

BadgerCare Plus Core Plan Brand Name Drugs - Quick Reference

Effective 06/01/2013

ALS Agents			Antidepressants, SSRI			Antipsychotics			Cytokine and CAM Antagonists(cont)		
Rilutek		C	Covered generics available			Covered generics available			Humira	PA	C
Alzheimer's Agents			Lexapro		GF	Geodon			Diabetic Ulcer Preparations, Topical		
Covered generics available			Luvox CR		GF	Loxitane			Regranex		
Exelon capsules		C	Pexeva		GF	Orap			Epinephrine, Self Injected		
Exelon patch		C	Antibiotics, GI			Abilify			Epipen		
Namenda*		C	Alinia			Fazaclo			Twinject		
*Prior authorization is required for members 44 years of age and younger.			Tindamax			Invega, ER			Erythropoiesis Stimulating Proteins		
Androgenic Agents			Vancocin			Seroquel XR			Aranesp		
Androderm		C	Antineoplastic, Chemotherapy Related Agents			Symbyax			Procrit		
Androgel		C	Covered generics available			Anticoagulants			Glucocorticoids, Inhaled		
Testim		C	Alkeran		C	Covered generics available			Advair Diskus		
Anticonvulsants			Ceenu		C	Fragmin syringe			Advair HFA		
Covered generics available			Gleevec		C	Lovenox			Aerobid, M		
Carbatrol		C	Leukeran		C	Xarelto			Asmanex		
Celontin		C	Lysodren		C	Antivirals, Influenza			Azmacort		
Depakote Sprinkle		C	Matulane		C	Relenza			Dulera		
Diastat		C	Mesnex		C	Tamiflu			Flovent Diskus		
Felbatol		C	Nexavar		C	Bronchodilators, Beta Agonists			Flovent HFA		
Gabitril		C	Revlimid		C	Covered generics available			Pulmicort Flexhaler		
Lamictal Starter Kits		C	Sprycel		C	Foradil			Qvar		
Lyrica		C	Sutent		C	Maxair			Symbicort		
Mebaral		C	Tarceva		C	Proair HFA			Hepatitis B Agents		
Peganone		C	Tasigna		C	Proventil HFA			Baraclude		
Tegretol XR		C	Temodar		C	Calcimimetic, Endocrine Agents			Epivir HBV		
Trileptal Suspension		C	Tykerb		C	Sensipar			Hepsera		
Banzel		GF	Xeloda		C	Colony Stimulating Factors			Tyzeka		
Phenytek		GF	Antiparkinson's Agents			Neupogen			Hepatitis C, Alfa Interferon		
Stavzor		GF	Covered generics available			COPD Agents			Pegasys		
Antidepressants, Other			Stalevo		C	Covered generics available			Peg-Intron, Redipen		
Covered generics available			Azilect		GF	Atrovent HFA			Hepatitis C, Protease Inhibitors		
Marplan		C	Comtan		GF	Combivent			Incivek		
Nardil		C	Neupro		GF	Combivent Respimat			Victrelis		
Cymbalta		C	Requip XL	DR	GF	Daliresp			Hyperglycemics		
Emsam		GF	Tasmar		GF	Spiriva			Glucagon Emergency Kit		
Pristiq		GF	Cytokine and CAM Antagonists			Cimzia			Hyperparathyroid TX Agents		
						Enbrel			Hectorol		
									Zemiplar		

Key:

C = Covered product

DR = Diagnosis Restriction

GF = Grandfathering for transitioned members only

PA = Prior Authorization Required

A complete list of covered generic and a limited number of over the counter NDCs can be found at: <https://www.forwardhealth.wi.gov/WIPortal/Content/provider/medicaid/pharmacy/resources.htm.spag>

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Hypoglycemics, DPP-4 Inhibitors			
Janumet			C
Januvia			C
Jentadueto			C
Kombiglyze XR			C
Onglyza			C
Tradjenta			C
Hypoglycemics, Insulins			
Humalog Mix			C
Humalog			C
Humulin			C
Lantus			C
Hypoglycemics, Thiazolidinediones			
Actoplus Met			C
Duetact			C
Immunosuppressant Agents			
Covered generics available			
Myfortic			C
Rapamune			C
Multiple Sclerosis Agents, Immunomodulators			
Avonex			C
Betaseron			C
Copaxone			C
Rebif			C
Ophthalmics, Glaucoma -Prostaglandins			
Covered generics available			
Travatan Z			C
Opioid Dependency Agents			
buprenorphine	DR	PA	C
Suboxone Film	DR	PA	C
Pancreatic Enzymes			
Covered generics available			
Zenpep			C
Phosphate Binders			
Covered generics available			
Eliphos			C

Phosphate Binders(cont)			
Fosrenol			C
Renagel			C
Platelet Aggregation Inhibitors			
Covered generics available			
Aggrenox			C
Plavix 300 mg			C
Pulmonary Arterial Hypertension			
Adcirca	DR		C
Letairis	DR		C
Tracleer	DR		C
Stimulants and Related Agents			
Covered generics available			
Adderall	DR		C
Adderall XR	DR		C
Concerta	DR		C
Daytrana	DR		C
Dexedrine Spansules	DR		C
Focalin XR	DR		C
Intuniv	DR		C
Metadate CD	DR		C
Methylin chew tabs	DR		C
Methylin tablets	DR		C
Strattera	DR		C
Vyvanse	DR		C
Desoxyn	DR		GF
Methylin chewable	DR		GF
Methylin solution	DR		GF
Procentra	DR		GF
Ritalin LA	DR		GF
Preferred Brand Name Drugs with Generic Copay/Dispensing Fees			
Drug Name	Start Date	End Date	
Adderall XR	01/01/2012		
Depakote Sprinkles	01/01/2012		

Preferred Brand Name Drugs with Generic Copay/Dispensing Fees(cont)		
Drug Name	Start Date	End Date
Exelon capsules	01/01/2012	
Lovenox	01/01/2012	
Tegretol XR 200mg	01/01/2012	
Tegretol XR 400mg	01/01/2012	

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