAT (INHALATION)	0.0%	NP	NP				
ARCAPTA NEOHALER (INHALATION)	0.0%	NP	NP				
ALBUTEROL NEB SOLN 100 MG/20 ML (INHALATION)	0.1%	P	P				
ALBUTEROL NEB SOLN 2.5 MG/3 ML (INHALATION)	7.7%	P	P				
ALBUTEROL NEB SOLN 2.5 MG/0.5 ML (INHALATION)	0.0%	P	P				
ALBUTEROL NEB SOLN 0.63, 1.25 MG (INHALATION)	0.5%	P	P				
LEVALBUTEROL NEB SOLN (INHALATION)	0.2%	NP	NP				
LEVALBUTEROL NEB SOLN CONC (INHALATION)	0.0%	NP	NP				
METAPROTERENOL SYRUP (ORAL)	0.0%	NP	NP				
ALBUTEROL SYRUP (ORAL)	0.0%	P	P				
ALBUTEROL ER (ORAL)	0.0%	P	P				
ALBUTEROL TABLET (ORAL)	0.1%	P	P				
TERBUTALINE (AG) (ORAL)	0.0%	P	P				
TERBUTALINE (ORAL)	0.0%	P	P				
PERFORMIST (INHALATION)	0.1%	NP	NP				
BROVANA (INHALATION)	0.1%	NP	NP				
PROAIR HFA (INHALATION)	36.2%	P	P				
XOPENEX HFA (INHALATION)	0.1%	NP	NP				
VENTOLIN HFA (INHALATION)	0.4%	NP	P				
PROAIR RESPICLICK (INHALATION)	0.0%	NP	NP				
ALBUTEROL HFA (PROAIR) (AG) (INHALATION)	24.6%	P	P				
ALBUTEROL HFA (PROVENTIL) (AG) (INHALATION)	1.4%	P	P				
ALBUTEROL HFA (PROAIR) (INHALATION)	16.8%	P	P				
ALBUTEROL HFA (VENTOLIN) (AG) (INHALATION)	8.1%	P	P				
ALBUTEROL HFA (PROVENTIL) (INHALATION)	0.9%	P	P				
LEVALBUTEROL HFA (AG) (INHALATION)	0.3%	NP	NP				
PROVENTIL HFA (INHALATION)	2.1%	P	NP				
PROAIR DIGIHALER (INHALATION)	0.0%	NR	NP				

Wisconsin Medicaid		Recommendations					
COPD AGENTS		Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
Brand Name							
SPIRIVA (INHALATION)	41.4%	P	P				
ATROVENT HFA (INHALATION)	2.9%	P	P				
TUDORZA PRESSAIR (INHALATION)	0.3%	NP	NP				
IPRATROPIUM NEBULIZER (INHALATION)	1.1%	P	P				
ANORO ELLIPTA (INHALATION)	1.6%	NP	P				
IPRATROPIUM / ALBUTEROL (INHALATION)	19.8%	P	P				
INCRUSE ELLIPTA (INHALATION)	1.2%	NP	NP				
COMBIVENT RESPIMAT (INHALATION)	18.5%	P	P				
SPIRIVA RESPIMAT (INHALATION)	3.1%	NP	NP				
BEVESPIAEROSPHERE (INHALATION)	3.0%	P	NP				
STIOLTO RESPIMAT (INHALATION)	5.3%	P	P				
UTIBRON NEOHALER (INHALATION)	0.0%	NP	NP				
SEEBRI NEOHALER (INHALATION)	0.0%	NP	NP				
DALIRESP (ORAL)	1.7%	NP	NP				
YUPELRI (INHALATION)	0.0%	NP	NP				
LONHALA MAGNAIR (INHALATION)	0.0%	NP	NP				
DUAKLIR PRESSAIR (INHALATION)	0.0%	NR	NP				

Wisconsin Medicaid		Recommendations					
CYTOKINE AND CAM ANTAGONISTS		Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
Brand Name							
XELJANZ (ORAL)	2.8%	NP	NP				
OTEZLA (ORAL)	7.6%	P	P				
ENBREL KIT (INJECTION)	0.4%	P	P				
HUMIRA PEN KIT (INJECTION)	0.0%	P	Alternate				
HUMIRA PEN KIT (INJECTION)	48.0%	P	P				
ENBREL VIAL (SUBCUTANEOUS)	0.0%	P	P				
HUMIRA KIT (INJECTION)	0.0%	P	Alternate				
HUMIRA KIT (INJECTION)	5.8%	P	P				
ENBREL SYRINGE (INJECTION)	1.9%	P	P				
ENBREL MINI CARTRIDGE (SUBCUTANE.)	1.4%	P	P				
HUMIRA PEN KIT (INJECTION)	0.0%	P	Alternate				
HUMIRA KIT (INJECTION)	0.0%	P	Alternate				
ENBREL PEN (INJECTION)	10.9%	P	P				
KINERET (INJECTION)	0.4%	NP	NP				
HUMIRA PEN KIT (INJECTION)	0.0%	P	Alternate				
HUMIRA KIT (INJECTION)	0.0%	P	Alternate				
HUMIRA PEN KIT (INJECTION)	0.0%	P	Alternate				
HUMIRA KIT (INJECTION)	0.0%	P	Alternate				
ORENCIA SYRINGE (SUBCUTANE.)	0.6%	NP	NP				
ORENCIA CLICKJECT (SUBCUTANE.)	1.5%	NP	NP				
CIMZIA SYRINGE KIT (INJECTION)	2.4%	NP	NP				
SIMPONI PEN INJECTOR (INJECTION)	0.6%	NP	NP				
XELJANZ XR (ORAL)	0.5%	NP	NP				
ACTEMRA SYRINGE (SUBCUTANE.)	0.7%	NP	NP				
OLUMIANT (ORAL)	0.2%	NP	NP				
ACTEMRA PEN (SUBCUTANEOUS)	0.7%	NP	NP				
TALTZ AUTOINJECTOR (SUBCUTANE.)	1.8%	NP	NP				
TALTZ SYRINGE (SUBCUTANE.)	0.1%	NP	NP				
KEVZARA PEN (SUBCUTANEOUS)	0.2%	NP	NP				
KEVZARA SYRINGE (SUBCUTANEOUS)	0.1%	NP	NP				
SILIQ (SUBCUTANE.)	0.1%	NP	NP				
SIMPONI SYRINGE (INJECTION)	0.0%	NP	NP				
RINVOQ ER (ORAL)	1.1%	NP	NP				
COSENTYX PEN INJECTOR (SUBCUTANE.)	4.5%	NP	NP				
COSENTYX SYRINGE (SUBCUTANE.)	0.4%	NP	NP				
CIMZIA KIT (INJECTION)	0.0%	NP	NP				
TREMFYA AUTOINJECTOR (SUBCUTANE.)	0.4%	NP	NP				
TREMFYA SYRINGE (SUBCUTANE.)	0.2%	NP	NP				
STELARA SYRINGE (INJECTION)	4.2%	NP	NP				
ENSPRYNG (SUBCUTANEOUS)	0.0%	NR	NP				
STELARA VIAL (INJECTION)	0.0%	NP	NP				
SKYRIZI (SUBCUTANEOUS)	0.4%	NP	NP				

Wisconsin Medicaid		Recommendations					
EPINEPHRINE, SELF-INJECTED							
Brand Name	Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS	
EPINEPHRINE 0.3 MG (EPIPEN) (AG) (INJECTION)	55.3%	P	P				
EPINEPHRINE 0.15 MG (EPIPEN JR) (AG) (INJECTION)	7.1%	P	P				
SYMJEPI (INJECTION)	0.0%	NP	NP				
EPINEPHRINE 0.3 MG (EPIPEN) (INJECTION)	13.4%	P	NP				
EPINEPHRINE 0.15 MG (EPIPEN JR) (INJECTION)	5.8%	P	NP				
EPINEPHRINE 0.15 MG (ADRENACLICK) (AG) (INJECTION)	1.2%	P	NP				
EPINEPHRINE 0.3 MG (ADRENACLICK) (AG) (INJECTION)	13.9%	P	NP				
EPIPEN (INTRAMUSC)	2.7%	P	NP				
EPIPEN JR (INTRAMUSC)	0.6%	P	NP				

Wisconsin Medicaid		Recommendations					
ERYTHROPOIESIS STIMULATING PROTEINS							
Brand Name	Current Market Share	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS	
RETACRIT (INJECTION)	0.0%	NP	P				
EPOGEN (INJECTION)	56.0%	P	NP				
ARANESP DISP SYRIN (INJECTION)	39.6%	P	P				
ARANESP VIAL (INJECTION)	4.3%	P	P				
PROCRIT (INJECTION)	0.0%	NP	NP				
MIRCERA (INJECTION)	0.0%	NP	NP				

Wisconsin Medicaid		Recommendations					
GLUCOCORTICOID, INHALED							
Brand Name	Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS	
ADVAIR DISKUS (INHALATION)	30.8%	P	P				
SYMBICORT (INHALATION)	28.0%	P	P				
ADVAIR HFA (INHALATION)	2.9%	P	P				
DULERA (INHALATION)	5.9%	P	P				
AIRDUO RESPICLICK (INHALATION)	0.0%	NP	NP				
BREO ELLIPTA (INHALATION)	1.3%	NP	NP				
FLUTICASONE/SALMETEROL (AIRDUO) (AG) (INHALATION)	0.1%	NP	NP				
FLUTICASONE/SALMETEROL (ADVAIR) (AG) (INHALATION)	0.0%	NP	NP				
TRELEGY ELLIPTA (INHALATION)	1.0%	NP	NP				
BUDESONIDE/FORMOTEROL (AG) (INHALATION)	0.0%	NR	NP				
FLUTICASONE/SALMETEROL (ADVAIR) (INHALATION)	0.0%	NP	NP				
AIRDUO DIGIHALER (INHALATION)	0.0%	NR	NP				
BREZTRI AEROSPHERE HFA AER AD (INHALATION)	0.0%	NR	NP				
ASMANEX (INHALATION)	1.3%	P	P				
FLOVENT DISKUS (INHALATION)	0.1%	NP	P				
FLOVENT HFA (INHALATION)	23.0%	P	P				
PULMICORT FLEXHALER (INHALATION)	1.9%	P	P				
ARNUITY ELLIPTA (INHALATION)	0.1%	NP	NP				
ASMANEX HFA (INHALATION)	0.1%	NP	NP				
QVAR REDIHALER (INHALATION)	0.3%	NP	NP				
ALVESCO (INHALATION)	0.0%	NP	NP				
BUDESONIDE 0.25, 0.5 MG RESPULES (INHALATION)	2.9%	P	P				
BUDESONIDE 1 MG RESPULES (INHALATION)	0.4%	P	P				

Wisconsin Medicaid		Recommendations					
GLUCOCORTICOID, ORAL							
Brand Name	Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS	
RAYOS TABLET DR (ORAL)	0.0%	NP	NP				
PREDNISOLONE SOLUTION (ORAL)	1.9%	P	P				
MEDROL TABLET (ORAL)	0.0%	NP	NP				
PREDNISON TABLET (ORAL)	70.9%	P	P				
DEXAMETHASONE TABLET (ORAL)	5.0%	P	P				
METHYLPREDNISOLONE TAB DS PK (ORAL)	13.2%	P	P				
PREDNISOLONE SODIUM PHOSPHATE (ORAL)	2.4%	P	P				
METHYLPREDNISOLONE 4 MG TABLET (ORAL)	0.6%	P	P				
DEXAMETHASONE ELIXIR (ORAL)	0.1%	P	P				
HYDROCORTISONE (ORAL)	3.3%	P	P				
DEXAMETHASONE SOLUTION (ORAL)	0.1%	P	P				
PREDNISON TABLET DS PK (ORAL)	0.0%	P	P				
METHYLPREDNISOLONE 8 MG TABLET (ORAL)	0.1%	P	P				
DEXAMETHASONE INTENSOL (ORAL)	0.2%	P	P				
METHYLPREDNISOLONE 16 MG TABLET (ORAL)	0.0%	P	P				
PREDNISON SOLUTION (ORAL)	0.1%	P	P				
BUDESONIDE EC (ORAL)	1.6%	P	P				
METHYLPREDNISOLONE 32 MG TABLET (ORAL)	0.2%	P	P				
CORTISONE (ORAL)	0.0%	NP	NP				
PREDNISOLONE SODIUM PHOSPHATE ODT (AG) (ORAL)	0.1%	P	P				
DEXAMETHASONE TAB DS PK (ORAL)	0.0%	NP	NP				
PREDNISOLONE SODIUM PHOSPHATE SOLUTION (VERIPRED) (ORAL)	0.0%	NP	NP				
PREDNISOLONE SODIUM PHOSPHATE SOLUTION (MILLIPRED) (ORAL)	0.0%	NP	NP				
TAPERDEX (ORAL)	0.0%	NP	NP				
PREDNISOLONE SODIUM PHOSPHATE ODT (ORAL)	0.0%	P	P				
MILLIPRED DP TAB DS PK (ORAL)	0.0%	NP	NP				
PREDNISON INTENSOL (ORAL)	0.0%	P	P				
MILLIPRED TABLET (ORAL)	0.0%	NP	NP				
ORTIKOS CAPSULE ER (ORAL)	0.0%	NR	NP				
EMFLAZA SUSPENSION (ORAL)	0.0%	NP	NP				
EMFLAZA TABLET (ORAL)	0.1%	NP	NP				

Wisconsin Medicaid		Recommendations					
IMMUNOMODULATORS, A TOPIC DERMATITIS							
Brand Name	Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS	
ELIDEL (TOPICAL)	42.2%	P	P				
PROTOPIC (TOPICAL)	28.8%	P	P				
TACROLIMUS (AG) (TOPICAL)	0.0%	NP	NP				
PIMECROLIMUS (AG) (TOPICAL)	0.0%	NP	NP				
EUCRISA (TOPICAL)	1.8%	NP	NP				
EUCRISA (TOPICAL)	0.0%	NP	Alternate				
TACROLIMUS (TOPICAL)	0.4%	NP	NP				
PIMECROLIMUS (TOPICAL)	0.0%	NP	NP				
DUPIXENT PEN (SUBCUTANEOUS)	0.0%	NR	NP				
DUPIXENT SYRINGE (SUBCUTANEOUS)	26.8%	NP	NP				
DUPIXENT SYRINGE (SUBCUTANEOUS)	0.0%	NP	Alternate				

Wisconsin Medicaid		Recommendations				
INTRANASAL RHINITIS AGENTS						
Brand Name	Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
AZELASTINE (ASTELIN) (NASAL)	3.9%	P	P			
AZELASTINE (ASTEPRO) (AG) (NASAL)	0.0%	NP	NP			
AZELASTINE (ASTEPRO) (NASAL)	0.0%	NP	NP			
OLOPATADINE (AG) (NASAL)	0.0%	NP	NP			
OLOPATADINE (NASAL)	0.2%	NP	NP			
IPRATROPIUM (NASAL)	2.3%	P	P			
QNASL 80 (NASAL)	0.1%	NP	NP			
DYMISTA (NASAL)	0.0%	NP	NP			
OMNARIS (NASAL)	0.0%	NP	NP			
ZETONNA (NASAL)	0.0%	NP	NP			
MOMETASONE (AG) (NASAL)	0.0%	NP	NP			
FLUTICASONE (NASAL)	91.9%	P	P			
QNASL 40 (NASAL)	0.0%	NP	NP			
BECONASE AQ (NASAL)	0.9%	P	P			
MOMETASONE (NASAL)	0.4%	NP	NP			
AZELASTINE/FLUTICASONE (AG) (NASAL)	0.0%	NR	NP			
FLUNISOLIDE (NASAL)	0.0%	NP	NP			
AZELASTINE/FLUTICASONE (NASAL)	0.0%	NR	NP			
XHANCE (NASAL)	0.0%	NP	NP			

Wisconsin Medicaid		Recommendations				
MOVEMENT DISORDERS						
Brand Name	Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
TETRABENAZINE (ORAL)	11.6%	NR	P			
AUSTEDO (ORAL)	18.2%	NR	P			
INGREZZA INITIATION PACK (ORAL)	0.7%	NR	P			
INGREZZA (ORAL)	69.5%	NR	P			

Wisconsin Medicaid		Recommendations				
NEUROPATHIC PAIN						
Brand Name	Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
SAVELLA (ORAL)	0.5%	P	P			
HORIZANT (ORAL)	0.0%	NP	NP			
SAVELLA DOSE PACK (ORAL)	0.0%	P	P			
CAPSAICIN OTC (TOPICAL)	0.3%	P	P			
GABAPENTIN CAPSULE (ORAL)	40.9%	P	P			
DULOXETINE (CYMBALTA) (ORAL)	23.2%	P	P			
PREGABALIN CAPSULE (AG) (ORAL)	0.6%	P	P			
PREGABALIN CAPSULE (ORAL)	11.9%	P	P			
GABAPENTIN TABLET (ORAL)	14.7%	P	P			
GABAPENTIN SOLUTION (AG) (ORAL)	0.0%	P	P			
GABAPENTIN SOLUTION (ORAL)	0.6%	P	P			
PREGABALIN SOLUTION (ORAL)	0.0%	P	P			
PREGABALIN SOLUTION (AG) (ORAL)	0.0%	P	P			
LYRICA CR (ORAL)	0.0%	NP	NP			
LIDOCAINE (TOPICAL)	6.1%	P	P			
LIDOCAINE (AG) (TOPICAL)	1.0%	P	P			
GRALISE (ORAL)	0.0%	NP	NP			
ZTLIDO (TOPICAL)	0.0%	NP	NP			
ZTLIDO (TOPICAL)	0.0%	NP	Alternate			
DULOXETINE (IRENKA) (ORAL)	0.1%	NP	NP			
DRIZALMA SPRINKLE (ORAL)	0.0%	NR	NP			

Wisconsin Medicaid		Recommendations				
NSAIDS						
Brand Name	Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
PENNSAID PUMP (TOPICAL)	0.0%	NP	NP			
DUEXIS (ORAL)	0.0%	NP	NP			
VIMOVO (ORAL)	0.0%	NP	NP			
FLECTOR (TOPICAL)	0.0%	NP	NP			
ZIPSOR (ORAL)	0.0%	NP	NP			
ARTHROTEC (ORAL)	0.0%	NP	NP			
MELOXICAM TABLET (ORAL)	15.2%	P	P			
IBUPROFEN TABLET OTC (ORAL)	1.8%	P	P			
NAPROXEN SODIUM OTC (ORAL)	0.5%	P	P			
IBUPROFEN TABLET (ORAL)	32.5%	P	P			
NAPROXEN TABLET (ORAL)	13.1%	P	P			
IBUPROFEN SUSPENSION OTC (ORAL)	1.4%	P	P			
NAPROXEN SODIUM (ORAL)	0.0%	NP	NP			
IBUPROFEN TAB CHEW OTC (ORAL)	0.0%	P	P			
INDOMETHACIN CAPSULE (ORAL)	1.5%	P	P			
CELECOXIB (AG) (ORAL)	0.1%	P	P			
INDOMETHACIN CAPSULE ER (ORAL)	0.0%	NP	NP			
IBUPROFEN SUSPENSION (ORAL)	4.1%	P	P			
IBUPROFEN DROPS SUSPENSION OTC (ORAL)	0.0%	P	P			
FLURBIPROFEN (ORAL)	0.1%	P	P			
DICLOFENAC SODIUM (ORAL)	8.6%	P	P			
CELECOXIB (ORAL)	4.5%	P	P			
DICLOFENAC SODIUM GEL OTC (TOPICAL)	0.0%	NR	P			
DICLOFENAC POTASSIUM (ORAL)	0.3%	P	P			
SULINDAC (ORAL)	0.3%	P	P			
KETOROLAC (ORAL)	2.4%	P	P			
DICLOFENAC SOLUTION (TOPICAL)	0.0%	NP	NP			
PIROXICAM (ORAL)	0.0%	NP	NP			
NABUMETONE (ORAL)	1.3%	P	P			
DICLOFENAC GEL (TOPICAL)	11.6%	P	P			
INDOCIN (RECTAL)	0.0%	NP	NP			
OXAPROZIN (ORAL)	0.0%	NP	NP			
ETODOLAC (ORAL)	0.0%	NP	NP			
KETOPROFEN (ORAL)	0.0%	P	NP			
DIFLUNISAL (ORAL)	0.0%	NP	NP			
NAPROXEN EC (ORAL)	0.3%	P	P			
DICLOFENAC SR (ORAL)	0.2%	P	P			
MEFENAMIC ACID (ORAL)	0.0%	NP	NP			
NALFON (ORAL)	0.0%	NP	NP			
ETODOLAC TAB SR (ORAL)	0.0%	NP	NP			
DICLOFENAC SODIUM/MISOPROSTOL (ORAL)	0.0%	NP	NP			
ZORVOLEX (ORAL)	0.0%	NP	NP			
DICLOFENAC PATCH (AG) (TRANSDERMAL)	0.0%	NP	NP			
NAPROXEN EC (AG) (ORAL)	0.0%	NP	NP			
NAPROXEN SUSPENSION (ORAL)	0.0%	NP	NP			
SPRIX (NASAL)	0.0%	NP	NP			
QMIZ ODT (ORAL)	0.0%	NP	NP			
FENOPROFEN (ORAL)	0.0%	NP	NP			
FENOPROFEN (AG) (ORAL)	0.0%	NP	NP			
NAPRELAN (ORAL)	0.0%	NP	NP			
TOLMETIN SODIUM CAPSULE (ORAL)	0.0%	NP	NP			
INDOCIN SUSPENSION (ORAL)	0.0%	NP	NP			
MECLOFENAMATE (ORAL)	0.0%	NP	NP			
TOLMETIN SODIUM TABLET (ORAL)	0.0%	NP	NP			
LICART PATCH (TRANSDERMAL)	0.0%	NR	NP			
KETOPROFEN ER (ORAL)	0.0%	NP	NP			
NAPROXEN CR (AG) (ORAL)	0.0%	NP	NP			
NAPROXEN CR (ORAL)	0.0%	NP	NP			
VIVLODEX (ORAL)	0.0%	NP	NP			
NAPROXEN/ESOMEPRAZOLE (AG) (ORAL)	0.0%	NR	NP			
KETOROLAC (SPRIX) (AG) (NASAL)	0.0%	NR	NP			
RELAFEN DS (ORAL)	0.0%	NR	NP			
NAPROXEN/ESOMEPRAZOLE (ORAL)	0.0%	NR	NP			

Wisconsin Medicaid		Recommendations					
OPHTHALMIC ANTIBIOTIC-STEROID COMBINATIONS							
Brand Name	Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS	
ZYLET (OPHTHALMIC)	0.3%	NP	NP				
TOBRADEX OINTMENT (OPHTHALMIC)	16.1%	P	P				
TOBRADEX SUSPENSION (OPHTHALMIC)	28.1%	P	P				
NEOMYCIN/POLYMYXIN/DEXAMETHASONE (OPHTHALMIC)	52.2%	P	P				
PRED-G DROPS SUSP (OPHTHALMIC)	0.1%	P	P				
BLEPHAMIDE (OPHTHALMIC)	0.5%	P	P				
NEOMYCIN/BACITRACIN/POLYHC (OPHTHALMIC)	0.0%	NP	NP				
SULFACETAMIDE / PREDNISOLONE (OPHTHALMIC)	2.6%	P	P				
PRED-G OINT. (OPHTHALMIC)	0.0%	P	NP				
TOBRADEX ST (OPHTHALMIC)	0.0%	NP	NP				
TOBRAMYCIN / DEXAMETHASONE SUSPENSION (AG) (OPHTHALMIC)	0.0%	NP	NP				
BLEPHAMIDE S.O.P. (OPHTHALMIC)	0.0%	NP	NP				
TOBRAMYCIN / DEXAMETHASONE SUSPENSION (OPHTHALMIC)	0.0%	NP	NP				
NEOMYCIN/POLYMYXIN/HC (OPHTHALMIC)	0.0%	NP	NP				

Wisconsin Medicaid		Recommendations					
OPHTHALMIC ANTIBIOTICS							
Brand Name	Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS	
GENTAMICIN DROPS (OPHTHALMIC)	4.1%	P	P				
POLYMYXIN/TRIMETHOPRIM (OPHTHALMIC)	20.1%	P	P				
GENTAMICIN OINT. (OPHTHALMIC)	0.1%	P	P				
TOBRAMYCIN DROPS (OPHTHALMIC)	4.7%	P	P				
ERYTHROMYCIN (OPHTHALMIC)	32.5%	P	P				
BACITRACIN/POLYMYXIN B SULFATE OINT. (OPHTHALMIC)	0.0%	NP	NP				
TOBREX OINTMENT (OPHTHALMIC)	0.3%	P	P				
NEOMYCIN/BACITRACIN/POLYMYXIN OINT (OPHTHALMIC)	0.0%	NP	NP				
AZASITE (OPHTHALMIC)	0.1%	NP	NP				
SULFACETAMIDE SOLUTION (OPHTHALMIC)	1.4%	P	P				
NEOMYCIN-POLYMYXIN-GRAMICIDIN (OPHTHALMIC)	0.0%	NP	NP				
SULFACETAMIDE OINTMENT (OPHTHALMIC)	0.0%	P	NP				
NATACYN (OPHTHALMIC)	0.0%	NP	NP				
BACITRACIN (OPHTHALMIC)	0.0%	NP	NP				
ZYMAXID (OPHTHALMIC)	0.0%	NP	NP				
BESIVANCE (OPHTHALMIC)	0.0%	NP	NP				
CILOXAN OINTMENT (OPHTHALMIC)	0.2%	P	P				
MOXIFLOXACIN (AG) (VIGAMOX) (OPHTHALMIC)	4.1%	P	P				
CIPROFLOXACIN SOLUTION (OPHTHALMIC)	7.7%	P	P				
OFLOXACIN (OPHTHALMIC)	19.9%	P	P				
MOXIFLOXACIN (VIGAMOX) (OPHTHALMIC)	4.8%	P	P				
MOXEZA (OPHTHALMIC)	0.0%	P	NP				
GATIFLOXACIN (OPHTHALMIC)	0.0%	NP	NP				
LEVOFLOXACIN (OPHTHALMIC)	0.0%	NP	NP				
MOXIFLOXACIN (MOXEZA) (OPHTHALMIC)	0.0%	NR	NP				

Wisconsin Medicaid OPHTHALMICS, ANTI-INFLAMMATORIES			Recommendations			
Brand Name	Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
ACUVAIL (OPHTHALMIC)	0.0%	NP	NP			
DICLOFENAC (OPHTHALMIC)	0.0%	NP	P			
ILEVRO (OPHTHALMIC)	0.8%	P	P			
KETOROLAC (OPHTHALMIC)	13.4%	P	P			
FLURBIPROFEN (OPHTHALMIC)	0.0%	P	P			
NEVANAC (OPHTHALMIC)	0.0%	NP	NP			
PROLENSA (OPHTHALMIC)	0.4%	NP	NP			
KETOROLAC LS (OPHTHALMIC)	5.2%	P	P			
BROMFENAC (OPHTHALMIC)	0.0%	NP	NP			
BROMSITE (OPHTHALMIC)	0.0%	NP	NP			
LOTEMAX DROPS (OPHTHALMIC)	3.6%	P	P			
FML (OPHTHALMIC)	0.0%	NP	NP			
FML FORTE (OPHTHALMIC)	0.4%	P	P			
PRED MILD (OPHTHALMIC)	0.1%	P	P			
FLAREX (OPHTHALMIC)	0.2%	P	P			
MAXIDEX (OPHTHALMIC)	0.6%	P	P			
LOTEMAX OINTMENT (OPHTHALMIC)	0.1%	NP	NP			
FLUOROMETHOLONE (OPHTHALMIC)	8.5%	P	P			
FML S.O.P. (OPHTHALMIC)	0.0%	NP	NP			
DUREZOL (OPHTHALMIC)	5.4%	P	P			
LOTEPREDNOL DROPS (AG) (OPHTHALMIC)	0.0%	NP	NP			
PREDNISOLONE ACETATE (OPHTHALMIC)	57.3%	P	P			
DEXAMETHASONE (OPHTHALMIC)	3.8%	P	P			
PREDNISOLONE SOD PHOSPHATE (OPHTHALMIC)	0.0%	P	NP			
INVELTYS (OPHTHALMIC)	0.0%	NP	NP			
LOTEMAX GEL (OPHTHALMIC)	0.2%	NP	NP			
LOTEPREDNOL DROPS (OPHTHALMIC)	0.0%	NP	NP			

Wisconsin Medicaid OPHTHALMICS FOR ALLERGIC CONJUNCTIVITIS			Recommendations			
Brand Name	Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
BEPREVE (OPHTHALMIC)	0.1%	NP	NP			
ALREX (OPHTHALMIC)	1.4%	P	P			
LASTACAPT (OPHTHALMIC)	0.0%	NP	NP			
PAZEO (OPHTHALMIC)	14.4%	P	P			
OLOPATADINE (PATANOL) (AG) (OPHTHALMIC)	3.1%	P	P			
AZELASTINE (OPHTHALMIC)	0.2%	NP	NP			
KETOTIFEN OTC (OPHTHALMIC)	21.0%	P	P			
OLOPATADINE DROPS (PATADAY) (AG) (OPHTHALMIC)	0.0%	NP	NP			
ZADITOR OTC (OPHTHALMIC)	1.7%	P	P			
OLOPATADINE DROPS (PATADAY) (OPHTHALMIC)	0.0%	NP	NP			
OLOPATADINE (PATANOL) (OPHTHALMIC)	55.4%	P	P			
EPINASTINE (OPHTHALMIC)	0.1%	NP	NP			
ZERVIATE (OPHTHALMIC)	0.0%	NR	NP			
CROMOLYN SODIUM (OPHTHALMIC)	2.5%	P	P			
ALOCRI (OPHTHALMIC)	0.0%	NP	NP			
ALOMIDE (OPHTHALMIC)	0.0%	NP	NP			

Wisconsin Medicaid		Recommendations				
OPHTHALMICS, GLAUCOMA AGENTS						
Brand Name	Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
ALPHAGAN P 0.1% (OPHTHALMIC)	0.1%	NP	NP			
ALPHAGAN P 0.15% (OPHTHALMIC)	1.5%	P	P			
BRIMONIDINE 0.2% (OPHTHALMIC)	7.7%	P	P			
APRACLOPIDINE (OPHTHALMIC)	0.1%	NP	NP			
IOPIDINE (OPHTHALMIC)	0.0%	NP	NP			
BRIMONIDINE P 0.15% (OPHTHALMIC)	0.0%	NP	NP			
TIMOPTIC OCUDOSE (OPHTHALMIC)	0.1%	NP	NP			
ISTALOL (OPHTHALMIC)	0.0%	NP	NP			
COMBIGAN (OPHTHALMIC)	6.0%	P	P			
BETOPTIC S (OPHTHALMIC)	0.4%	P	P			
TIMOLOL (OPHTHALMIC)	11.9%	P	P			
CARTEOLOL (OPHTHALMIC)	0.3%	P	P			
LEVOBUNOLOL (OPHTHALMIC)	0.4%	P	P			
BETAXOLOL (OPHTHALMIC)	0.0%	NP	NP			
TIMOLOL (ISTALOL) (AG) (OPHTHALMIC)	0.0%	NP	NP			
TIMOLOL (ISTALOL) (OPHTHALMIC)	0.0%	NP	NP			
DORZOLAMIDE/TIMOLOL/PF DROPS (AG) (OPHTHALMIC)	0.1%	P	P			
AZOPT (OPHTHALMIC)	2.2%	P	P			
COSOPT PF (OPHTHALMIC)	0.1%	NP	NP			
DORZOLAMIDE / TIMOLOL (OPHTHALMIC)	7.0%	P	P			
DORZOLAMIDE (OPHTHALMIC)	4.0%	P	P			
SIMBRINZA (OPHTHALMIC)	1.7%	P	P			
DORZOLAMIDE/TIMOLOL/PF DROPS (OPHTHALMIC)	0.1%	P	P			
PILOCARPINE (OPHTHALMIC)	0.6%	P	P			
LUMIGAN 7.5ML (OPHTHALMIC)	0.0%	NP	NP			
LUMIGAN 5ML (OPHTHALMIC)	0.0%	NP	NP			
TRAVATAN Z 5 ML (OPHTHALMIC)	1.3%	P	P			
LUMIGAN 2.5ML (OPHTHALMIC)	0.7%	NP	NP			
TRAVATAN Z 2.5 ML (OPHTHALMIC)	10.4%	P	P			
LATANOPROST 2.5 ML (OPHTHALMIC)	41.9%	P	P			
XELPROS (OPHTHALMIC)	0.0%	NP	NP			
BIMATOPROST 2.5ML (OPHTHALMIC)	0.0%	NP	NP			
ZIOPTAN (OPHTHALMIC)	0.2%	NP	NP			
BIMATOPROST 5ML (OPHTHALMIC)	0.0%	NP	NP			
VYZULTA (OPHTHALMIC)	0.3%	NP	NP			
TRAVOPROST 2.5 ML (AG) (OPHTHALMIC)	0.0%	NR	NP			
TRAVOPROST 2.5 ML (OPHTHALMIC)	0.0%	NP	NP			
BIMATOPROST 7.5ML (OPHTHALMIC)	0.0%	NP	NP			
RHOPRESSA (OPHTHALMIC)	0.8%	NP	P			
ROCKLATAN (OPHTHALMIC)	0.1%	NP	P			

Wisconsin Medicaid		Recommendations				
OTIC ANTIBIOTICS						
Brand Name	Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
CIPRO HC (OTIC)	19.4%	P	P			
OFLOXACIN (OTIC)	26.9%	P	P			
CIPRODEX (OTIC)	7.6%	NP	P			
CORTISPORIN-TC (OTIC)	0.0%	P	P			
NEOMYCIN/POLYMYXIN/HC SOLN/SUSP (OTIC)	46.1%	P	P			
CIPROFLOXACIN (OTIC)	0.0%	NP	NP			
OTOVEL (OTIC)	0.0%	NP	NP			
CIPROFLOXACIN/DEXAMETHASONE (OTIC)	0.0%	NR	NP			
CIPROFLOXACIN/DEXAMETHASONE (AG) (OTIC)	0.0%	NR	NP			
CIPROFLOXACIN/FLUOCINOLONE (AG) (OTIC)	0.0%	NR	NP			

Wisconsin Medicaid		Recommendations				
SEDATIVE HYPNOTICS						
Brand Name	Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
ZOLPIDEM (ORAL)	66.4%	P	P			
TEMAZEPAM (ORAL)	10.4%	P	P			
TEMAZEPAM (AG) (ORAL)	0.0%	P	P			
ZALEPLON (ORAL)	3.1%	P	P			
ESZOPICLONE (ORAL)	8.0%	P	P			
ZOLPIDEM ER (ORAL)	3.6%	NP	NP			
ROZEREM (ORAL)	4.6%	P	P			
FLURAZEPAM (ORAL)	0.0%	NP	NP			
BELSOMRA (ORAL)	2.0%	NP	NP			
TRIAZOLAM (ORAL)	1.1%	P	P			
TEMAZEPAM 7.5 MG (ORAL)	0.0%	NP	NP			
ESTAZOLAM (ORAL)	0.3%	P	P			
EDLUAR (SUBLINGUAL)	0.0%	NP	NP			
TEMAZEPAM 22.5 MG (ORAL)	0.0%	NP	NP			
RAMELTEON (ORAL)	0.1%	NP	NP			
SILENOR (ORAL)	0.1%	NP	NP			
DAYVIGO (ORAL)	0.0%	NR	NP			
ZOLPIDEM (SUBLINGUAL)	0.0%	NP	NP			
DOXEPIN (AG) (ORAL)	0.2%	NR	NP			
DOXEPIN (ORAL)	0.0%	NR	NP			
MELATONIN 1 MG TABLET	0.0%	NR	P			
MELATONIN 3 MG TABLET	0.0%	NR	P			
MELATONIN 5 MG TABLET	0.0%	NR	P			

Wisconsin Medicaid		Recommendations				
STERIODS, TOPICAL HIGH						
Brand Name	Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
DIPROLENE OINTMENT (TOPICAL)	0.0%	NP	NP			
TRIAMCINOLONE ACETONIDE CREAM (TOPICAL)	50.4%	P	P			
BETAMET DIPROP / PROP GLY CREAM (TOPICAL)	0.0%	NP	NP			
TRIAMCINOLONE ACETONIDE OINTMENT (TOPICAL)	38.3%	P	P			
BETAMETHASONE DIPROPIONATE LOTION (TOPICAL)	0.1%	NP	NP			
TRIAMCINOLONE ACETONIDE LOTION (TOPICAL)	1.3%	P	P			
BETAMETHASONE VALERATE CREAM (TOPICAL)	3.7%	P	P			
BETAMETHASONE VALERATE OINTMENT (TOPICAL)	3.6%	P	P			
BETAMETHASONE DIPROPIONATE CREAM (TOPICAL)	0.1%	NP	NP			
FLUOCINONIDE OINTMENT (TOPICAL)	0.4%	NP	NP			
BETAMETHASONE VALERATE LOTION (TOPICAL)	1.6%	P	P			
FLUOCINONIDE SOLUTION (TOPICAL)	0.2%	NP	NP			
FLUOCINONIDE GEL (TOPICAL)	0.0%	NP	NP			
BETAMETHASONE DIPROPIONATE OINTMENT (TOPICAL)	0.0%	NP	NP			
FLUOCINONIDE EMOLLIENT (TOPICAL)	0.0%	NP	NP			
FLUOCINONIDE CREAM (TOPICAL)	0.1%	NP	NP			
BETAMET DIPROP / PROP GLY OINTMENT (TOPICAL)	0.2%	NP	NP			
BETAMET DIPROP / PROP GLY LOTION (TOPICAL)	0.0%	NP	NP			
BETAMETHASONE DIPROPIONATE GEL (TOPICAL)	0.0%	NP	NP			
DESOXIMETASONE OINTMENT (TOPICAL)	0.1%	NP	NP			
KENALOG AEROSOL (TOPICAL)	0.0%	NP	NP			
HALOG OINTMENT (TOPICAL)	0.0%	NP	NP			
DESOXIMETASONE SPRAY (TOPICAL)	0.0%	NP	NP			
DESOXIMETASONE CREAM (TOPICAL)	0.1%	NP	NP			
HALOG CREAM (TOPICAL)	0.0%	NP	NP			
AMCINONIDE CREAM (TOPICAL)	0.0%	NP	NP			
TRIAMCINOLONE ACETONIDE AEROSOL (TOPICAL)	0.0%	NP	NP			
AMCINONIDE LOTION (TOPICAL)	0.0%	NP	NP			
DESOXIMETASONE GEL (TOPICAL)	0.0%	NP	NP			
HALCINONIDE CREAM (TOPICAL)	0.0%	NP	NP			
HALOG SOLUTION (TOPICAL)	0.0%	NR	NP			
TRIANEX OINTMENT (TOPICAL)	0.0%	NP	NP			
DIFLORASONE DIACETATE CREAM (TOPICAL)	0.0%	NP	NP			
DIFLORASONE DIACETATE OINTMENT (TOPICAL)	0.0%	NP	NP			
TOPICORT SPRAY (TOPICAL)	0.0%	NP	NP			

Wisconsin Medicaid				Recommendations		
STIMULANTS AND RELATED AGENTS						
Brand Name	Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
ADDERALL	0.0%	NP	NP			
ARMODAFINIL (AG) (ORAL)	0.1%	P	P			
CONCERTA (ORAL)	9.8%	P	P			
ADDERALL XR (ORAL)	0.1%	NP	NP			
FOCALIN XR (ORAL)	4.9%	P	P			
DAYTRANA (TRANSDERMAL)	0.2%	P	P			
RITALIN LA (ORAL)	0.0%	NP	NP			
DEXMETHYLPHENIDATE (AG) (ORAL)	0.0%	P	P			
METHYLPHENIDATE (ORAL)	6.2%	P	P			
GUANFACINE ER (ORAL)	10.3%	P	P			
DEXMETHYLPHENIDATE (ORAL)	1.7%	P	P			
MODAFINIL (ORAL)	0.5%	P	P			
DEXTROAMPHETAMINE-AMPHETAMINE	11.5%	NP	NP			
DEXTROAMPHETAMINE TABLET (ORAL)	0.3%	NP	NP			
ARMODAFINIL (ORAL)	0.1%	P	P			
FOCALIN (ORAL)	0.1%	P	P			
VYVANSE CHEWABLE TABLET (ORAL)	1.2%	P	P			
VYVANSE CAPSULE (ORAL)	31.1%	P	P			
METHYLPHENIDATE SOLUTION (ORAL)	0.1%	P	P			
METHYLIN SOLUTION (ORAL)	0.0%	P	P			
CLONIDINE ER (ORAL)	1.3%	P	P			
AMPHETAMINE SALT COMBO ER (AG) (ORAL)	7.1%	NP	NP			
METHYLPHENIDATE ER (METADATE ER) (ORAL)	0.7%	P	P			
AMPHETAMINE SALT COMBO ER (ORAL)	3.7%	NP	NP			
ATOMOXETINE (AG) (ORAL)	0.1%	P	P			
ADHANSIA XR (ORAL)	0.0%	NP	NP			
ATOMOXETINE (ORAL)	4.1%	P	P			
METHYLPHENIDATE ER (RITALIN LA) (ORAL)	0.7%	P	P			
METHYLPHENIDATE ER (CONCERTA) (AG) (ORAL)	0.0%	NP	NP			
DEXMETHYLPHENIDATE ER (AG) (ORAL)	0.0%	NP	NP			
METHYLPHENIDATE CD (AG) (ORAL)	1.6%	P	P			
METHYLPHENIDATE CD (ORAL)	0.6%	P	P			
DEXTROAMPHETAMINE CAPSULE ER (ORAL)	0.4%	NP	NP			
ADZENYS ER SUSPENSION (ORAL)	0.0%	NP	NP			
METHYLPHENIDATE ER (CONCERTA) (ORAL)	0.0%	NP	NP			
QUILLIVANT XR (ORAL)	0.3%	P	P			
DEXMETHYLPHENIDATE ER (ORAL)	0.0%	NP	NP			
APTENSIO XR (ORAL)	0.2%	P	P			
METHYLPHENIDATE CHEWABLE TABLETS (ORAL)	0.2%	P	P			
QUILLICHEW ER (ORAL)	0.4%	P	P			
METHYLPHENIDATE ER (APTENSIO XR) (AG) (ORAL)	0.0%	NP	NP			
MYDAYIS ER (ORAL)	0.2%	NP	NP			
EVEKEO ODT (ORAL)	0.0%	NP	NP			
AMPHETAMINE SUSPENSION ER (AG) (ORAL)	0.0%	NR	NP			
COTEMPLA XR ODT (ORAL)	0.0%	NP	NP			
ADZENYS XR ODT (ORAL)	0.0%	NP	NP			
DYANAVEL XR (ORAL)	0.0%	NP	NP			
JORNAY PM (ORAL)	0.3%	NP	NP			
METHAMPHETAMINE (ORAL)	0.0%	NP	NP			
DEXTROAMPHETAMINE SOLUTION (ORAL)	0.0%	NP	NP			
ZENZEDI (ORAL)	0.0%	NP	NP			
SUNOSI (ORAL)	0.0%	NP	NP			
AMPHETAMINE SULFATE (ORAL)	0.0%	NP	NP			
METHYLPHENIDATE ER 72 MG TABLETS (ORAL)	0.0%	NP	NP			
EVEKEO (ORAL)	0.0%	NP	NP			
DEXEDRINE SPANSULE (ORAL)	0.0%	NP	NP			