

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

(Effective 08/01/2018)

KEY:

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

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

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

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

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

(Effective 08/01/2018)

Acne Agents, Topical			
benzoyl peroxide OTC 2.5%	SCN	P	
benzoyl peroxide OTC 5%	SCN	P	
benzoyl peroxide OTC 10%	SCN	P	
clindamycin gel		P	
clindamycin solution		P	
erythromycin solution		P	
Azelex	SCN	P	
Differin 0.1% cream	SCN	P	
Differin 0.1% lotion	SCN	P	
Differin 0.3% gel pump	SCN	P	
Epiduo	SCN	P	
Retin-A (not micro)		P	
Note: Topical federal legend acne drugs not listed are either non-preferred or noncovered.			NP
Alzheimer's Agents			
donepezil 5mg			P
donepezil 10mg			P
donepezil 5mg ODT			P
donepezil 10mg ODT			P
memantine solution *			P
memantine tablet *			P
memantine Titr PK *			P
rivastigmine caps			P
Exelon patch			P
donepezil 23mg			NP
galantamine			NP
galantamine ER			NP
galantamine solution			NP
memantine ER caps *	DR		NP
rivastigmine patch			NP
Namenda XR *	DR	SCN	NP
Namzaric capsule			NP

Alzheimer's Agents (cont)			
Namzaric dose pack			NP
*memantine products are not covered for members 17 years of age or younger			
Analgesics/Anesthetics, Topical			
capsaicin OTC	SCN	P	
lidocaine 5% ointment		P	
lidocaine 5% trans patch		P	
Voltaren		P	
diclofenac 1% gel		NP	
diclofenac 1.5% soln		NP	
Flector		NP	
Pennsaid	SCN	NP	
Analgesics, Miscellaneous			
acetaminophen	SCN	P	
aspirin	SCN	P	
ibuprofen OTC chewable	SCN	P	
ibuprofen OTC suspension	SCN	P	
ibuprofen OTC tablets	SCN	P	
naproxen OTC	SCN	P	
butalbital/apap		NP	
butalbital/apap/caffeine		NP	
butalbital/apap/caffeine/codeine		NP	
butalbital/asa/caffeine		NP	
butalbital/asa/caffeine/codeine		NP	
Bupap	SCN	NP	
Analgesics, Opioids Long-Acting			
fentanyl transdermal 12mcg		P	
fentanyl transdermal 25mcg		P	
fentanyl transdermal 50mcg		P	
fentanyl transdermal 75mcg		P	
fentanyl transdermal 100mcg		P	
morphine ER tablets		P	
tramadol ER tab(Ultram ER)		P	

Analgesics, Opioids Long-Acting (cont)			
Butrans transdermal		P	
Embeda ER		P	
Hysingla ER		P	
buprenorphine transdermal		NP	
fentanyl transdermal 37.5mcg		NP	
fentanyl transdermal 62.5mcg		NP	
fentanyl transdermal 87.5mcg		NP	
hydromorphone ER		NP	
methadone tablet		NP	
methadone solution		NP	
morphine ER capsules		NP	
oxycodone ER		NP	
oxymorphone ER		NP	
tramadol ER cap (Conzip)	SCN	NP	
tramadol ER tab (Ryzolt)		NP	
Arymo ER	SCN	NP	
Belbuca Film		NP	
Conzip	SCN	NP	
Exalgo ER		NP	
Kadian		NP	
Morphabond ER		NP	
Nucynta ER		NP	
Oxycontin		NP	
Xartemis XR		NP	
Xtampza ER	SCN	NP	
Zohydro ER	SCN	NP	
Analgesics, Opioids Short-Acting			
codeine/apap		P	
codeine/asa		P	
hydromorphone		P	
hydrocodone/apap 325mg		P	
hydrocodone/ibuprofen		P	
morphine		P	
oxycodone solution		P	

Analgesics, Opioids Short-Acting (cont)			
oxycodone tablets		P	
oxycodone/apap 325mg		P	
tramadol		P	
butorphanol spray		NP	
codeine		NP	
dihydrocodeine/apap/caffeine		NP	
dihydrocodeine/asa/caffeine		NP	
levorphanol		NP	
hydrocodone/apap*		NP	
hydromorphone liquid		NP	
hydromorphone suppositories		NP	
meperidine		NP	
oxycodone/apap*		NP	
oxycodone/asa		NP	
oxycodone capsules		NP	
oxycodone conc		NP	
oxycodone/ibuprofen		NP	
oxymorphone		NP	
pentazocine/naloxone		NP	
tramadol/apap		NP	
Capital w-codeine		NP	
Dilaudid Liquid		NP	
Ibudone		NP	
Nucynta		NP	
Oxaydo	SCN	NP	
Primlev		NP	
Reprexain	SCN	NP	
Roxybond		NP	
Synalgos-DC		NP	
Vicodin 5/300		NP	
Vicodin 7.5/300		NP	
Vicodin 7.5/300		NP	
Xodol		NP	

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

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

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

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

Monthly Changes to the PDL

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

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

(Effective 08/01/2018)

Analgesics, Opioids Short-Acting (cont)		
Zamiset		NP
*Combination products containing any other strength of apap besides 325 mg.		
Analgesics, Opioids Short-Acting-Fentanyl Mucosal Agents		
fentanyl citrate oral transmucosal lozenges		NP
Abstral	SCN	NP
Fentora		NP
Lazanda	SCN	NP
Subsys	SCN	NP
Androgenic Agents		
Androgel		
testosterone gel		NP
testosterone pump		NP
Androderm		NP
Axiron		NP
Fortesta		NP
Natesto		NP
Testim	SCN	NP
Vogelxo		NP
Angiotensin Modulators, ACE Inhibitors		
benazepril		P
captopril		P
enalapril		P
enalapril/HCTZ		P
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

Angiotensin Modulators, ACE Inhibitors (cont)		
quinapril /HCTZ		NP
trandolapril		NP
Epaned *	SCN	NP
Qbrelis solution	SCN	NP
Prestalia	SCN	NP
*Prior Authorization is not required for members 12 years of age and younger.		
Angiotensin Modulators, ARBs and DRIs		
losartan		P
losartan /HCTZ		P
valsartan		P
valsartan/HCTZ		P
candesartan tablets		NP
candesartan HCTZ		NP
eprosartan mesylate	SCN	NP
irbesartan		NP
irbesartan/HCTZ		NP
olmesartan		NP
olmesartan/HCTZ		NP
telmisartan		NP
telmisartan/HCTZ		NP
Benicar		NP
Benicar /HCTZ		NP
Edarbi		NP
Edarbyclor		NP
Entresto		NP
Micardis		NP
Micardis/HCTZ		NP
Tekturna		NP
Tekturna /HCTZ		NP
Angiotensin Modulators, Combination		
amlodipine/benazepril		P
amlodipine/olmesartan		P
amlodipine/olmesartan/HCTZ		P

Angiotensin Modulators Combination (cont)		
amlodipine/valsartan		P
amlodipine/valsartan/HCTZ		P
telmisartan/amlodipine		NP
trandolapril/verapamil		NP
Amturnde		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 capsule		P
cefadroxil susp		P
cefdinir		P
cephalexin caps		P
cephalexin 750 mg	SCN	P
cephalexin susp		P
cefprozil	SCN	P
cefuroxime		P
dicloxacillin		P
penicillin		P
Augmentin 125 suspension		P
Ceftin 125 suspension	SCN	P
Ceftin 250 suspension	SCN	P
Suprax capsules	SCN	P
Suprax chew tab	SCN	P
Suprax tab	SCN	P
Suprax suspension	SCN	P
amoxicillin clavulanate XR		NP
amoxicillin ER 775 mg tab	SCN	NP
cefaclor susp	SCN	NP

Antibiotics, Beta-Lactam (cont)		
cefaclor tab ER		NP
cefadroxil tablet		NP
cefixime suspension		NP
cefepodoxime		NP
cephalexin tabs		NP
Daxbia	SCN	NP
Moxatag ER	SCN	NP
Spectracef		NP
Antibiotics, GI		
metronidazole tablets		P
neomycin		P
tinidazole		P
vancomycin		P
Xifaxan		P
metronidazole capsule		NP
Difidid		NP
Firvanq	SCN	NP
Flagyl ER		NP
Solosec	SCN	NP
Antibiotics, Inhaled		
Bethkis	SCN	P
Kitabis Pak	SCN	P
tobramycin		NP
Cayston		NP
Tobi		NP
Tobi Podhaler		NP
Antibiotics, Macrolides/Ketolides		
azithromycin		P
clarithromycin susp		P
clarithromycin tab		P
erythromycin cap/tab		P
erythromycin granules		P
E.E.S. Granules		P
E.E.S. Filmtab		P
Eryped		P
Ery-Tab EC		P

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

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

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

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

Monthly Changes to the PDL

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

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

(Effective 08/01/2018)

Antibiotics, Macrolides/Ketolides (cont)		
Erythrocin		P
PCE		P
clarithromycin ER tab		NP
erythromycin filmtab		NP
Ketek		NP
Zmax		NP
Antibiotics, Tetracyclines		
doxycycline hyclate 20mg		P
doxycycline monohydrate 50mg capsules		P
doxycycline monohydrate 100mg capsules		P
doxycycline monohydrate tablets		P
minocycline capsules		P
demeclocycline		NP
doxycycline hyclate DR		NP
doxycycline hyclate		NP
doxycycline monohydrate suspension		NP
doxycycline monohydrate 75mg capsules		NP
doxycycline monohydrate 150mg capsules		NP
minocycline tablets		NP
minocycline ER		NP
tetracycline		NP
Doryx DR		NP
Morgidox capsule	SCN	NP
Oracea		NP
Solodyn 55mg		NP
Solodyn 65mg		NP
Solodyn 80mg		NP
Solodyn 105mg		NP
Solodyn 115mg		NP
Vibramycin Syr/ Susp		NP
Ximino ER	SCN	NP

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

Anticonvulsants (cont)		
divalproex ER		P
divalproex sprinkles		P
ethosuximide		P
felbamate		P
gabapentin		P
lamotrigine		P
lamotrigine dispertabs		P
levetiracetam		P
levetiracetam solution		P
levetiracetam ER		P
oxcarbazepine		P
oxcarbazepine suspension		P
phenobarbital		P
phenytoin		P
primidone		P
topiramate		P
topiramate sprinkle		P
valproic acid		P
zonisamide		P
Celontin		P
Diastat		P
Dilantin 30mg cap		P
Dilantin Infatab		P
Gabitril		P
Lamictal Starter Kits	SCN	P
Lyrca		P
Peganone		P
Roweepra	SCN	P
Roweepra XR	SCN	P
Tegretol tab		P
Tegretol suspension		P
Tegretol XR		P
carbamazepine ER tab		NP
carbamazepine suspension		NP
carbamazepine tab		NP
clonazepam ODT		NP

Anticonvulsants (cont)		
diazepam rectal		NP
lamotrigine ER		NP
lamotrigine ODT		NP
tiagabine		NP
topiramate ER		NP
vigabatrin pwdr pk		NP
Aptiom	SCN	NP
Banzel		NP
Brievact		NP
Equetro		NP
Felbatol		NP
Fycompa		NP
Lamictal ODT	SCN	NP
Lamictal ODT Starter Kit	SCN	NP
Lamictal XR	SCN	NP
Lamictal XR Starter Kit	SCN	NP
Onfi	SCN	NP
Oxtellar XR	SCN	NP
Phenytek	SCN	NP
Potiga	SCN	NP
Qudexy		NP
Sabril	SCN	NP
Spritam	SCN	NP
Trileptal suspension		NP
Trokendi XR	SCN	NP
Vimpat		NP
Vimpat solution		NP
Antidepressants, Other		
bupropion		P
bupropion SR		P
bupropion XL		P
desvenlafaxine ER (Pristiq)		P
duloxetine 20 mg DR caps		P
duloxetine 30 mg DR caps		P
duloxetine 60 mg DR caps		P
mirtazapine		P

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

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

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

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

Monthly Changes to the PDL

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

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

(Effective 08/01/2018)

Antidepressants, Other (cont)		
phenelzine		P
tranylcypromine sulfate		P
trazodone		P
venlafaxine		P
venlafaxine ER capsules		P
Marplan		P
Nardil		P
desvenlafaxine ER (No Brand)		NP
desvenlafaxine fumarate ER		NP
desvenlafaxine ER (Khedezla)		NP
duloxetine 40 mg DR caps		NP
nefazodone		NP
venlafaxine ER tablets		NP
Aplenzin ER		NP
Emsam		NP
Fetzima		NP
Forfivo XL		NP
Khedezla ER tablets	SCN	NP
Trintellix		NP
Viibryd	SCN	NP
Antidepressants, SSRI		
citalopram		P
escitalopram		P
fluoxetine 10mg, 20mg, 40mg caps		P
fluoxetine solution		P
fluvoxamine		P
paroxetine		P
sertraline		P
Paxil suspension		P
fluoxetine 90 mg caps		NP
fluoxetine 10 mg ,20mg tablets		NP
fluoxetine 60 mg tablets		NP
fluvoxamine ER		NP
paroxetine 7.5mg capsules		NP
paroxetine CR	SCN	NP

Antidepressants, SSRI (cont)		
Brisdelle	SCN	NP
Pexeva	SCN	NP
Sarafem	SCN	NP
Antiemetics		
granisetron		P
metoclopramide		P
ondansetron		P
ondansetron ODT		P
ondansetron solution		P
prochlorperazine		P
prochlorperazine supp		P
trimethobenzamide caps		P
Emend Capsules		
aprepitant capsules		NP
metoclopramide ODT		NP
Akynzeo		NP
Forfivo XL		NP
Anzemet		NP
Emend Powder Packet		NP
Sancuso	SCN	NP
Varubi	SCN	NP
Zuplenz		NP
Antiemetics/Antivertigo		
dimenhydrinate OTC	SCN	P
meclizine		P
meclizine OTC	SCN	P
promethazine		P
promethazine supp		P
promethazine syrup		P
Diclegis	SCN	P
Transderm-Scop	SCN	P
scopolamine patch		NP
Bonjesta	SCN	NP
Antiemetics, Cannabinoids		
dronabinol		NP
Cesamet		NP
Syndros	SCN	NP

Antifungals, Oral		
clotrimazole troche		P
fluconazole		P
griseofulvin suspension		P
griseofulvin ultramicrosize		P
itraconazole		P
ketoconazole tablets		P
nystatin		P
terbinafine		P
Sporanox (liquid)		P
flucytosine		NP
griseofulvin microsize		NP
voriconazole 50mg		NP
voriconazole 200mg		NP
voriconazole suspension		NP
Ancobon		NP
Cresemba		NP
Grifulvin V Tablets		NP
Noxafil		NP
Onmel	DR	SCN
Oravig		NP
Vfend		NP
Antifungals, Topical		
ciclopirox solution		P
clotrimazole OTC	SCN	P
clotrimazole Rx		P
clotrimazole/ betamethasone cream		P
ketoconazole cream		P
ketoconazole shampoo		P
miconazole OTC	SCN	P
nystatin		P
tolnaftate OTC	SCN	P
Alevazol	SCN	P
ciclopirox cream		NP
ciclopirox gel		NP
ciclopirox shampoo		NP
ciclopirox suspension		NP

Antifungals, Topical (cont)		
clotrimazole/betamethasone lotion		NP
econazole nitrate		NP
ketoconazole foam		NP
naftifine		NP
nystatin/triamcinolone		NP
oxiconazole cream		NP
Bensal HP	SCN	NP
Ertaczo		NP
Exelderm	SCN	NP
Extina	SCN	NP
Jublia		NP
Kerydin	SCN	NP
Luzu cream		NP
Mentax	SCN	NP
Naftin	SCN	NP
Oxistat	SCN	NP
Vusion	SCN	NP
Note: Sprays and Kits are not covered.		
Antihistamines, Minimally Sedating		
cetirizine syrup	SCN	P
cetirizine tablets	SCN	P
cetirizine D	SCN	P
loratadine tablets	SCN	P
loratadine D	SCN	P
loratadine syrup	SCN	P
desloratadine		NP
desloratadine ODT		NP
fexofenadine OTC	SCN	NP
levocetirizine		NP
Clarinx		NP
Clarinx D		NP
Clarinx Syrup		NP
Semprex-D	SCN	NP
Xyzal Syrup	SCN	NP
Antihypertensives, Sympatholytics		
clonidine (oral)		P

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

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

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

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

Monthly Changes to the PDL

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

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

(Effective 08/01/2018)

Antihypertensives, Sympatholytics (cont)		
guanfacine		P
methylodopa		P
Catapres-TTS		P
clonidine trans patch		NP
methylodopa/HCTZ	SCN	NP
reserpine		NP
Antiparasitics, Topical		
permethrin OTC	SCN	P
permethrin Rx		P
Eurax Cream		P
Natroba		P
Sklice		P
malathion		NP
spinosad		NP
Eurax Lotion	SCN	NP
Lindane		NP
Antiparkinson's Agents		
amantadine		P
benztropine		P
bromocriptine		P
carbidopa/levodopa		P
carbidopa/levodopa ER		P
carbidopa/levodopa ODT		P
carbidopa/levodopa/entacapone		P
carbidopa 25mg tab		P
pramipexole		P
ropinirole		P
selegiline		P
trihexyphenidyl		P
entacapone		NP
pramipexole ER	DR	NP
rasagiline		NP
ropinirole ER	DR	NP
tolcapone		NP
Azilect		NP
Comtan		NP

Antiparkinson's Agents (cont)			
Gocovri ER		SCN	NP
Mirapex ER		DR	NP
Neupro patches			NP
Osmolex ER		SCN	NP
Requip XL	DR	SCN	NP
Rytary ER		SCN	NP
Stalevo			NP
Tasmar			NP
Xadago		SCN	NP
Zelapar			NP
Antipsoriatics, Oral			
acitretin			P
methoxsalen			NP
Oxoralen-Ultra			NP
Antipsoriatics, Topical			
calcipotriene			P
calcitrene			P
Taclonex			P
Vectical		SCN	P
calcipotriene/betamethasone dipropionate oint			NP
calcitriol oint			NP
Enstilar		SCN	NP
Sorilux			NP
Antipsychotics			
aripiprazole*			P
aripiprazole ODT		SCN	P
amitriptyline/perphenazine*		SCN	P
chlorpromazine*			P
clozapine*			P
fluphenazine*		SCN	P
haloperidol*			P
loxapine*			P
olanzapine*			P
olanzapine ODT*			P
perphenazine*			P
quetiapine*			P

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

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

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

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

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

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

Monthly Changes to the PDL

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

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

(Effective 08/01/2018)

BPH Agents, Alpha Reductase Inhibitors		
dutasteride		P
finasteride		P
dutasteride/tamsulosin	SCN	NP
BPH Agents , Andrenergic		
alfuzosin		P
tamsulosin		P
terazosin		P
doxazosin		NP
Cardura XL		NP
Rapaflo		NP
Beta Blockers		
atenolol		P
atenolol/chlorthalidone		P
bisoprolol		P
bisoprolol/HCTZ		P
carvedilol		P
labetalol		P
metoprolol		P
metoprolol ER		P
propranolol		P
propranolol ER		P
sotalol		P
acebutolol		NP
betaxolol		NP
carvedilol ER		NP
metoprolol/HCTZ		NP
nadolol		NP
nadolol bendroflumethiazide		NP
pindolol		NP
propranolol/HCTZ	SCN	NP
timolol		NP
Bystolic	SCN	NP
Coreg CR	SCN	NP
Dutoprol	SCN	NP
Hemangeol	SCN	NP
Inderal XL		NP

Beta Blockers (cont)		
Innopran XL		NP
Levator		NP
Lopressor HCT		NP
Sotylyze		NP
Bile Salts		
ursodiol		P
Chenodal	SCN	NP
Cholbam	SCN	NP
Ocaliva	SCN	NP
Bladder Relaxant Preparations		
oxybutynin		P
oxybutynin ER		P
oxybutynin syrup		P
Enablex	SCN	P
Toviaz		P
VesiCare		
darifenacin ER		NP
tolterodine		NP
tolterodine ER		NP
trospium		NP
trospium ER		NP
Detrol, LA		NP
Gelnique		NP
Myrbetriq ER		NP
Oxytrol		NP
Bone Resorption Suppression		
alendronate		P
calcitonin-salmon nasal		P
alendronate sod solution	SCN	NP
etidronate		NP
ibandronate		NP
raloxifene		NP
risedronate		NP
Actonel	SCN	NP
Atelvia	SCN	NP
Binosto	SCN	NP

Bone Resorption Suppression (cont)		
Boniva	SCN	NP
Forteo		NP
Fosamax Plus D		NP
Tymlos		NP
Bronchodilators, Beta Agonists		
albuterol		P
albuterol ER	SCN	P
albuterol (2.5mg/0.5ml)		P
albuterol (2.5mg/3ml)		P
albuterol (100mg/20ml)		P
albuterol nebulizer low-dose(0.63mg/3ml)		P
albuterol nebulizer low-dose1.25mg/3ml)		P
terbutaline tablets		P
Foradil		P
Proair HFA		P
Proventil HFA		P
Serevent	SCN	P
levalbuterol nebulizer		NP
levalbuterol HFA		NP
metaproterenol		NP
Arcapta		NP
Brovana	SCN	NP
Perforomist	SCN	NP
ProAir Respiclick		NP
Striverdi Respimat		NP
Ventolin HFA	SCN	NP
Xopenex HFA	SCN	NP
Calcium Channel Blocking Agents		
amlodipine		P
diltiazem		P
diltiazem ER capsules	SCN	P
nifedipine ER		P
nifedipine IR		P
nimodipine		P
verapamil tablets		P

Calcium Channel Blocking Agents (cont)		
verapamil ER tablet		P
verapamil SR tablet		P
diltiazem ER tablets	SCN	NP
felodipine ER		NP
isradipine		NP
nicardipine		NP
nisoldipine	SCN	NP
verapamil ER capsule	SCN	NP
verapamil SR capsule		NP
verapamil ER PM	SCN	NP
verapamil 360 mg capsule		NP
Cardizem LA		NP
Matzim LA		NP
Nymalize solution		NP
COPD Agents		
ipratropium nebulizer		P
ipratropium/albuterol neb		P
Atrovent HFA		P
Bevespi Aerosphere		P
Combivent Respimat		P
Spiriva		P
Anoro Ellipta	SCN	NP
Daliresp		NP
Incruse Ellipta	SCN	NP
Lonhala Magnair Kits	SCN	NP
Seebri Neohaler		NP
Spiriva Respimat		NP
Stiolto Respimat		NP
Tudorza Pressair		NP
Utibron Neohaler		NP
Cough and Cold – Narcotic Liquids		
guaifenesin/codeine		P
phenylephrine/ promethazine/codeine		P
promethazine/codeine		P

Page 7 of 14

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

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

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

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

Monthly Changes to the PDL

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

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

(Effective 08/01/2018)

Cough and Cold – Narcotic Liquids (cont)		
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.		
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.		
Cytokine and CAM Antagonists		
Enbrel		P
Humira		P
Otezla		P
Actemra	SCN	NP
Cosentyx		NP
Cimzia		NP
Kevzara		NP
Kineret		NP
Olumiant		NP
Orencia		NP
Silig		NP
Simponi		NP
Stelara		NP
Taltz		NP
Tremfya		NP
Xeljanz		NP
Xeljanz XR		NP
Epinephrine, Self Injected		
epinephrine 0.15 MG (AG Epi-pen JR)	SCN	P
epinephrine 0.3 MG (AG Epi-pen)	SCN	P
epinephrine 0.15 MG (AG Adrenaclick)**		P
epinephrine 0.3 MG (AG Adrenaclick)**		P

Epinephrine, Self Injected (cont)		
Epipen JR 0.15 MG**	SCN	P
Epipen 0.3 MG **	SCN	P
** Products added as preferred temporarily due to shortage		
Erythropoiesis Stimulating Proteins		
Aranesp		P
Procrit		P
Epogen		NP
Retacrit	SCN	NP
Fibromyalgia		
duloxetine 20 mg DR caps		P
duloxetine 30 mg DR caps		P
duloxetine 60 mg DR caps		P
Lyrica		P
Savella	SCN	P
duloxetine 40 mg DR caps		NP
Fluoroquinolones		
ciprofloxacin		P
levofloxacin tablets		P
ciprofloxacin suspension		NP
ciprofloxacin ER	SCN	NP
levofloxacin solution		NP
moxifloxacin		NP
ofloxacin		NP
Avelox		NP
Baxdela tablet	SCN	NP
Cipro suspension		NP
GI Motility, Chronic-Constipation		
Amitiza		P
Linzess	SCN	P
Movantik		P
Relistor tablet		NP
Symproic		NP
Trulance	SCN	NP
GI Motility, Chronic-Diarrhea		
Lotronex	SCN	P
Xifaxan 550mg		P

GI Motility, Chronic-Diarrhea (cont)		
alosetron		NP
Viberzi	SCN	NP
Glucocorticoids, Inhaled		
Advair Diskus	SCN	P
Asmanex		P
Dulera		P
Flovent HFA	SCN	P
Pulmicort Flexhaler		P
Pulmicort Respules		P
Symbicort		P
budesonide respules		NP
fluticasone/salmeterol		NP
Advair HFA	SCN	NP
Aerospan HFA Inhaler		NP
AirDuo Resplick		NP
Alvesco Inhaler	SCN	NP
Armonair Resplick		NP
Arnuity Ellipta	SCN	NP
Asmanex HFA		NP
Breo Ellipta Inhaler	SCN	NP
Flovent Diskus	SCN	NP
Qvar Redihaler		NP
Trelegy Ellipta	SCN	NP
Glucocorticoids, Oral		
budesonide EC capsule		P
dexamethasone elixir		P
dexamethasone intensol		P
dexamethasone solution		P
dexamethasone tablet		P
hydrocortisone		P
methylprednisolone Dose Pack		P
methylprednisolone tablet		P
prednisolone sod phosphate solution 5mg/5ml		P
prednisolone sod phosphate solution 15mg/5ml		P

Glucocorticoids, Oral (cont)		
prednisolone sod phosphate solution 25mg/5ml		P
prednisone intensol		P
prednisone solution		P
prednisone Dose Pack		P
prednisone tablet		P
Orapred ODT	SCN	P
cortisone		NP
prednisolone sod phosphate ODT	SCN	NP
prednisolone sod phosphate solution 10mg/5ml		NP
prednisolone sod phosphate solution 20mg/5ml		NP
Decadron	SCN	NP
Dexpak		NP
Emflaza	SCN	NP
Locort		NP
Medrol tablet		NP
Millipred Dose Pack	SCN	NP
Millipred solution	SCN	NP
Millipred tablet	SCN	NP
Pediapred	SCN	NP
Rayos tablet DR	SCN	NP
TaperDex	SCN	NP
Veripred 20	SCN	NP
Zodex	SCN	NP
Gout Agents		
allopurinol		P
colchicine capsule		P
indomethacin		P
naproxen Rx		P
Probenecid		P
probenecid/colchicine		P
colchicine tablet		NP
naproxen suspension		NP
Colcrys		NP

Page 8 of 14

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

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

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

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

Monthly Changes to the PDL

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

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

(Effective 08/01/2018)

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

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

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

Hypoglycemics, Insulins Long-Acting (cont)		
Toujeo Solostar		NP
Toujeo Max Solostar		NP
Tresiba Flextouch	SCN	NP
Hypoglycemics, Meglitinides		
repaglinide		
repaglinide		P
nateglinide		NP
repaglinide/metformin		NP
Hypoglycemics, Other		
metformin		
metformin		P
metformin ER (Glucophage ER)		
metformin ER (Glucophage ER)		P
Farxiga		
Farxiga		P
Invokana		
Invokana		P
Jardiance		
Jardiance		P
Welchol		
Welchol		P
metformin ER (Glumetza)		NP
metformin ER OSM-tab		NP
Cycloset		NP
Glumetza ER		NP
Invokamet		NP
Invokamet XR		NP
Qtern		NP
Riomet	SCN	NP
Segluromet		NP
Steglatro		NP
Steglujan		NP
Synjardy		NP
Synjardy XR		NP
Xigduo XR		NP
Hypoglycemics, Sulfonylureas		
glimepiride		
glimepiride		P
glipizide		
glipizide		P
glipizide ER		
glipizide ER		P
glyburide		
glyburide		P
glyburide/metformin		
glyburide/metformin		P
chlorpropamide	SCN	NP

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

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

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

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

Monthly Changes to the PDL

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

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

(Effective 08/01/2018)

Hypoglycemics, Sulfonylureas (cont)		
glipizide/metformin		NP
tolazamide	SCN	NP
tolbutamide	SCN	NP
Hypoglycemics, Symlin		
Symlin		P
Hypoglycemics, Thiazolidinediones		
pioglitazone		P
pioglitazone-glimepiride		NP
pioglitazone-metformin		NP
Actoplus MET		NP
Actoplus MET XR		NP
Avandia	SCN	NP
Immunomodulators, Atopic Dermatitis		
Elidel		P
Protopic	SCN	P
tacrolimus		NP
Dupixent		NP
Eucrisa 2%	SCN	NP
Immunomodulators, Topical		
Aldara		P
imiquimod		NP
Zyclara		NP
Intranasal Rhinitis Agents		
azelastine (Astelin)		P
fluticasone RX		P
ipratropium		P
Beconase AQ	SCN	P
Patanase		P
budesonide RX		NP
flunisolide		NP
mometasone furoate		NP
olopatadine		NP
Astepro		NP
Dymista		NP
Nasonex*		NP
Omnaris	SCN	NP

Intranasal Rhinitis Agents (cont)		
Qnasl		NP
Veramyst	SCN	NP
Xhance	SCN	NP
Zetonna	SCN	NP
*Prior Authorization not required for members 6 years of age and younger.		
Leukotriene Modifiers		
montelukast chewable		P
montelukast tablet		P
montelukast granules		NP
zafirlukast		NP
zileuton ER		NP
Zyflo	SCN	NP
Lipotropics, Apo-B Inhibitors		
Juxtapid	SCN	NP
Kynamro	SCN	NP
Lipotropics, Bile Acid Sequestrants		
cholestyramine		P
colestipol tablet		P
Welchol		P
colesevelam tablets		NP
colestipol granules		NP
Colestid granules		NP
Lipotropics, Fibric Acids		
fenofibrate tablet (Gen-Tricor)		P
fenofibric acid (Gen-Trilipix)		P
gemfibrozil		P
fenofibrate (Gen-Antara)		NP
fenofibrate (Gen-Fenoglide)		NP
fenofibrate (Gen-Lipofen)		NP
fenofibrate (Gen Lofibra)		NP
fenofibric acid (Gen-Fibrocor)		NP
Antara	SCN	NP
Fenoglide		NP
Fibrocor	SCN	NP
Lipofen	SCN	NP

Lipotropics, Fibric Acids (cont)			
Triglide	SCN		NP
Lipotropics, Niacin			
niacin ER tabs (RX)			P
Niacor			P
Lipotropics, Omega-3 Acids			
omega-3 acid ethyl esters	DAPO		P
Vascepa	SCN	DAPO	NP
Lipotropics, Other			
atorvastatin			P
ezetimibe			P
lovastatin			P
pravastatin			P
rosuvastatin			P
simvastatin			P
amlodipine/atorvastatin			NP
ezetimibe/simvastatin			NP
fluvastatin			NP
fluvastatin ER			NP
Altoprev	SCN		NP
Caduet			NP
Lescol XL			NP
Livalo	SCN		NP
Vytorin			NP
Zypitamag	SCN		NP
Lipotropics, PCSK9 Inhibitors			
Praluent			NP
Repatha			NP
Methotrexate			
methotrexate tablet			P
methotrexate PF vial			P
methotrexate vial			P
Otrexup Auto Injector	SCN		NP
Rasuvo Auto Injector			NP
Trexall tablet	SCN		NP
Migraine Agents, Other			
rizatriptan			P

Migraine Agents, Other (cont)		
sumatriptan nasal spray		P
sumatriptan tablets		P
Relpax		P
almotriptan		NP
eletriptan		NP
frovatriptan		NP
naratriptan		NP
sumatriptan/naproxen tablets		NP
zolmitriptan tablets		NP
zolmitriptan ODT		NP
Cambia	SCN	NP
Onzetra	SCN	NP
Treximet	SCN	NP
Zomig Nasal Spray	SCN	NP
Migraine Agents, Injectable		
sumatriptan injectable		P
Sumavel		NP
Zembrace	SCN	NP
Multiple Sclerosis Agents, Immunomodulators		
Aubagio		P
Avonex		P
Betaseron		P
Copaxone 20 mg		P
Copaxone 40 mg		P
Gilenya		P
Rebif	SCN	P
Rebif Rebifose	SCN	P
glatiramer	SCN	NP
Extavia		NP
Glatopa		NP
Plegridy	SCN	NP
Tecfidera	SCN	NP
Zinbryta		NP
Multiple Sclerosis Agents, Other		
Ampyra ER	SCN	NP

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

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

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

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

Monthly Changes to the PDL

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

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

(Effective 08/01/2018)

Neuropathic Pain			
duloxetine 20 mg DR caps			P
duloxetine 30 mg DR caps			P
duloxetine 60 mg DR caps			P
gabapentin			P
Lyrica			P
duloxetine 40 mg DR caps			NP
Gralise	SCN	DR	NP
Horizant		DR	NP
Lyrica CR			NP
NSAIDs			
celecoxib cap			P
diclofenac potassium			P
diclofenac sodium			P
diclofenac ER			P
flurbiprofen			P
ibuprofen Rx			P
ibuprofen OTC	SCN		P
indomethacin			P
ketoprofen			P
ketorolac			P
meloxicam tablets			P
nabumetone			P
naproxen Rx			P
naproxen DS Rx			P
naproxen OTC	SCN		P
sulindac			P
diclofenac sodium/misoprostol			NP
diclofenac solution			NP
diflunisal			NP
etodolac			NP
etodolac XL			NP
fenoprofen	SCN		NP
indomethacin ER			NP
ketoprofen ER	SCN		NP
meclofenamate	SCN		NP
mefenamic acid			NP

NSAIDs (cont)			
meloxicam suspension			NP
naproxen CR			NP
naproxen sodium Rx			NP
naproxen suspension	SCN		NP
oxaprozin			NP
piroxicam			NP
tolmetin			NP
Duexis	SCN		NP
Indocin suppository	SCN		NP
Indocin suspension	SCN		NP
Nalfon 400mg cap	SCN		NP
Naprelan CR			NP
Sprix	SCN		NP
Tivorbex	SCN		NP
Vimovo	SCN		NP
Vivlodex	SCN		NP
Zipsor	SCN		NP
Zorvolex	SCN		NP
Ophthalmics, Allergic Conjunctivitis			
cromolyn			P
ketorolac 0.5%			P
ketotifen OTC	SCN		P
olopatadine 0.1% drops (Patanol)			P
Alaway OTC	SCN		P
Alrex			P
Pazeo			P
azelastine			NP
epinastine			NP
olopatadine 0.2% drops (Pataday)			NP
Alocril			NP
Alomide			NP
Bepreve			NP
Emadine			NP
Lastacaft			NP
Pataday			NP

Ophthalmics, Antibacterial			
ciprofloxacin solution			P
erythromycin			P
gentamicin			P
ofloxacin			P
polymyxin/trimethoprim			P
sulfacetamide oint			P
sulfacetamide solution			P
tobramycin			P
Ciloxan ointment			P
Moxeza			P
Tobrex ointment			P
Vigamox			P
bacitracin			NP
bacitracin/polymyxin			NP
gatifloxacin			NP
levofloxacin			NP
moxifloxacin (Vigamox)			NP
neomycin/bacitracin/polymyxin ointment			NP
neomycin/polymyxin/gramicidin			NP
triple antibiotic			NP
Azasite			NP
Besivance			NP
Natacyn			NP
Zymaxid			NP
Ophthalmics, Antibiotic-Steroid Combinations			
neomycin/polymyxin/dexame thasone			P
sulfacetamide/prednisolone			P
Blephamide	SCN		P
Pred-G ointment			P
Pred-G drops			P
Tobradex suspension			P
Tobradex ointment			P
neomycin/bacitracin/poly/HC			NP

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

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

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

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

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

Monthly Changes to the PDL

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

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

(Effective 08/01/2018)

Ophthalmics, Glaucoma-Beta Blockers		
carteolol		P
levobunolol		P
timolol (Gen-Timoptic/XE)		P
Betoptic S		P
betaxolol		NP
metipranolol		NP
Istalol		NP
timolol (Gen-Istalol)		NP
Timoptic Ocudose		NP
Ophthalmics, Glaucoma-Other		
brimonidine 0.2%		P
dorzolamide		P
dorzolamide w/ timolol		P
pilocarpine		P
Alphagan P 0.15%	SCN	P
Azopt		P
Combigan	SCN	P
Isopto Carpine 2%		P
Simbrinza		P
apraclonidine		NP
brimonidine tartrate 0.15%		NP
Alphagan P 0.1%	SCN	NP
Cosopt PF		NP
lopidine		NP
Rhopressa	SCN	NP
Ophthalmics, Glaucoma-Prostaglandins		
latanoprost		P
Travatan Z		P
bimatoprost 0.03% 2.5ml		NP
bimatoprost 0.03% 5 ml		NP
bimatoprost 0.03%7.5 ml		NP
travoprost		NP
Lumigan 0.01% 2.5 ml	SCN	NP
Lumigan 0.01% 5 ml	SCN	NP
Lumigan 0.01% 7.5 ml	SCN	NP

Ophthalmics, Glaucoma-Prostaglandins (cont)			
Vyzulta solution			NP
Zioptan			NP
Opioid Dependency Agents-Buprenorphine			
Suboxone Film	DR	SCN	P
Zubsolv	DR	SCN	P
buprenorphine tabs (without naloxone)	DR		NP
buprenorphine/ naloxone film	DR		NP
buprenorphine/ naloxone tab	DR		NP
Bunavail	DR	SCN	NP
Sublocade	DR	SCN	NP
Opioid Dependency Agents-Rescue Agent			
naloxone syringe			P
naloxone vial			P
Narcan spray		SCN	P
Opioid Dependency Agents-methadone			
methadone dispersible tab	DR		P
methadone concentrate	DR		P
Opioid Dependency and Alcohol Abuse/ Dependency Agents			
naltrexone tab	DR		P
Vivitrol injection*	DR	SCN	P
*Policy for obtaining provider-administered drugs applies. Refer to topic #5697.			
Otics, Antibiotics			
neomycin/polymyxin/HC			P
ofloxacin			P
Cipro HC			P
Coly-mycin S			P
ciprofloxacin		SCN	NP
Ciprodex*			NP

Otics, Antibiotics (cont)		
Otovel		NP
*Prior Authorization not required for members 6 years of age and younger.		
Otics, Anti-Infectives & Anesthetics		
acetic acid		P
acetic acid HC		NP
Pancreatic Enzymes		
Zenpep DR	SCN	P
Creon DR		NP
Pancrease DR		NP
Pertzye DR 4,000*		NP
Pertzye DR 8,000		NP
Pertzye DR 16,000		NP
Pertzye DR 24,000		NP
Viokace		NP
*Prior Authorization not required for members 1 year of age and younger.		
Phosphate Binders		
calcium acetate 667mg caps		P
calcium acetate 667mg tabs		P
Phoslyra	SCN	P
Renagel		P
lanthanum carbonate		NP
sevelamer powder pack		NP
sevelamer tab		NP
Auryxia	SCN	NP
Eliphos	SCN	NP
Fosrenol		NP
Magnebind		NP
Renvela		NP
Velphoro	SCN	NP
Platelet Aggregation Inhibitors		
aspirin	SCN	P
clopidogrel		P
dipyridamole		P
Aggrenox		P

Platelet Aggregation Inhibitors (cont)		
Brilinta		P
aspirin/dipyridamole		NP
ticlopidine		NP
Effient		NP
prasugrel		NP
Yosprala	SCN	NP
Zontivity		NP
Prenatal Vitamins		
pnv prenatal plus multivit tab	SCN	P
prenatal vitamin plus low iron	SCN	P
Completenate tablet chew	SCN	P
Elite-OB caplet	SCN	P
Folivane-OB capsule	SCN	P
PNV 29-1 tablet	SCN	P
Prenata chewable tablet	SCN	P
Preplus CA-FE 27mg-FA 1mg tab	SCN	P
Pretab 29mg-1mg tablet	SCN	P
SE-Natal 19 chewable tablet	SCN	P
SE-Natal 19 tablet	SCN	P
Taron-C DHA capsule	SCN	P
Thrivite 19 tablet	SCN	P
Trinatal RX 1 tablet	SCN	P
Virt-PN DHA softgel	SCN	P
Vol-Nate tablet	SCN	P
Vol-Plus tablet	SCN	P
Vol-Tab RX tablet	SCN	P
Zatean-PN DHA capsule	SCN	P
NOTE: Prenatal Vitamins listed are covered legend and OTC by active ingredient. Prenatal Vitamins not listed are either non-preferred or non-covered.		NP
Proton Pump Inhibitors		
esomeprazole magnesium		P
lansoprazole DR		P
omeprazole RX		P

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

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

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

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

Monthly Changes to the PDL

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

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

(Effective 08/01/2018)

Proton Pump Inhibitors (cont)			
pantoprazole			P
Nexium Packet			P
Prilosec suspension			P
Protonix suspension			P
esomeprazole strontium			NP
lansoprazole ODT (solutab)			NP
omeprazole-bicarb RX			NP
rabeprazole			NP
Aciphex Sprinkle DR caps	SCN		NP
Dexilant DR 30mg			NP
Dexilant DR 60mg			NP
Prevacid Solutab			NP
Zegerid			NP
Pulmonary Arterial Hypertension			
sildenafil	DR		P
Adcirca	DR	SCN	P
Letairis			P
Tracleer tablet			P
Adempas			NP
Opsumit			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
temazepam 15mg			P
temazepam 30mg			P
triazolam			P
zaleplon			P
zolpidem			P
Rozerem			P
flurazepam	SCN		NP

Sedative Hypnotics (cont)			
temazepam 7.5mg			NP
temazepam 22.5mg			NP
zolpidem ER			NP
zolpidem SL			NP
Belsomra			NP
Edluar			NP
Intermezzo			NP
Silenor			NP
Zolpimist	SCN		NP
Skeletal Muscle Relaxants			
baclofen			P
chlorzoxazone			P
cyclobenzaprine			P
dantrolene sodium			P
methocarbamol			P
tizanidine tablets			P
carisoprodol			NP
carisoprodol compound			NP
cyclobenzaprine 7.5mg tablet			NP
metaxalone			NP
orphenadrine			NP
tizanidine capsules			NP
Amrix			NP
Dantrium			NP
Fexmid			NP
Lorzone		SCN	NP
Metaxall		SCN	NP
Soma			NP
Steroids, Topical Low			
fluocinolone oil			P
hydrocortisone			P
hydrocortisone OTC		SCN	P
Scalpicin 1% liquid		SCN	P
alclometasone dipropionate cream			NP
alclometasone dipropionate oint			NP

Steroids, Topical Low (cont)			
desonide cream/oint			NP
desonide lotion			NP
hydrocortisone acetate/urea			NP
Capex Shampoo	SCN		NP
Derma-Smothe-FS	SCN		NP
Desonate			NP
Texacort	SCN		NP
Steroids, Topical Medium			
fluticasone cream/ointment			P
mometasone furoate			P
betamethasone valerate foam			NP
clocortolone			NP
flurandrenolide lotion/cream			NP
flurandrenolide ointment	SCN		NP
fluticasone lotion			NP
fluocinolone acetonide cream	SCN		NP
fluocinolone 0.01% soln/oint			NP
hydrocortisone butyrate lipid cream			NP
hydrocortisone butyrate			NP
hydrocortisone butyrate lotion	SCN		NP
hydrocortisone valerate			NP
prednicarbate cream	SCN		NP
prednicarbate ointment			NP
Cloderm			NP
Cordran Tape			NP
Cutivate lotion	SCN		NP
Dermatop			NP
Luxiq	SCN		NP
Pandel	SCN		NP
Synalar	SCN		NP
Steroids, Topical High			
betamethasone valerate			P
triamcinolone acetonide			P
amcinonide			NP
betamethasone dipropionate			NP
desoximetasone			NP

Steroids, Topical High (cont)			
diflorasone diacetate			NP
fluocinonide			NP
fluocinonide-e			NP
Diprolene ointment			NP
Halog	SCN		NP
Kenalog aerosol spray			NP
Sernivo 0.05% spray	SCN		NP
Topicort 0.05% ointment			NP
Topicort 0.25% spray			NP
Trianex	SCN		NP
Steroids, Topical Very High			
clobetasol cream/foam/oint/solution/gel/emollient			P
halobetasol propionate			P
Clobex Lotion	SCN		P
Clobex Shampoo	SCN		P
betamethasone dipropionate aug			NP
clobetasol lotion			NP
clobetasol shampoo			NP
clobetasol spray			NP
Apexicon E	SCN		NP
Clobex spray	SCN		NP
Olux-E	SCN		NP
Ultravate lotion	SCN		NP
Stimulants			
dexmethylphenidate	DR		P
methylphenidate tab	DR		P
methylphenidate CD	DR		P
methylphenidate chew tab	DR		P
methylphenidate ER tab (Gen-Metadate ER)	DR		P
methylphenidate ER capsule	DR		P
methylphenidate solution	DR		P
Aptensio XR	DR		P
Concerta	DR		P
Daytrana	SCN	DR	P

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

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

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

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

Monthly Changes to the PDL

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

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

(Effective 08/01/2018)

Stimulants (cont)		
Focalin		P
Focalin XR		P
Metadate CD		P
Metadate ER tablet		P
Methylin solution	SCN	P
Quillichew ER	SCN	P
Quillivant XR	SCN	P
Vyvanse*		P
Vyvanse chewable*		P
amphetamine salt combo*		NP
amphetamine salt combo ER		NP
dexamethylphenidate ER Cap		NP
dextroamphetamine *		NP
dextroamphetamine ER		NP
dextroamphetamine solution*	SCN	NP
methylphenidate ER tablet (Gen-Concerta)		NP
methamphetamine		NP
Adderall XR		NP
Adzenys ER Suspension	SCN	NP
Adzenys XR ODT	SCN	NP
Cotempla XR	SCN	NP
Dexedrine*	SCN	NP
Dyanavel XR	SCN	NP
Evekeo*		NP
Mydayis ER		NP
Procentra*	SCN	NP
Ritalin LA		NP
Zenzedi*		NP
* PA required for the treatment of Binge Eating Disorder (BED). Use Sec VI of the PA/DGA (Refer to topic #15937)		
*Prior Authorization not required for members 6 years of age and younger.		

Stimulants-Related Agents		
atomoxetine		P
clonidine ER tab	SCN	P
guanfacine ER		P
Kapvay	SCN	P
armodafinil	SCN	NP
modafinil		NP
Nuvigil		NP
Ulcerative Colitis		
balsalazide		P
sulfasalazine		P
Apriso		P
Canasa		P
Lialda		P
Rowasa Kits	SCN	P
budesonide ER tablet		NP
mesalamine tabs		NP
mesalamine kits	SCN	NP
Asacol HD		NP
Delzicol		NP
Dipentum		NP
Giazo		NP
Pentasa		NP
Uceris		NP

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

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

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

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

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

Monthly Changes to the PDL

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