

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

(Effective 02/01/2021)

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

(Effective 02/01/2021)

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	diclofenac 1.3% patch (Gen-Flector)		NP	methadone tablet, solution		NP	tramadol 100mg tab		NP
clindamycin/benzoyl peroxide (Gen-Duac)		P	diclofenac 1.5% solution (Gen-Pennsaid)		NP	morphine ER capsules		NP	Capital w-codeine		NP
clindamycin gel (Gen-Cleocin T)		P	Flector		NP	oxycodone ER		NP	Dilaudid Liquid		NP
clindamycin solution		P	Licart patch	SCN	NP	oxymorphone ER		NP	Ibudone		NP
erythromycin solution		P	Pennsaid	SCN	NP	tramadol ER cap (Gen-Conzip)	SCN	NP	Nalocet	SCN	NP
sodium sulfacetamide-sulfur cleanser, wash, suspension		P	Ztlido	SCN	NP	tramadol ER tab (Gen-Ryzolt)		NP	Nucynta		NP
Differin 0.1% cream, lotion	SCN	P	Analgesics, Miscellaneous			Arymo ER	SCN	NP	Oxaydo	SCN	NP
Differin 0.3% gel pump	SCN	P	acetaminophen	SCN	P	Belbuca Film		NP	Primlev		NP
Epiduo	SCN	P	acetaminophen chew tab 80mg, 160mg*		P	Conzip	SCN	NP	Reprexain	SCN	NP
Retin-A (not micro)		P	aspirin	SCN	P	Exalgo ER		NP	Roxybond		NP
NOTE: Topical federal legend acne drugs not listed are either non-preferred or noncovered.		NP	ibuprofen Rx		P	Kadian		NP	Synalgos-DC		NP
Alzheimer's Agents			ibuprofen OTC	SCN	P	Morphabond ER		NP	Vicodin 5/300		NP
donepezil 5mg,10mg		P	ibuprofen OTC chew tab 100mg*		P	Nucynta ER		NP	Vicodin 7.5/300		NP
donepezil ODT 5mg,10mg		P	naproxen Rx		P	Oxycontin		NP	Vicodin 10/300		NP
memantine solution, tablet, titration pack*		P	naproxen OTC	SCN	P	Xartemis XR		NP	Xodol		NP
rivastigmine caps		P	butalbital/apap		NP	Xtampza ER	SCN	NP	Zamiset		NP
Exelon patch		P	butalbital/apap/caffeine		NP	Zohydro ER	SCN	NP	*Combination products containing any other strength of apap besides 325 mg.		
donepezil 23mg		NP	butalbital/apap/caffeine/codeine		NP	Analgesics, Opioids Short-Acting			Analgesics, Opioids Short-Acting – Fentanyl Mucosal Agents		
galantamine tablets		NP	butalbital/asa/caffeine		NP	codeine/apap		P	fentanyl citrate oral transmucosal lozenges		NP
galantamine ER caps		NP	butalbital/asa/caffeine/codeine		NP	codeine/asa		P	Abstral	SCN	NP
galantamine solution		NP	butalbital/asa/caffeine/codeine		NP	hydromorphone		P	Fentora		NP
memantine ER caps (Gen-Namenda XR)*	DR	NP	Allzital	SCN	NP	hydrocodone/apap 325mg		P	Lazanda	SCN	NP
rivastigmine patch		NP	Bupap	SCN	NP	hydrocodone/ibuprofen		P	Subsys	SCN	NP
Namzaric capsule		NP	Esgic		NP	morphine		P	Androgenic Agents		
Namzaric dose pack		NP	* Products are only covered for members 12 years of age or younger			oxycodone solution, tablets		P	testosterone gel, pump (Gen-Vogelxo)		P
*memantine products are not covered for members 17 years of age or younger			Analgesics, Opioids Long-Acting			oxycodone/apap 325mg		P	Androgel gel, pump		P
Analgesics/Anesthetics, Topical			fenentanyl transdermal 12mcg, 25mcg, 50mcg, 75mcg, 100mcg		P	tramadol 50mg tab		P	testosterone gel, pump (Gen-Androgel)		NP
capsaicin OTC	SCN	P	morphine ER tab (Gen-Ultram ER)		P	tramadol/apap 325mg		P	testosterone gel (Gen-Testim)	SCN	NP
diclofenac 1% gel (Gen-Voltaren RX)		P	Butrans transdermal		P	benzhydrocodone/apap tab		NP	testosterone pump (Gen-Axiron and Fortesta)		NP
diclofenac sodium 1% gel OTC (Gen-Voltaren OTC)		P	Embeda ER		P	butorphanol spray		NP	Androderm		NP
lidocaine 5% ointment		P	Hysingla ER		P	codeine		NP	Axiron		NP
lidocaine 5% trans patch		P	buprenorphine transdermal		NP	dihydrocodeine/apap/caffeine		NP	Fortesta		NP
			fenentanyl transdermal 37.5mcg, 62.5mcg, 87.5mcg		NP	dihydrocodeine/asa/caffeine		NP	Natesto nasal spray	SCN	NP
			hydrocodone ER (Gen-Zohydro ER)		NP	levorphanol		NP	Testim	SCN	NP
			hydromorphone ER		NP	hydrocodone/apap*		NP	Vogelxo		NP
						hydromorphone liquid, suppository		NP	Androgenic Agents, Injectable		
						meperidine		NP	testosterone cypionate*		P
						oxycodone/apap*		NP			
						oxycodone/asa		NP			
						oxycodone capsules, concentrate		NP			
						oxycodone/ibuprofen		NP			
						oxymorphone		NP			
						pentazocine/naloxone		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

(Effective 02/01/2021)

Androgenic Agents, Injectable (cont)		
testosterone enanthate*		P
Depo-testosterone*		P
Xyosted		NP
* Policy for obtaining provider-administered drugs applies. Refer to topic #5697.		
Angiotensin Modulators, ACE Inhibitors		
benazepril		P
captopril		P
enalapril		P
enalapril/HCTZ		P
fosinopril		P
lisinopril		P
lisinopril/HCTZ		P
ramipril		P
benazepril/HCTZ		NP
captopril/HCTZ	SCN	NP
fosinopril/HCTZ		NP
moexipril		NP
moexipril/HCTZ		NP
perindopril		NP
quinapril		NP
quinapril/HCTZ		NP
trandolapril		NP
Epaned *	SCN	NP
Qbrelis solution	SCN	NP
Prestalia	SCN	NP
*Prior Authorization is not required for members 12 years of age and younger.		
Angiotensin Modulators, ARBs and DRIs		
irbesartan		P
irbesartan/HCTZ		P
losartan		P
losartan/HCTZ		P
olmesartan		P
olmesartan/HCTZ		P
valsartan		P
valsartan/HCTZ		P
Entresto		P
aliskiren tabs (Gen-Tekturma)	SCN	NP
candesartan tablets		NP
candesartan/HCTZ		NP
eprosartan mesylate	SCN	NP

Angiotensin Modulators, ARBs and DRIs (cont)		
telmisartan		NP
telmisartan/HCTZ		NP
Benicar		NP
Benicar/HCTZ		NP
Edarbi		NP
Edarbyclor		NP
Micardis		NP
Micardis/HCTZ		NP
Tekturma		NP
Tekturma/HCTZ		NP
Angiotensin Modulators, Combination		
amlodipine/benazepril		P
amlodipine/olmesartan		P
amlodipine/olmesartan/HCTZ		P
amlodipine/valsartan		P
amlodipine/valsartan/HCTZ		P
telmisartan/amlodipine		NP
trandolapril/verapamil		NP
Amturnide		NP
Byvalson		NP
Tarka		NP
Tekamlo		NP
Twynsta		NP
Antibiotics, Beta-Lactam		
amoxicillin		P
amoxicillin clavulanate		P
amoxicillin clavulanate 250mg suspension		P
ampicillin		P
cefaclor caps		P
cefadroxil caps, susp		P
cefdinir		P
cefixime capsule	SCN	P
cefprozil	SCN	P
cefuroxime		P
cephalexin caps, susp		P
cephalexin 750mg	SCN	P
dicloxacillin		P
penicillin		P
Augmentin 125mg susp		P
Ceftin 125mg, 250mg susp	SCN	P
Suprax chew tab, tabs, susp	SCN	P

Antibiotics, Beta-Lactam (cont)		
amoxicillin clavulanate XR		NP
cefaclor susp	SCN	NP
cefaclor tab ER		NP
cefadroxil tablet		NP
cefixime capsule	SCN	NP
cefixime suspension		NP
cefpodoxime		NP
cephalexin tabs		NP
Daxbia	SCN	NP
Spectracef		NP
Antibiotics, GI		
metronidazole tablets		P
neomycin		P
tinidazole		P
vancomycin capsule		P
Firvang 50mg/ml	SCN	P
Xifaxan		P
metronidazole capsule		NP
nitazoxanide tablet (Gen-Alinia)		NP
Dificid tablet, suspension		NP
Flagyl ER		NP
Solosec	SCN	NP
vancomycin 50mg/ml (Gen-Firvang)	SCN	NP
Antibiotics, Inhaled		
Bethkis	SCN	P
Kitabis Pak	SCN	P
tobramycin (Gen-Tobi)		NP
tobramycin (Gen-Bethkis)		NP
Cayston		NP
Tobi		NP
Tobi Podhaler		NP
Antibiotics, Macrolides/Ketolides		
azithromycin		P
clarithromycin suspension, tablet		P
erythromycin capsule, tablet, granule, suspension		P
E.E.S. filmtab, granules		P
Eryped		P
Ery-Tab DR		P
Erythrocin		P
PCE		P

Antibiotics, Macrolides/Ketolides (cont)		
clarithromycin ER tab		NP
erythromycin filmtab		NP
Antibiotics, Tetracyclines		
doxycycline hyclate capsule		P
doxycycline hyclate 20mg tabs		P
doxycycline monohydrate 50mg, 100mg capsules		P
doxycycline monohydrate tablets		P
minocycline caps		P
demeclocycline		NP
doxycycline hyclate DR		NP
doxycycline hyclate tabs		NP
doxycycline monohydrate susp		NP
doxycycline monohydrate 75mg, 150mg capsules		NP
minocycline tabs		NP
minocycline ER (Gen-Solodyn)		NP
tetracycline		NP
Doryx DR		NP
Minolira ER	SCN	NP
Morgidox caps	SCN	NP
Nuzyra	SCN	NP
Oracea		NP
Solodyn ER 55mg, 65mg, 80mg, 105mg, 115mg		NP
Vibramycin syrup, suspension		NP
Ximino ER	SCN	NP
Antibiotics, Topical		
bacitracin ointment OTC	SCN	P
bacitracin/polymyxin B oint. OTC	SCN	P
mupirocin ointment		P
neomycin/bacitracin zinc/ polymyxin B oint OTC	SCN	P
neomycin/bacitracin zinc/ polymyxin B/pramoxine oint. OTC	SCN	P
gentamicin cream, ointment		NP
mupirocin cream		NP
Bactroban nasal	SCN	NP
Centany	SCN	NP
Xepi 1% cream	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

(Effective 02/01/2021)

Antibiotics, Vaginal			Anticonvulsants (cont)			Anticonvulsants (cont)			Antidepressants, SSRI (cont)				
clindamycin		P	Carbatrol ER		P	Sympazan	DR	SCN	NP	sertraline		P	
Cleocin ovule		P	Celontin		P	Trileptal suspension			NP	Paxil suspension		P	
Clindesse		P	Depakote sprinkle		P	Trokendi XR		SCN	NP	fluoxetine 90mg caps		NP	
Nuversa	SCN	P	Dilantin 30mg cap		P	Valtoco nasal spray		SCN	NP	fluoxetine 10mg, 20mg, 60mg tablets		NP	
Vandazole		P	Dilantin Infatab		P	Vigadrone			NP	fluvoxamine ER		NP	
metronidazole		NP	Epidiolex	DR	SCN	Vimpat			NP	paroxetine 7.5mg cap (Gen-Brisdelle)		NP	
Anticoagulants			Felbatol suspension, tablet		P	Vimpat solution			NP	paroxetine CR (Gen-Paxil CR)	SCN	NP	
enoxaparin		P	Gabitril		SCN	Xcopri		SCN	NP	Brisdelle		SCN	NP
warfarin		P	Lamictal Starter Kits		SCN	Antidepressants, Other					Pexeva	SCN	NP
Eliquis		P	Peganone		P	bupropion			P	Sarafem	SCN	NP	
Eliquis Dose Pack		P	Roweepra		SCN	bupropion SR			P	Antiemetics			
Pradaxa		P	Sabril		SCN	bupropion XL (Gen-Wellbutrin)			P	granisetron		P	
Xarelto		P	Tegretol tab		P	desvenlafaxine ER (Gen-Pristiq)			P	metoclopramide		P	
Xarelto Dose Pack		P	Tegretol suspension		P	duloxetine DR 20mg, 30mg, 60mg caps			P	ondansetron tablet, ODT, sol.		P	
fondaparinux		NP	Tegretol XR		P	mirtazapine			P	prochlorperazine tablet, suppository		P	
Arixtra	SCN	NP	carbamazepine suspension, tablets		NP	phenelzine			P	trimethobenzamide caps		P	
Fragmin		NP	carbamazepine ER caps, tabs		NP	trazodone			P	Emend capsules		P	
Savaysa		NP	clonazepam ODT		NP	venlafaxine			P	aprepitant capsules		NP	
Anticonvulsants			divalproex sprinkle		NP	venlafaxine ER capsules			P	metoclopramide ODT		NP	
carbamazepine chew tabs		P	felbamate suspension, tablet		NP	Marplan			P	Akynzeo		NP	
clobazam susp, tabs		P	lamotrigine ODT		NP	Nardil			P	Anzemet		NP	
clonazepam tablets		P	rufinamide suspension (Gen-Banzel)	DR	NP	bupropion XL (Gen-Forfivo XL)	SCN	NP		Emend Powder Packet		NP	
diazepam rectal		P	tiagabine		NP	desvenlafaxine ER (No Brand)			NP	Sancuso	SCN	NP	
divalproex tablets		P	topiramate ER		NP	duloxetine 40mg DR caps			NP	Varubi	SCN	NP	
divalproex ER tablets		P	vigabatrin		NP	nefazodone			NP	Zuplenz		NP	
ethosuximide		P	Aptiom		SCN	venlafaxine ER tablets			NP	Antiemetics/Antivertigo			
gabapentin caps, tabs		P	Banzel	DR	NP	Aplenzin ER			NP	dimenhydrinate OTC	SCN	P	
lamotrigine tablets		P	Briviact		NP	Drizalma sprinkle DR			NP	meclizine		P	
lamotrigine dispertabs		P	Diacomit	DR	SCN	Emsam			NP	meclizine OTC	SCN	P	
lamotrigine Dose Pk		P	Equetro		NP	Fetzima			NP	promethazine tablet, suppository, syrup		P	
lamotrigine ER tablets		P	Fintepla	DR	NP	Forfivo XL			NP	scopolamine patch		P	
levetiracetam solution, tabs		P	Fycompa		NP	Trintellix			NP	Diclegis	SCN	P	
levetiracetam ER tabs		P	Lamictal ODT		SCN	Viibryd		SCN	NP	Transderm-Scop	SCN	P	
oxcarbazepine		P	Lamictal ODT Starter Kit		SCN	Antidepressants, SSRI					doxylamine succinate / pyridoxine (Gen-Diclegis)		NP
oxcarbazepine suspension		P	Lamictal XR		SCN	citalopram			P	Bonjesta	SCN	NP	
phenobarbital		P	Lamictal XR Starter Kit		SCN	escitalopram			P	Antiemetics, Cannabinoids			
phenytoin		P	Nayzilam nasal spray		NP	fluoxetine 10mg, 20mg, 40mg caps			P	dronabinol		NP	
pregabalin (Gen-Lyrica)		P	Oxtellar XR		SCN	fluoxetine solution			P	Cesamet		NP	
primidone		P	Phenytek		SCN	fluvoxamine			P				
topiramate		P	Qudexy		NP	paroxetine			P				
topiramate sprinkle		P	Spritam		SCN								
valproic acid		P											
zonisamide		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

(Effective 02/01/2021)

Antifungals, Oral			Antifungals, Topical (cont)			Antiparasitics, Topical (cont)			Antipsoriatics, Topical (cont)		
clotrimazole troche		P	Ertaczo		NP	Sklice		NP	calcipotriene/betamethasone dipropionate susp (Gen-Taclonex)	SCN	NP
fluconazole		P	Exelderm	SCN	NP	Antiparkinson's Agents			calcitriol oint		NP
griseofulvin suspension		P	Extina	SCN	NP	amantadine		P	tazarotene cream		NP
griseofulvin ultra-micro tablets		P	Jublia		NP	benztropine		P	Duobrii lotion		NP
itraconazole		P	Kerydin	SCN	NP	bromocriptine		P	Enstilar	SCN	NP
ketoconazole tablets		P	Luzu cream		NP	carbidopa/levodopa		P	Sorilux		NP
nystatin		P	Mentax	SCN	NP	carbidopa/levodopa ER		P	Tazorac	SCN	NP
terbinafine		P	Naftin	SCN	NP	carbidopa/levodopa ODT		P	Antipsychotics		
Noxafil		P	Oxistat	SCN	NP	carbidopa/levodopa/entacapone		P	aripiprazole*		P
Sporanox (liquid)		P	Vusion	SCN	NP	carbidopa 25mg tab		P	aripiprazole ODT*	SCN	P
flucytosine		NP	NOTE: Sprays and Kits are not covered.			pramipexole		P	amitriptyline/perphenazine*	SCN	P
griseofulvin micro tablets		NP	Antihistamines, Minimally Sedating			ropinirole		P	chlorpromazine*		P
itraconazole solution		NP	cetirizine syrup, tablets	SCN	P	selegiline		P	clozapine*		P
posaconazole (Gen-Noxafil)	SCN	NP	cetirizine D	SCN	P	trihexyphenidyl		P	fluphenazine*	SCN	P
voriconazole suspension, tab		NP	levocetirizine tablets		P	entacapone		NP	haloperidol*		P
Ancobon		NP	loratadine syrup, tablets	SCN	P	pramipexole ER		NP	loxapine*		P
Cresamba		NP	loratadine D	SCN	P	rasagiline		NP	olanzapine*		P
Grifulvin V Tablets		NP	desloratadine		NP	ropinirole ER		NP	olanzapine ODT*		P
Oravig		NP	desloratadine ODT		NP	tolcapone		NP	perphenazine*		P
Tolsura		NP	fexofenadine OTC	SCN	NP	Azilect		NP	pimozide*		P
Vfend		NP	levocetirizine solution		NP	Comtan		NP	quetiapine*		P
Antifungals, Topical			Clarinox		NP	Gocovri ER	SCN	NP	quetiapine fumarate ER*		P
ciclopirox solution		P	Clarinox D		NP	Inbrija	SCN	NP	risperidone*		P
clotrimazole OTC	SCN	P	Semprex-D	SCN	NP	Kynmobi film	SCN	NP	thiothixene*	SCN	P
clotrimazole Rx		P	Antihypertensives, Sympatholytics			Neupro patches		NP	trifluoperazine*		P
clotrimazole/betamethasone cream		P	clonidine (oral)		P	Nouriaz tablets	SCN	NP	ziprasidone capsules*		P
ketoconazole cream, shampoo		P	guanfacine		P	Ongentz	SCN	NP	Latuda*	SCN	P
miconazole OTC	SCN	P	methylidopa		P	Osmolex ER	SCN	NP	Vraylar*	SCN	P
nystatin		P	Catapres-TTS		P	Rytary ER	SCN	NP	asenapine (Gen-Saphris)		NP
tolnaftate OTC	SCN	P	clonidine trans patch		NP	Stalevo		NP	clozapine ODT*		NP
Alevazol	SCN	P	methylidopa/HCTZ	SCN	NP	Tasmar		NP	molindone tablets*		NP
ciclopirox cream, gel, shampoo, suspension		NP	Antiparasitics, Topical			Xadago	SCN	NP	olanzapine/fluoxetine*		NP
clotrimazole/betamethasone lotion		NP	permethrin OTC	SCN	P	Zelapar		NP	paliperidone ER tablets*		NP
econazole nitrate		NP	permethrin Rx		P	Antipsoriatics, Oral			thioridazine*		NP
ketoconazole foam		NP	Eurax Cream		P	acitretin		P	Abilify MyCite*		NP
luliconazole cream		NP	Natroba		P	methoxsalen		NP	Adasuve*		NP
miconazole/zinc/pet ointment	SCN	NP	ivermectin lotion (Gen-Sklice)		NP	Antipsoriatics, Topical			Caplyta*	SCN	NP
naftifine cream, gel		NP	malathion		NP	calcipotriene cream, ointment, solution		P	Fanapt*	SCN	NP
nystatin/triamcinolone		NP	spinosad		NP	Taclonex susp		P	Fazaclo*	SCN	NP
oxiconazole cream		NP	Crotan Lotion	SCN	NP	Vectical	SCN	P	Nuplazid*	SCN	NP
Bensal HP	SCN	NP	Eurax Lotion	SCN	NP	calcipotriene/betamethasone dipropionate ointment		NP	Rexulti*		NP
			Lindane		NP				Saphris*		NP

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

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

(Effective 02/01/2021)

Antipsychotics (cont)		
Secuado patch*	SCN	NP
Symbyax*		NP
Versacloz*	SCN	NP
*PA required for children 8 years of age and younger. Use PA Drug Attachment for Antipsychotic Drugs for Children 8 Years of Age and Younger.		
Antipsychotics, Injectable		
fluphenazine decanoate *		P
haloperidol decanoate*		P
Abilify Maintena*		
Aristada*	SCN	P
Aristada Initio ER*	SCN	P
Haldol Decanoate*		P
Invega Sustenna*		P
Invega Trinza*		P
Perseris ER*	SCN	P
Risperdal Consta*		P
Zyprexa Relprevv*		P
ziprasidone vial*		NP
*Policy for obtaining provider-administered drugs applies. Refer to topic #5697.		
Antivirals, Influenza		
oseltamivir		P
Relenza	SCN	P
rimantadine		NP
Tamiflu	SCN	NP
Xofluza		NP
Antivirals, Other		
acyclovir		P
valacyclovir		P
famciclovir		NP
Antivirals, Topical		
Zovirax cream, ointment		P
acyclovir cream, ointment		NP
Denavir	SCN	NP
Xerese		NP
Anxiolytics		
alprazolam ER		P
alprazolam intensol, tablet		P
bupirone		P
chlordiazepoxide		P

Anxiolytics (cont)		
diazepam solution, tablet		P
lorazepam intensol, tablet		P
alprazolam ODT		NP
clorazepate		NP
diazepam intensol		NP
meprobamate		NP
oxazepam		NP
BPH Agents, Alpha Reductase Inhibitors		
dutasteride		P
finasteride		P
dutasteride/tamsulosin	SCN	NP
BPH Agents, Androgenic		
alfuzosin		P
tamsulosin		P
terazosin		P
doxazosin		NP
silodosin capsule		NP
Cardura XL		NP
Rapaflo		NP
Beta Blockers		
atenolol		P
atenolol/chlorthalidone		P
bisoprolol		P
bisoprolol/HCTZ		P
carvedilol		P
labetalol		P
metoprolol		P
metoprolol ER		P
propranolol		P
propranolol ER		P
sotalol		P
acebutolol		NP
betaxolol		NP
carvedilol ER		NP
metoprolol/HCTZ		NP
nadolol		NP
nadolol bendroflumethiazide tabs		NP
pindolol		NP
propranolol/HCTZ	SCN	NP
timolol		NP
Bystolic	SCN	NP
Coreg CR	SCN	NP
Hemangeol	SCN	NP

Beta Blockers (cont)		
Inderal XL		NP
Innopran XL		NP
Kapsargo sprinkles		NP
Levatol		NP
Lopressor HCT		NP
Sotylize		NP
Bile Salts		
ursodiol		P
Chenodal	SCN	NP
Cholbam	SCN	NP
Ocaliva	SCN	NP
Bladder Relaxant Preparations		
darifenacin ER		P
oxybutynin tab, ER tab, syrup		P
solifenacin tabs		P
Toviaz		P
tolterodine		NP
tolterodine ER		NP
tropium		NP
tropium ER		NP
Detrol		NP
Detrol LA		NP
Gelnique		NP
Myrbetriq ER		NP
Oxytrol	SCN	NP
Bone Resorption Suppression		
alendronate		P
calcitonin-salmon nasal		P
ibandronate		P
Forteo		P
alendronate sodium solution	SCN	NP
etidronate		NP
raloxifene		NP
risedronate		NP
teriparatide		NP
Actonel	SCN	NP
Atelvia	SCN	NP
Binosto	SCN	NP
Boniva	SCN	NP
Fosamax Plus D		NP
Tymlos		NP
Bronchodilators, Beta Agonists		
albuterol		P

Bronchodilators, Beta Agonists (cont)		
albuterol ER	SCN	P
albuterol HFA*		P
albuterol neb (2.5mg/0.5ml)		P
albuterol neb (2.5mg/3ml)		P
albuterol neb (100mg/20ml)		P
albuterol neb low-dose (0.63mg/3ml)		P
albuterol neb low-dose (1.25mg/3ml)		P
terbutaline tablets		P
Proair HFA		P
Serevent	SCN	P
Ventolin HFA	SCN	P
levalbuterol nebulizer		NP
levalbuterol HFA		NP
metaproterenol		NP
Arcapta		NP
Brovana	SCN	NP
Perforomist	SCN	NP
ProAir Digihaler		NP
ProAir Respiclick		NP
Proventil HFA		NP
Striverdi Respimat		NP
Xopenex HFA	SCN	NP
* NOTE: Product added temporarily during the public health COVID-19 emergency		
Calcium Channel Blocking Agents		
amlodipine		P
diltiazem		P
diltiazem ER capsules	SCN	P
nifedipine ER		P
nifedipine IR		P
nimodipine		P
verapamil tablets		P
verapamil ER tablet		P
verapamil SR tablet		P
diltiazem ER tablets	SCN	NP
felodipine ER		NP
isradipine		NP
nicardipine		NP
nisoldipine	SCN	NP
verapamil ER capsule	SCN	NP
verapamil SR capsule		NP

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

(Effective 02/01/2021)

Calcium Channel Blocking Agents (cont)			Cytokine and CAM Antagonists (cont)			Fluoroquinolones (cont)			Glucocorticoids, Inhaled (cont)		
verapamil ER PM	SCN	NP	Otezla		P	ciprofloxacin ER	SCN	NP	Breztri Aerosphere HFA		NP
verapamil 360mg capsule		NP	Actemra	SCN	NP	levofloxacin solution		NP	Qvar Redihaler		NP
Cardizem LA		NP	Cosentyx		NP	moxifloxacin		NP	Trelegy Ellipta	SCN	NP
Katerzia suspension	SCN	NP	Cimzia		NP	ofloxacin		NP	Wixela Inhalation	SCN	NP
Matzim LA		NP	Enspryng	SCN	NP	Avelox		NP	Glucocorticoids, Oral		
Nymalize		NP	Kevzara		NP	Baxdela tablet	SCN	NP	budesonide EC capsule		P
COPD Agents			Kineret		NP	Cipro suspension		NP	dexamethasone elixir, intensol, solution, tablet		P
ipratropium nebulizer		P	Olumiant		NP	GI Motility, Chronic – Constipation			hydrocortisone		P
ipratropium/albuterol nebulizer		P	Orencia		NP	Amitiza		P	methylprednisolone Dose PK		P
Anoro Ellipta	SCN	P	Rinvoq ER		NP	Linzess	SCN	P	methylprednisolone tablet		P
Atrovent HFA		P	Siliq		NP	Movantik		P	prednisolone solution 5mg/5ml	SCN	P
Combivent Respimat		P	Simponi		NP	Motegrity		NP	prednisolone solution 15mg/5ml		
Spiriva		P	Skyrizi		NP	Relistor tablet		NP	prednisolone sod phosphate ODT	SCN	P
Stiolto Respimat		P	Stelara		NP	Symproic		NP	prednisolone sod phosphate solution 25mg/5ml		P
Bevespi Aerosphere		NP	Taltz		NP	Trulance	SCN	NP	prednisone dose pack, intensol, solution, tablet		P
Breztri Aerosphere HFA		NP	Tremfya		NP	GI Motility, Chronic – Diarrhea			cortisone		NP
Daliresp		NP	Xeljanz		NP	Lotronex	SCN	P	dexamethasone Dose PK		NP
Duaklir Pressair	SCN	NP	Xeljanz XR		NP	Xifaxan 550mg		P	prednisolone solution 10mg/5ml (Gen-Millipred)		NP
Incruse Ellipta	SCN	NP	Epinephrine, Self-Injected			alosetron		NP	prednisolone solution 20mg/5ml (Gen-Veripred)		NP
Lonhala Magnair Kits	SCN	NP	epinephrine (AG EpiPen and AG EpiPen JR)	SCN	P	Viberzi	SCN	NP	Alkindi sprinkle	SCN	NP
Seebri Neohaler		NP	epinephrine (Gen-EpiPen and EpiPen JR)	SCN	NP	Glucocorticoids, Inhaled			Decadron	SCN	NP
Spiriva Respimat		NP	epinephrine (Gen-Adrenaclick)		NP	budesonide respules		P	Dexpak		NP
Trelegy Ellipta	SCN	NP	EpiPen JR	SCN	NP	Advair Diskus	SCN	P	Dxevo tablet	SCN	NP
Tudorza Pressair		NP	EpiPen	SCN	NP	Advair HFA	SCN	P	Emlaza	SCN	NP
Utibron Neohaler		NP	Symjepi		NP	Asmanex		P	Hemady	SCN	NP
Yupelri	SCN	NP	Erythropoiesis Stimulating Proteins			Dulera		P	Medrol tablet		NP
Cough and Cold – Narcotic Liquids			Aranesp		P	Flovent Diskus	SCN	P	Millipred dose pack, solution, tabs	SCN	NP
guaifenesin/codeine		P	Retacrit	SCN	P	Flovent HFA	SCN	P	Ortikos ER capsule	SCN	NP
phenylephrine/promethazine/codeine		P	Epogen		NP	Pulmicort Flexhaler		P	Rayos tablet DR	SCN	NP
promethazine/codeine		P	Mircera	SCN	NP	Symbicort		P	TaperDex	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.			Procrit	SCN	NP	budesonide/formoterol (Gen-Symbicort)	SCN	NP	Gout Agents		
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.			Fibromyalgia			fluticasone/salmeterol (Gen-Advair Diskus)	SCN	NP	allopurinol		P
NOTE: Coverage information for non-narcotic OTC cough and cold products can be found in the Over-the-Counter Drugs data tables on the Pharmacy page of the Providers area of the Portal.			duloxetine DR 20mg, 30mg, 60mg caps		P	fluticasone/salmeterol (Gen-Airduo Resplick)		NP	indomethacin		P
Cytokine and CAM Antagonists			pregabalin (Gen-Lyrica)		P	AirDuo Digihaler		NP	naproxen Rx		P
Enbrel		P	Savella	SCN	P	AirDuo Resplick		NP	probenecid		P
Humira		P	duloxetine 40mg DR caps		NP	Alvesco Inhaler	SCN	NP	probenecid/colchicine		P
			Fluoroquinolones			Armonair Digihaler	SCN	NP			
			ciprofloxacin		P	Arnuity Ellipta	SCN	NP			
			levofloxacin tablets		P	Asmanex HFA		NP			
			ciprofloxacin suspension		NP	Breo Ellipta Inhaler	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

(Effective 02/01/2021)

Gout Agents (cont)		
Mitigare	SCN	P
colchicine capsule (Gen-Mitigare)		NP
colchicine tablet (Gen-Colcrys)		NP
febuxostat tab (Gen-Uloric)	SCN	NP
naproxen suspension		NP
Colcrys		NP
Gloperba solution	SCN	NP
Uloric		NP
Growth Hormone		
Genotropin		P
Norditropin	SCN	P
Humatrope		NP
Nutropin AQ		NP
Omnitrope		NP
Saizen		NP
Serostim	SCN	NP
Zomacton	SCN	NP
Zorbtive	SCN	NP
Headache Agents, Acute Treatment		
Emgality 100mg*		NP
Nurtec ODT	SCN	NP
Reyvow		NP
Ubrely	SCN	NP
* NOTE: Emgality 100mg strength only for cluster headaches		
Headache Agents, Preventative Treatment		
Ajovy		P
Emgality 120mg		P
Aimovig		NP
Headache Agents, Triptans Injectable		
sumatriptan injectable		P
Zembrace	SCN	NP
Headache Agents, Triptans Non-Injectable		
eletriptan		P
naratriptan		P
rizatriptan		P
sumatriptan nasal spray, tablets		P
almotriptan		NP
frovatriptan		NP
sumatriptan/naproxen tablets		NP
zolmitriptan ODT, tablets		NP
Onzetra	SCN	NP

Headache Agents, Triptans Non-Injectable (cont)		
Tosymra nasal spray	SCN	NP
Treximet	SCN	NP
Zomig nasal spray	SCN	NP
H. Pylori		
lansoprazole/amoxicillin/clarithromycin		P
Pylera		P
Talicia		NP
Helilidac	SCN	NP
Omeclamox Pak	SCN	NP
Hepatitis B Agents		
entecavir tablet		P
lamivudine	SCN	P
Baraclude solution		P
Epivir HBV	SCN	P
Hepsera		P
adefovir dipivoxal		NP
Vemlidy		NP
Hepatitis C Agents		
sofosbuvir/velpatasvir (Gen-Epclusa)	SCN	P
Epclusa		P
Mavyret		P
ledipasvir/sofosbuvir (Gen-Harvoni)	SCN	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
Rebetol solution		NP
Ribapak		NP
Ribasphere		NP
H2 Antagonists		
cimetidine solution, tablet		P
famotidine tablet		P
famotidine suspension*		NP
nizatidine capsules, solution		NP

H2 Antagonists (cont)		
*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		
Glyxambi		P
Janumet		P
Janumet XR		P
Januvia		P
Jentaduetto		P
Tradjenta		P
alogliptin		NP
alogliptin/metformin		NP
alogliptin/pioglitazone		NP
Jentaduetto XR		NP
Kazano		NP
Kombiglyze XR		NP
Nesina		NP
Onglyza		NP
Oseni		NP
Hypoglycemics, GLP 1		
Bydureon Pen		P
Byetta		P
Trulicity		P
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		
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

Hypoglycemics, Insulins (cont)		
Humulin R U-500 Kwikpen/Vial		P
Novolog Mix	SCN	P
Novolog U-100 Cartridge/Pen/Vial	SCN	P
insulin aspart U-100 cartridge/pen/vial (Gen-Novolog)	SCN	NP
insulin aspart/protamine pen/vial (Gen-Novolog Mix)	SCN	NP
insulin lispro Jr Kwikpen (Gen-Humalog Jr Kwikpen)		NP
insulin lispro mix (Gen-Humalog Mix)		NP
insulin lispro U-100 Kwikpen / Vial (Gen-Humalog Kwikpen/Vial)	SCN	NP
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
Basaglar		NP
Semglee	SCN	NP
Toujeo Solostar		NP
Toujeo Max Solostar		NP
Tresiba Flextouch	SCN	NP
Tresiba vial	SCN	NP
Hypoglycemics, Meglitinides		
repaglinide		P
nateglinide		NP
repaglinide/metformin		NP
Hypoglycemics, Other		
metformin		P
metformin ER (Gen-Glucophage)		P
Farxiga		P
Invokamet		P
Invokana		P
Jardiance		P
Welchol		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

(Effective 02/01/2021)

Hypoglycemics, Other (cont)			Immunomodulators, Atopic Dermatitis (cont)			Lipotropics, Bile Acid Sequestrants (cont)			Methotrexate			
Xigduo XR		P	Eucrisa 2%	SCN	NP	Colestid granules		NP	methotrexate tablet		P	
colesevelam (Gen-Welchol)		NP	Immunomodulators, Topical			Lipotropics, Fibrates			methotrexate PF vial		P	
metformin ER (Gen-Glumetza ER)		NP	imiquimod 5% cream		P	fenofibrate tab (Gen-Tricor)		P	methotrexate vial		P	
metformin ER OSM-tab		NP	imiquimod 3.75% cream	SCN	NP	fenofibric acid (Gen-Trilipix)		P	Otrexup Auto Injector	SCN	NP	
metformin solution (Gen-Riomet solution)	SCN	NP	Zyclara		NP	gemfibrozil		P	Rasuvo Auto Injector		NP	
Cycloset		NP	Intranasal Rhinitis Agents			fenofibrate (Gen-Antara, Fenoglide, Lipofen, Lofibra)		NP	Trexall tablet	SCN	NP	
Glumetza ER		NP	azelastine (Gen-Astelina)		P	fenofibrate (Gen-Triglide)	SCN	NP	Movement Disorders			
Invokamet XR		NP	fluticasone RX		P	fenofibric acid (Gen-Fibrocor)		NP	tetrabenazine	DR	P	
Qtern		NP	ipratropium		P	Antara	SCN	NP	Austedo	DR	P	
Riomet solution		NP	Beconase AQ	SCN	P	Fenoglide		NP	Ingrezza	DR	SCN	P
Riomet ER solution		NP	azelastine (Gen-Astepro)		NP	Fibracor	SCN	NP	Multiple Sclerosis Agents, Immunomodulators			
Segluromet		NP	azelastine/fluticasone (Gen-Dymista)		NP	Lipofen	SCN	NP	Aubagio		P	
Steglatro		NP	flunisolide		NP	Triglide	SCN	NP	Avonex		P	
Steglujan		NP	mometasone furoate spray*		NP	Lipotropics, Niacin			Betaseron		P	
Synjardy		NP	olopatadine nasal spray		NP	niacin ER tabs (RX)		P	Copaxone 20mg, 40mg		P	
Synjardy XR		NP	Astepro		NP	Niacor		P	Gilenya		P	
Trijardy XR		NP	Dymista		NP	Lipotropics, Omega-3 Acids			Rebif	SCN	P	
Hypoglycemics, Sulfonylureas			Omnamis	SCN	NP	omega-3 acid ethyl esters		P	Tecfidera	SCN	P	
glimepiride		P	Qnasl		NP	icosapent ethyl caps (Gen-Vascepa)		NP	dimethyl fumarate DR capsule (Gen-Tecfidera)	SCN	NP	
glipizide		P	Xhance	SCN	NP	Vascepa	SCN	NP	glatiramer	SCN	NP	
glipizide ER		P	Zetonna	SCN	NP	Lipotropics, Other			Bafiertam DR capsule	SCN	NP	
glyburide		P	*Prior Authorization not required for members 6 years of age and younger.			atorvastatin		P	Extavia		NP	
glyburide/metformin		P	Leukotriene Modifiers			ezetimibe		P	Glatopa		NP	
chlorpropamide	SCN	NP	montelukast chewable tab, tablets		P	lovastatin		P	Kesimpta		NP	
glipizide/metformin		NP	montelukast granules		NP	pravastatin		P	Mavenclad	SCN	NP	
tolazamide	SCN	NP	zafirlukast		NP	rosuvastatin		P	Mayzent		NP	
tolbutamide	SCN	NP	zileuton ER		NP	simvastatin		P	Plegridy	SCN	NP	
Hypoglycemics, Symlin			Zyflo	SCN	NP	amlodipine/atorvastatin		NP	Vumerity DR capsule	SCN	NP	
Symlin		P	Lipotropics, ACL Inhibitors			ezetimibe/simvastatin		NP	Zeposia capsule		NP	
Hypoglycemics, Thiazolidinediones			Nexletol	SCN	NP	fluvastatin		NP	Multiple Sclerosis Agents, Other			
pioglitazone		P	Nexlizet	SCN	NP	fluvastatin ER		NP	Amprya	DR	SCN	P
pioglitazone-glimepiride		NP	Lipotropics, Apo-B Inhibitors			Altoprev	SCN	NP	dalfampridine ER	DR	SCN	NP
pioglitazone-metformin		NP	Juxtapid	SCN	NP	Caduet		NP	Neuropathic Pain			
Actoplus MET		NP	Kynamro	SCN	NP	Ezallor sprinkles		NP	duloxetine DR 20mg, 30mg, 60mg caps		P	
Actoplus MET XR		NP	Lipotropics, Bile Acid Sequestrants			Lescol XL		NP	gabapentin		P	
Avandia	SCN	NP	cholestyramine		P	Livalo	SCN	NP	pregabalin (Gen-Lyrica)		P	
Immunomodulators, Atopic Dermatitis			colestipol tablet		P	Vytorin		NP	duloxetine 40mg DR caps		NP	
Elidel		P	Welchol		P	Zypitamag	SCN	NP	Drizalma sprinkle DR		NP	
Protopic	SCN	P	colesevelam (Gen-Welchol)		NP	Lipotropics, PCSK9 Inhibitors			Gralise	DR	SCN	NP
pimecrolimus cream	SCN	NP	colestipol granules		NP	Praluent		NP	Horizant	DR	NP	
tacrolimus		NP										
Dupixent		NP										

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

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

(Effective 02/01/2021)

NSAIDs			NSAIDs (cont)			Ophthalmics, Antibacterial (cont)			Ophthalmics, Anti-Inflammatories (cont)		
celecoxib cap		P	Naprelan CR		NP	levofloxacin		NP	prednisolone sodium phosphate		NP
diclofenac potassium		P	Relafen DS	SCN	NP	moxifloxacin (Gen-Moxeza)	SCN	NP	Acuvail		NP
diclofenac sodium		P	Sprix	SCN	NP	neomycin/bacitracin/polymyxin ointment		NP	Bromsite		NP
diclofenac ER		P	Tivorbex	SCN	NP	neomycin/polymyxin/gramicidin		NP	FML Liquifilm		NP
flurbiprofen		P	Vimovo	SCN	NP	sulfacetamide ointment		NP	FML S.O.P.	SCN	NP
ibuprofen Rx		P	Vivlodex	SCN	NP	triple antibiotic		NP	Inveltys	SCN	NP
ibuprofen OTC chew tab 100mg*		P	Qmiiz	SCN	NP	Azasite		NP	Lotemax gel, ointment		NP
ibuprofen OTC	SCN	P	Zipsor	SCN	NP	Besivance		NP	Nevanac		NP
indomethacin caps		P	Zorvolex	SCN	NP	Moxeza		NP	Prolensa		NP
ketorolac		P	* Products are only covered for members 12 years of age or younger			Natacyn		NP	Ophthalmics, Anti-Inflammatory / Immunomodulator		
meloxicam tablets		P	Ophthalmics, Allergic Conjunctivitis			Zymaxid		NP	Restasis	SCN	P
nabumetone		P	cromolyn		P	Ophthalmics, Antibiotic-Steroid Combinations			Cequa solution		NP
naproxen Rx		P	ketorolac 0.5%		P	neomycin/polymyxin/dexamethasone		P	Eysuvis eye drops	SCN	NP
naproxen DS Rx		P	ketotifen OTC	SCN	P	sulfacetamide/prednisolone		P	Restasis Multidose	SCN	NP
naproxen OTC	SCN	P	olopatadine 0.1% drops (Gen-Patanol)		P	Blephamide	SCN	P	Xiidra		NP
sulindac		P	Alaway OTC	SCN	P	Pred-G drops		P	Ophthalmics, Glaucoma-Beta Blockers		
diclofenac sodium/misoprostol		NP	Alrex		P	Tobradex ointment, suspension		P	carteolol		P
diclofenac solution		NP	Pazeo		P	neomycin/bacitracin/poly/HC		NP	levobunolol		P
diflunisal		NP	azelastine		NP	neomycin/polymyxin/HC drops		NP	timolol (Gen-Timoptic/XE)		P
etodolac		NP	epinastine		NP	tobramycin/dexamethasone		NP	Betoptic S		P
etodolac XL		NP	olopatadine 0.2% drops (Gen-Pataday)		NP	Blephamide S.O.P.	SCN	NP	betaxolol		NP
fenoprofen	SCN	NP	Alocril		NP	Pred-G ointment		NP	timolol (Gen-Istalol)		NP
indomethacin ER		NP	Alomide		NP	Tobradex ST		NP	timolol (Gen-Timoptic Ocudose)		NP
ketoprofen		NP	Bepreve		NP	Zylet		NP	Istalol		NP
ketoprofen ER caps	SCN	NP	Lastacraft		NP	Ophthalmics, Anti-Inflammatories			Timoptic Ocudose		NP
ketorolac nasal spray (Gen-Sprix)	SCN	NP	Zerviate drops	SCN	NP	dexamethasone		P	Ophthalmics, Glaucoma-Other		
meclizemate	SCN	NP	Ophthalmics, Antibacterial			diclofenac eye drop		P	brimonidine 0.2%		P
mefenamic acid		NP	ciprofloxacin solution		P	fluorometholone		P	dorzolamide		P
meloxicam capsule (Gen-Vivlodex)	SCN	NP	erythromycin		P	flurbiprofen		P	dorzolamide w/timolol		P
naproxen CR		NP	gentamicin drops		P	ketorolac LS 0.4%		P	pilocarpine		P
naproxen/esomeprazole DR (Gen-Vimovo)		NP	moxifloxacin (Gen-Vigamox)		P	prednisolone acetate		P	Alphagan P 0.15%	SCN	P
naproxen EC	SCN	NP	moxifloxacin		P	Durezol		P	Azopt		P
naproxen sodium Rx		NP	ofloxacin		P	Flarex		P	Combigan	SCN	P
naproxen suspension	SCN	NP	polymyxin/trimethoprim		P	FML Forte		P	Isopto Carpine 2%		P
oxaprozin		NP	sulfacetamide solution		P	illevro		P	Rhopressa	SCN	P
piroxicam		NP	tobramycin		P	Lotemax solution		P	Rocklatan		P
tolmetin		NP	Ciloxan ointment		P	Maxidex		P	Simbrinza		P
Cambia	SCN	NP	Tobrex ointment		P	Pred Mild	SCN	P	apraclonidine		NP
Duexis	SCN	NP	bacitracin		NP	bromfenac		NP	brimonidine tartrate 0.15%		NP
Indocin suppository, suspension	SCN	NP	bacitracin/polymyxin		NP	loteprednol drop (Gen-Lotemax)		NP	Alphagan P 0.1%	SCN	NP
Nalfon	SCN	NP	gatifloxacin		NP	omnipred		NP	Cosopt PF		NP
									lopidine		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

(Effective 02/01/2021)

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
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
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

Otics, Antibiotics (cont)			
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			NP
Viokace			NP
*Prior Authorization not required for members 1 year of age and younger.			
Phosphate Binders			
calcium acetate 667mg capsules, tablets			P
Phoslyra	SCN		P
Renagel			P
lanthanum carbonate			NP
sevelamer (Gen-Renagel)			NP
sevelamer (Gen-Renvela)			NP
Auryxia	SCN		NP
Eliphos	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
ticlopidine			NP
Yosprala	SCN		NP
Zontivity			NP

Prenatal Vitamins			
prenatal vitamin plus low iron	SCN		P
Completenate tablet chew	SCN		P
Concept DHA capsule	SCN		P
Concept OB capsule	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 tab	SCN		P
Pretab 29mg-1mg tablet	SCN		P
Provida OB capsule	SCN		P
Purefe OB plus capsule	SCN		P
Purefe plus capsule	SCN		P
SE-Natal 19 chewable tablet	SCN		P
SE-Natal 19 tablet	SCN		P
Taron-C DHA capsule	SCN		P
Thrivite 19 tablet	SCN		P
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.			NP
Proton Pump Inhibitors			
esomeprazole magnesium			P
lansoprazole DR RX			P
omeprazole RX			P
pantoprazole			P
Nexium DR			P
Prilosec suspension			P
Protonix suspension			P
esomeprazole DR		SCN	NP
(Gen-Nexium DR)			
esomeprazole strontium			NP
lansoprazole ODT solutab			NP
(Gen-Prevacid solutab)			
omeprazole-bicarb RX			NP

Proton Pump Inhibitors (cont)			
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
bosentan tablet (Gen-Tracleer tablet)			NP
sildenafil suspension	DR	SCN	NP
Adempas			NP
Alyq	DR		NP
Orenitram ER		SCN	NP
Revatio suspension	DR		NP
Tracleer suspension			NP
Tyvaso		SCN	NP
Upravi			NP
Ventavis			NP
Sedative Hypnotics			
estazolam			P
eszopiclone			P
melatonin tablets			P
temazepam 15mg, 30mg			P
triazolam			P
zaleplon			P
zolpidem			P
Rozerem			P
doxepin tablet (Gen-Silenor)	SCN		NP
flurazepam	SCN		NP
ramelteon tab (Gen-Rozerem)			NP
temazepam 7.5mg, 22.5mg			NP
zolpidem ER			NP
zolpidem SL			NP
Belsomra			NP
Dayvigo			NP
Edluar			NP
Intermezzo			NP
Silenor			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

(Effective 02/01/2021)

Skeletal Muscle Relaxants			Steroids, Topical Medium (cont)			Steroids, Topical Very High (cont)			Stimulants (cont)			
baclofen		P	fluocinolone cream	SCN	NP	Apexicon E		SCN	NP	dextroamphetamine ER	DR	NP
chlorzoxazone 500mg tablet		P	fluocinolone solution, ointment		NP	Bryhali lotion			NP	dextroamphetamine solution*	DR	SCN
cyclobenzaprine tablet		P	hydrocortisone butyrate cream, ointment, lotion, solution		NP	Clobex spray		SCN	NP	methylphenidate ER caps (Gen-Aptensio XR)	DR	NP
dantrolene sodium		P	hydrocortisone valerate		NP	Impeklo lotion		SCN	NP	methylphenidate ER tablet (Gen-Concerta)	DR	NP
methocarbamol		P	prednicarbate cream	SCN	NP	Lexette foam			NP	methylphenidate ER 72mg tab (Gen-Relexxii)	DR	SCN
tizanidine tablet		P	prednicarbate ointment		NP	Olux-E		SCN	NP	methamphetamine	DR	NP
carisoprodol		NP	Beser lotion	SCN	NP	Ultravate lotion		SCN	NP	Adderall	DR	SCN
carisoprodol compound		NP	Cloderm		NP					Adderall XR	DR	NP
chlorzoxazone 375mg,750mg tablets	SCN	NP	Cordran Tape		NP	Stimulants				Adhansia XR	DR	SCN
cyclobenzaprine 7.5mg tablet		NP	Cutivate lotion	SCN	NP	dexmethylphenidate	DR		P	Adzenys ER susp	DR	SCN
cyclobenzaprine ER capsule		NP	Dermatop		NP	methylphenidate tab (Gen-Ritalin)	DR		P	Adzenys XR ODT	DR	SCN
metaxalone		NP	Luxiq	SCN	NP	methylphenidate CD	DR		P	Cotempla XR	DR	SCN
orphenadrine		NP	Pandel	SCN	NP	methylphenidate chew tab (Gen-Methylin chew)	DR		P	Dexedrine*	DR	SCN
tizanidine capsule		NP	Synalar	SCN	NP	methylphenidate ER tab (Gen-Metadate ER and Methylin ER)	DR		P	Dyanavel XR	DR	SCN
Amrix		NP				methylphenidate LA caps (Gen-Ritalin LA)	DR		P	Evekeo*	DR	NP
Fexmid		NP	Steroids, Topical High			methylphenidate solution (Gen-Methylin solution)	DR		P	Evekeo ODT*	DR	NP
Lorzone	SCN	NP	betamethasone valerate		P	Aptensio XR	DR		P	Jornay PM	DR	SCN
Metaxall	SCN	NP	triamcinolone acetonide		P	Concerta	DR		P	Mydayis ER	DR	NP
Norgesic Forte tablet	SCN	NP	amcinonide		NP	Daytrana	DR	SCN	P	Relexxii ER	DR	SCN
Soma		NP	betamethasone dipropionate		NP	Focalin	DR		P	Ritalin LA	DR	NP
			desoximetasone		NP	Focalin XR	DR		P	Zenzedi*	DR	NP
			diflorasone diacetate		NP	Methylin solution	DR	SCN	P			
			fluocinonide		NP	Quillichew ER	DR	SCN	P			
			halcinonide cream (Gen-Halog)	SCN	NP	Quillivant XR	DR	SCN	P			
			triamcinolone aerosol spray		NP	Vyvanse	DR		P			
			Diprolene ointment		NP	Vyvanse chewable	DR		P			
			Halog cream, ointment, solution		NP	amphetamine ER susp (Gen-Adzenys ER susp)	DR	SCN	NP			
			Kenalog aerosol spray		NP	dextroamphetamine-amphetamine*	DR		NP			
			Sernivo 0.05% spray	SCN	NP	dextroamphetamine-amphetamine ER	DR		NP			
			Topicort 0.05% ointment		NP	amphetamine sulfate (Gen-Evekeo)*	DR		NP			
			Topicort 0.25% spray		NP	dexamethylphenidate ER caps	DR		NP			
			Trianex	SCN	NP	dextroamphetamine*	DR		NP			
			Steroids, Topical Very High									
			clobetasol cream, ointment, solution, gel, emollient		P							
			halobetasol propionate cream, ointment		P							
			Clobex lotion, shampoo	SCN	P							
			betamethasone dipropionate augmented		NP							
			clobetasol foam, lotion, shampoo, spray		NP							
			halobetasol propionate foam		NP							

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

Stimulants, Related Agents

atomoxetine		P
clonidine ER		P
guanfacine ER		P

Stimulants, Related Agents – Wake Promoting

armodafinil		P
modafinil		P
Sunosi	SCN	NP

Ulcerative Colitis

balsalazide		P
budesonide ER tablet		P
sulfasalazine		P
Apriso		P
Canasa		P
Lialda		P
Rowasa Kits	SCN	P

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

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

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 (Effective 02/01/2021)

Ulcerative Colitis (cont)		
mesalamine DR capsule (Gen-Delzicol)		NP
mesalamine DR tablet (Gen-Lialda)		NP
mesalamine ER caps (Gen-Apriso)	SCN	NP
mesalamine kits	SCN	NP
mesalamine rectal		NP
Asacol HD		NP
Delzicol		NP
Dipentum		NP
Giazo		NP
Pentasa		NP
Uceris foam		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
Concerta	01/01/2018
Depakote sprinkle	01/01/2021
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
Mitigare	01/01/2021
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