

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

(Effective 10/1/2015)

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 Exemption 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 Exemption 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/Tab/42/icscontent/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 10/1/2015)

Acne Agents, Topical		
benzoyl peroxide OTC 2.5%		P
benzoyl peroxide OTC 5%		P
benzoyl peroxide OTC 10%		P
clindamycin gel		P
clindamycin lotion		P
clindamycin solution		P
erythromycin		P
sulfacetamide/sulfur cleanser		P
tretinoin cream		P
tretinoin 0.025% gel		P
tretinoin 0.01% gel		P
Azelex		P
Differin	SCN	P
Epiduo	SCN	P
NOTE: Topical federal legend acne drugs not listed are either non-preferred or noncovered.		
Alzheimer's Agents		
donepezil 5mg		P
donepezil 10mg		P
donepezil 5mg ODT		P
donepezil 10mg ODT		P
rivastigmine capsules		P
memantine*		P
Exelon patch		P
Namenda*		P
donepezil 23mg		NP
galantamine		NP
galantamine ER		NP
galantamine solution		NP
rivastigmine patch		NP
Aricept 23mg		NP
Exelon capsules		NP

Alzheimer's Agents (cont)		
Namenda XR*		NP
Namzaric		NP
*PA required for members 44 years of age and younger. Use Sec VI of the PA/DGA.		
Analgesics/Anesthetics, Topical		
capsaicin OTC	SCN	P
lidocaine 5% ointment		P
Lidoderm		P
Voltaren		P
lidocaine 5% trans patch		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		NP
Orbivan		NP
Orbivan CF		NP
Analgesics, Opioids Long-Acting		
fentanyl transdermal 12mcg		P
fentanyl transdermal 25mcg		P
fentanyl transdermal 50mcg		P
fentanyl transdermal 75mcg		P

Analgesics, Opioids Long-Acting (cont)		
fentanyl transdermal 100mcg		P
methadone		P
morphine ER tablets		P
Butrans transdermal		P
Kadian		P
fentanyl transdermal 37.5mcg		NP
fentanyl transdermal 62.5mcg		NP
fentanyl transdermal 87.5mcg		NP
hydromorphone ER		NP
morphine ER capsules		NP
oxycodone ER		NP
oxymorphone ER		NP
tramadol ER caps	SCN	NP
tramadol ER tab		NP
Conzip	SCN	NP
Embeda ER		NP
Exalgo ER		NP
Hysingla ER		NP
Nucynta ER		NP
Opana ER		NP
Oxycontin		NP
Ryzolt ER		NP
Xartemis XR	SCN	NP
Zohydro ER	SCN	NP
Analgesics, Opioids Short-Acting		
codeine		P
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
Capital w-codeine		P
butorphanol spray		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/apap		NP
pentazocine/naloxone		NP
tramadol/apap		NP
Dilaudid Liquid		NP
Ibudone		NP
Magnacet		NP
Nucynta		NP
Oxecta		NP
Primlev		NP
Reprexain		NP
Rybix ODT		NP
Synalgos-DC		NP

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

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

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

(Effective 10/1/2015)

Analgesics, Opioids Short-Acting (cont)		
Trezip		NP
Vicodin 5/300		NP
Vicodin 7.5/300		NP
Vicodin 10/300		NP
Xodol		NP
Zamicet		NP
Zolvit		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		
Androlog		
testosterone gel		NP
Androderm		NP
Axiron		NP
Fortesta		NP
Natesto		NP
Testim		NP
Vogelxo		NP

Angiotensin Modulators, ACE Inhibitors		
benazepril		P
captopril		P
enalapril		P
enalapril/HCTZ		P
fosinopril		P
lisinopril		P
lisinopril/HCTZ		P

Angiotensin Modulators, ACE Inhibitors (cont)		
ramipril		P
benazepril/HCTZ		NP
captopril/HCTZ		NP
fosinopril/HCTZ		NP
moexipril		NP
moexipril /HCTZ		NP
perindopril		NP
quinapril		NP
quinapril /HCTZ		NP
trandolapril		NP
Epaned *	SCN	NP
Uniretic		NP
Univasc		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
Diovan/HCTZ		P
candesartan tablets		NP
candesartan HCTZ		NP
eprosartan mesylate		NP
irbesartan		NP
irbesartan/HCTZ		NP
telmisartan		NP
telmisartan/HCTZ		NP
valsartan/HCTZ		NP
Atacand		NP
Atacand /HCTZ		NP
Benicar		NP
Benicar /HCTZ		NP
Edarbi		NP
Edarbyclor		NP
Micardis		NP

Angiotensin Modulators, ARBs and DRIs (cont)		
Micardis/HCTZ		NP
Tekturna		NP
Tekturna /HCTZ		NP
Teveten		NP
Teveten /HCTZ		NP

Angiotensin Modulators , Combination		
amlodipine/benazepril		P
Azor		P
Exforge		P
Exforge /HCTZ		P
Tarka		P
Tribenzor		P
amlodipine/valsartan		NP
amlodipine/valsartan HCTZ		NP
telmisartan/amlodipine		NP
trandolapril/verapamil		NP
Amturnde		NP
Entresto		NP
Tekamlo		NP
Twynsta		NP

Antibiotics, Beta-Lactam		
amoxicillin		P
amoxicillin clavulanate		P
amoxicillin clavulanate 250mg suspension		P
ampicillin		P
cefadroxil		P
cefdinir		P
cephalexin		P
cefprozil		P
cefuroxime		P
dicloxacillin		P
penicillin		P
Augmentin 125 suspension		P

Antibiotics, Beta-Lactam (cont)		
Ceftin 125 suspension	SCN	P
Ceftin 250 suspension	SCN	P
Suprax capsules		P
Suprax tab		P
Suprax suspension		P
amoxicillin clavulanate XR		NP
amoxicillin ER 775 mg tab	SCN	NP
cefaclor tab ER		NP
cefixime suspension		NP
cefepodoxime		NP
ceftibuten capsule	SCN	NP
ceftibuten suspension	SCN	NP
Cedax capsule	SCN	NP
Cedax suspension	SCN	NP
Moxatag ER		NP
Spectracef		NP
Suprax chew tab		NP

Antibiotics, GI		
metronidazole tablets		P
neomycin		P
vancomycin		P
Alinia	SCN	P
metronidazole capsule		NP
tinidazole*		NP
Difucid		NP
Flagyl ER		NP
Tindamax*		NP
Xifaxan	SCN	NP

* Prior Authorization is not required for members 18 years of age and younger.

Antibiotics, Inhaled		
Bethkis		P
Klatabis Pak		P
tobramycin ampule		NP
Cayston		NP

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

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

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

(Effective 10/1/2015)

Antibiotics, Inhaled (cont)		
Tobi		NP
Tobi Podhaler		NP
Antibiotics, Macrolides/Ketolides		
azithromycin		P
clarithromycin		P
erythromycin suspension		P
erythromycin tablets		P
Ery-Tab		P
clarithromycin ER		NP
erythromycin capsules		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	SCN	NP

Antibiotics, Tetracyclines (cont)			
Solodyn 65mg		SCN	NP
Solodyn 80mg		SCN	NP
Solodyn 105mg		SCN	NP
Solodyn 115mg		SCN	NP
Vibramycin			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
Altabax	DR	SCN	NP
Bactroban cream		SCN	NP
Bactroban nasal		SCN	NP
Centany			NP
Antibiotics, Vaginal			
clindamycin			P
metronidazole			P
Cleocin ovule			P
Vandazole			P
Clindesse			NP
Nuvessa			NP
Anticoagulants			
enoxaparin			P
warfarin			P
Eliquis			P
Fragmin Syringe			P
Pradaxa			P
Xarelto			P
Xarelto Dose Pack			P

Anticoagulants (cont)		
fondaparinux		NP
Arixtra	SCN	NP
Fragmin Vial		NP
Savaysa		NP
Anticonvulsants		
carbamazepine		P
carbamazepine ER		P
clonazepam tablets		P
divalproex		P
divalproex ER		P
ethosuximide		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
Carbatrol		P
Celontin		P
Depakote Sprinkle		P
Diastat		P
Dilantin 30mg cap		P
Dilantin Infatab		P
Felbatol		P
Gabitril		P
Lamictal Starter Kits		P
Lyrica		P

Anticonvulsants (cont)			
Peganone		P	
Tegretol XR		P	
Trileptal Suspension		P	
carbamazepine XR 200mg		NP	
carbamazepine XR 400mg		NP	
clonazepam ODT		NP	
diazepam rectal		NP	
divalproex sprinkles		NP	
felbamate		NP	
felbamate suspension		NP	
lamotrigine ER		NP	
lamotrigine ODT		NP	
tiagabine		NP	
topiramate ER		NP	
Aptiom		NP	
Banzel		NP	
Equetro		NP	
Fycompa		NP	
Lamictal ODT	SCN	NP	
Lamictal XR	SCN	NP	
Onfi	DR	SCN	NP
Oxtellar XR	SCN	NP	
Phenytek		NP	
Potiga	SCN	NP	
Qudexy		NP	
Sabril		NP	
Trokendi XR	SCN	NP	
Vimpat		NP	
Vimpat solution		NP	
Antidepressants, Other			
bupropion		P	
bupropion SR		P	
bupropion XL		P	
duloxetine 20 mg DR caps		P	
duloxetine 30 mg DR caps		P	
duloxetine 60 mg DR caps		P	

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

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

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

(Effective 10/1/2015)

Antidepressants, Other (cont)		
mirtazapine		P
phenelzine		P
tranylcypromine sulfate		P
trazodone		P
venlafaxine		P
venlafaxine ER capsules		P
Marplan		P
Nardil		P
desvenlafaxine ER		NP
desvenlafaxine fumarate ER		NP
duloxetine 40 mg DR caps		NP
nefazodone		NP
venlafaxine ER tablets		NP
Aplenzin ER		NP
Brintellix		NP
Emsam		NP
Fetzima		NP
Forfivo XL	SCN	NP
Irenka DR		NP
Khedeza ER tablets		NP
Olepto ER	SCN	NP
Pristiq		NP
Viibryd		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	SCN	NP

Antidepressants, SSRI (cont)		
fluvoxamine ER	SCN	NP
paroxetine CR		NP
Brisdelle	SCN	NP
Peveva		NP
Sarafem		NP
Antiemetics		
metoclopramide		P
ondansetron		P
ondansetron ODT		P
ondansetron solution	DR	P
prochlorperazine		P
prochlorperazine supp		P
trimethobenzamide caps		P
Emend		P
granisetron		NP
Akynzeo		NP
Anzemet		NP
Metozolv ODT		NP
Sancuso		NP
Zuplenz	SCN	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
Antiemetics, Cannabinoids		
dronabinol		P
Cesamet		NP
Antifungals, Oral		
clotrimazole troche		P
fluconazole		P
griseofulvin suspension		P

Antifungals, Oral (cont)			
itraconazole		P	
ketoconazole tablets		P	
nystatin		P	
terbinafine		P	
Gris-Peg	SCN	P	
flucytosine		NP	
griseofulvin microsize		NP	
griseofulvin ultramicrosize		NP	
voriconazole 50mg		NP	
voriconazole 200mg		NP	
voriconazole suspension		NP	
Ancobon		NP	
Cresemba		NP	
Grifulvin V Tablets		NP	
Lamisil granules	DR	NP	
Noxafil		NP	
Onmel	DR	SCN	NP
Sporanox (liquid)		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	SCN	NP
nystatin/triamcinolone		NP
Bensal HP		NP
Ciclodan cream	SCN	NP
CNL 8		NP
Ertaczo		NP
Exelderm		NP
Extina		NP
Jublia		NP
Kerydin	SCN	NP
Luzu cream	SCN	NP
Mentax		NP
Naftin		NP
Oxistat		NP
Vusion		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
levocetirizine		NP
Clarinx	SCN	NP
Clarinx D	SCN	NP
Clarinx Syrup	SCN	NP
Semprex-D		NP
Xyzal Syrup		NP

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

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

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

(Effective 10/1/2015)

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

Antiparkinson's Agents (cont)			
entacapone			NP
pramipexole ER	SCN		NP
ropinirole ER	DR		NP
tolcapone			NP
Azilect			NP
Comtan			NP
Mirapex ER	DR		NP
Neupro patches			NP
Requip XL	DR	SCN	NP
Rytary ER		SCN	NP
Tasmar			NP
Zelapar			NP
Antipsoriatics, Oral			
8-Mop			P
Oxsoalene-Ultra			P
Soriatane	SCN		P
acitretin			NP
methoxsalen	SCN		NP
Antipsoriatics, Topical			
calcipotriene solution			P
calcipotriene cream			P
calcitrene			P
Taclonex	SCN		P
Vectical	SCN		P
calcipotriene oint			NP
calcipotriene/betamethasone dipropionate oint			NP
calcitriol oint			NP
Sorilux			NP
Antipsychotics			
amitriptyline/perphenazine*			P
chlorpromazine*			P
clozapine*			P
fluphenazine*			P
haloperidol*			P
Loxapine*			P

Antipsychotics (cont)		
olanzapine*		P
perphenazine*		P
quetiapine*		P
risperidone*		P
thiothixene*		P
trifluoperazine*		P
ziprasidone capsules*		P
Latuda*	SCN	P
Orap*		P
aripiprazole tablets*		NP
aripiprazole solution*		NP
clozapine ODT*		NP
olanzapine/fluoxetine*		NP
olanzapine ODT*		NP
thioridazine*		NP
Abilify*		NP
Adasuve*		NP
Fanapt*		NP
Fazaclo*	SCN	NP
Invega*		NP
Rexulti		NP
Saphris*		NP
Seroquel XR*		NP
Symbyax*		NP
Versacloz*	SCN	NP
*PA required for children 7 years of age and younger. Use PA Drug Attachment for Antipsychotic Drugs for Children 7 Years of Age and Younger.		
Antivirals, Influenza		
rimantadine		P
Relenza	SCN	P
Tamiflu	SCN	P
Antivirals, other		
acyclovir		P
valacyclovir		P

Antivirals, other (cont)		
famciclovir		NP
Sitavig	SCN	NP
Antivirals, Topical		
Zovirax Cream		P
Zovirax Ointment		P
acyclovir ointment	SCN	NP
Denavir		NP
Xerese		NP
Anxiolytics		
alprazolam ER		P
alprazolam intensol		P
alprazolam tablet		P
bupirone		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
BPH Agents, Alpha Reductase Inhibitors		
finasteride		P
Avodart	SCN	NP
Jalyn	SCN	NP
BPH Agents, Androgenic		
alfuzosin		P
tamsulosin		P
terazosin		P
doxazosin		NP
Cardura XL		NP
Rapaflo		NP
Beta Blockers		
atenolol		P

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

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

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

(Effective 10/1/2015)

Beta Blockers (cont)		
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
metoprolol/HCTZ		NP
nadolol		NP
nadolol bendroflumethiazide		NP
pindolol		NP
propranolol/HCTZ		NP
timolol		NP
Bystolic		NP
Coreg CR	SCN	NP
Dutoprol		NP
Hemangeol	SCN	NP
Inderal XL		NP
Innopran XL	SCN	NP
LevatoI		NP
Lopressor HCT		NP
Sotylize		NP
Bile Salts		
ursodiol		P
Chenodal		NP
Cholbam	SCN	NP
Bladder Relaxant Preparations		
oxybutynin		P
oxybutynin ER		P
oxybutynin syrup		P
Toviaz		P
VesiCare		P

Bladder Relaxant Preparations (cont)		
tolterodine		NP
tolterodine ER		NP
tropium		NP
tropium ER		NP
Detrol, LA		NP
Enablex		NP
Gelnique		NP
Myrbetriq ER		NP
Oxytrol		NP
Bone Resorption Suppression		
alendronate		P
Fortical		P
alendronate sod solution		NP
calcitonin-salmon nasal		NP
etidronate		NP
ibandronate		NP
raloxifene		NP
risedronate		NP
Actonel	SCN	NP
Atelvia	SCN	NP
Binosto		NP
Boniva	SCN	NP
Fosamax Plus D		NP
Miacalcin		NP
Bronchodilators, Beta Agonists		
albuterol		P
albuterol ER		P
albuterol (2.5mg/0.5ml)		P
albuterol (2.5mg/3ml)		P
albuterol (100mg/20ml)		P
Terbutaline tablets		P
Foradil		P
Proair HFA		P
Proventil HFA		P
albuterol nebulizer low-dose (0.63mg/3ml)		NP

Bronchodilators, Beta Agonists (cont)		
albuterol nebulizer low dose (1.25/3ml)*		NP
levalbuterol nebulizer		NP
metaproterenol		NP
Arcapta		NP
Bronchodilators, Beta Agonists		
Brovana	SCN	NP
Perforomist		NP
ProAir Respiclick		NP
Serevent	SCN	NP
Striverdi Respimat		NP
Ventolin HFA	SCN	NP
Xopenex	SCN	NP
Xopenex HFA	SCN	NP
*Prior Authorization not required for members age 12 and under		
Calcium Channel Blocking Agents		
amlodipine		P
diltiazem		P
diltiazem ER capsules		P
nifedipine ER		P
nifedipine IR		P
nimodipine		P
verapamil		P
verapamil ER		P
verapamil SR		P
Cardizem LA		P
diltiazem ER tablets	SCN	NP
felodipine ER		NP
isradipine		NP
nicardipine		NP
nisoldipine		NP
verapamil ER PM		NP
verapamil 360 mg capsule		NP
Matzim LA		NP
Nymalize solution		NP

COPD Agents		
ipratropium nebulizer		P
ipratropium/albuterol neb		P
Atrovent HFA		P
Combivent Respimat		P
Daliresp	DR	P
Spiriva		P
Anoro Ellipta	SCN	NP
Incruse Ellipta	SCN	NP
Spiriva Respimat		NP
Stiolto Respimat		NP
Tudorza Pressair		NP
Cough and Cold –Narcotic Liquids		
guaifenesin/ codeine		P
phenylephrine/ promethazine/ codeine		P
promethazine/ codeine/		P
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.		
<i>Note:</i> 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		
Cimzia		P
Enbrel	SCN	P
Humira		P
Actemra	SCN	NP
Cosentyx		NP
Kineret		NP
Orencia		NP
Otezla		NP

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

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

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

(Effective 10/1/2015)

Cytokine and CAM Antagonists (cont)		
Simponi		NP
Stelara		NP
Xeljanz		NP
Epinephrine, Self Injected		
Epipen		P
Epipen JR		P
epinephrine auto-inject	SCN	NP
Auvi-Q		NP
Erythropoiesis Stimulating Proteins		
Aranesp		P
Procrit		P
Epogen		NP
Fibromyalgia		
duloxetine 20 mg DR caps		P
duloxetine 30 mg DR caps		P
Duloxetine 60 mg DR caps		P
Lyrica		P
Savella		P
duloxetine 40 mg DR caps		NP
Irenka DR		NP
Fluoroquinolones		
ciprofloxacin		P
levofloxacin tablets		P
ciprofloxacin suspension		NP
ciprofloxacin ER		NP
levofloxacin solution		NP
moxifloxacin		NP
ofloxacin		NP
Avelox		NP
Cipro suspension		NP
Factive	SCN	NP
GI Motility, Chronic		
Amitiza		P
Linzess		P
Movantik		P

GI Motility, Chronic (cont)			
alosetron			NP
Lotronex			NP
Glucocorticoids, Inhaled			
Advair Diskus	SCN		P
Asmanex			P
Dulera			P
Flovent Diskus	SCN		P
Flovent HFA	SCN		P
Pulmicort Flexhaler			P
Pulmicort Respules			P
Qvar			P
Symbicort			P
budesonide respules			NP
Advair HFA	SCN		NP
Aerospan HFA Inhaler	SCN		NP
Alvesco Inhaler	SCN		NP
Arnuity Ellipta	SCN		NP
Asmanex HFA			NP
Breo Ellipta Inhaler	SCN		NP
Glucocorticoids, Oral			
dexamethasone elixir			P
dexamethasone intensol			P
dexamethasone solution			P
dexamethasone tablet			P
hydrocortisone			P
methylprednisolone Dose Pack			P
methylprednisolone tablet			P
prednisolone sod phosphate			P
prednisolone solution			P
prednisone intensol			P
prednisone solution			P
prednisone Dose Pack			P
prednisone tablet			P
Orapred ODT			P

Glucocorticoids, Oral (cont)		
budesonide EC		NP
cortisone		NP
prednisolone sod Dose Pack ODT		NP
Cortef		NP
Dexpak		NP
Medrol tablet		NP
Millipred Dose Pack		NP
Millipred solution		NP
Millipred tablet		NP
Pediapred	SCN	NP
Rayos tablet DR	SCN	NP
Veripred 20		NP
Gout Agents		
allopurinol		P
indomethacin		P
naproxen Rx		P
probenecid		P
probenecid/colchicine		P
colchicine		NP
Colcrys		NP
Uloric		NP
Growth Hormone		
Norditropin	SCN	P
Nutropin		P
Nutropin AQ		P
Nutropin AQ Nuspin		P
Genotropin		NP
Humatrope		NP
Omnitrope		NP
Saizen		NP
Serostim		NP
Tev-Tropin		NP
Zomacton	SCN	NP
Zorbitive		NP
H2 Antagonists		
cimetidine solution		P

H2 Antagonists (cont)		
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		
Baraclude		P
Epivir HBV	SCN	P
Hepsera		P
Tyzeka		P
adefovir dipivoxal	SCN	NP
entecavir		NP
lamivudine		NP
Hepatitis C Agents		
Viekira Pak		P
Harvoni		NP
Olysio		NP
Sovaldi		NP
Hepatitis C Agents-Interferon		
Pegasys		P
Peg-Intron Redipen		P
Infergen	SCN	NP
Hepatitis C Agents-Ribavirin		
ribavirin		P
Moderiba		NP
Rebetol Solution		NP
Ribapak		NP
Ribasphere		NP

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

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

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

(Effective 10/1/2015)

H. Pylori		
Helidac		P
Prevpac		P
Omeclamox Pak	SCN	NP
Pylera		NP
lansoprazole/amoxicillin/ clarithromycin		NP
Hypoglycemics, Alpha-Glucosidase Inhibitors		
acarbose		P
Glyset		P
Hypoglycemics, DPP-4 Inhibitors		
Janumet		P
Janumet XR		P
Januvia		P
Jentadueto		P
Tradjenta		P
Glyxambi		NP
Kazano		NP
Kombiglyze XR		NP
Nesina		NP
Onglyza		NP
Hypoglycemics, GLP 1		
Bydureon		P
Byetta		P
Tanzeum		P
Trulicity		NP
Victoza	SCN	NP
Hypoglycemics, Insulins		
Humalog Mix		P
Humalog 100 U		P
Humulin		P
Lantus		P
Levemir	SCN	P
Afrezza		NP
Apidra		NP
Humalog 200 U		NP
Novolin	SCN	NP

Hypoglycemics, Insulins (cont0		
Novolog	SCN	NP
Novolog Mix	SCN	NP
Toujeo Solostar		NP
Hypoglycemics, Meglitinides		
Prandin	SCN	P
nateglinide		NP
repaglinide		NP
Prandimet	SCN	NP
Hypoglycemics, Other		
metformin		P
metformin ER 500mg		P
metformin ER 750mg		P
Invokana		P
Riomet solution	SCN	P
metformin ER 1000mg		NP
metformin ER OSM-tab		NP
Cycloset	SCN	NP
Farxiga		NP
Glumetza ER		NP
Invokamet		NP
Jardiance		NP
Synjardy		NP
Welchol		NP
Xigduo XR		NP
Hypoglycemics, Sulfonylureas		
chlorpropamide		P
glimepiride		P
glipizide		P
glipizide ER		P
glipizide/metformin		P
glyburide		P
glyburide/metformin		P
tolazamide		NP
tolbutamide		NP
Hypoglycemics, Symlin		
Symlin	DR	NP

Hypoglycemics, Thiazolidinediones		
pioglitazone		P
pioglitazone-glimepiride		NP
pioglitazone-metformin		NP
Actoplus MET		NP
Actoplus MET XR		NP
Avandamet	SCN	NP
Avandaryl	SCN	NP
Avandia	SCN	NP
Duetact		NP
Oseni		NP
Immunomodulators, Topical		
Aldara	SCN	P
imiquimod		NP
Zyclara		NP
Immunomodulators, Topical-Calcineurin Inhibitors		
Elidel		P
tacrolimus 0.1%*		NP
tacrolimus 0.03%		NP
Protopic 0.1%*		NP
Protopic 0.03%		NP
*PA required for members 16 years of age and younger. Use Sec VII- of the PA/DGA.		
Intranasal Rhinitis Agents		
fluticasone		P
ipratropium		P
Astepro		P
Beconase AQ	SCN	P
Nasonex		P
Patanase		P
azelastine		NP
budesonide		NP
flunisolide		NP
olopatadine		NP
triamcinolone		NP
Dymista		NP
Omnaris	SCN	NP

Intranasal Rhinitis Agents (cont)			
Qnasl		NP	
Rhinocort Aqua		NP	
Veramyst	SCN	NP	
Zetonna	SCN	NP	
Leukotriene Modifiers			
montelukast chewable		P	
montelukast tablet		P	
montelukast granules		NP	
zafirlukast		NP	
Zyflo		NP	
Lipotropics, Bile Acid Sequestrants			
cholestyramine		P	
colestipol tablet		P	
colestipol granules		NP	
Colestid granules		NP	
Welchol		NP	
Lipotropics, Fibric Acids			
gemfibrozil		P	
Tricor		P	
Trilipix		P	
fenofibrate capsule		NP	
fenofibrate tablets		NP	
fenofibric acid		NP	
Antara		NP	
Fenoglide		NP	
Fibricor		NP	
Lipofen		NP	
Triglide		NP	
Lipotropics, Niacin			
Niacor		P	
Niaspan		P	
niacin ER tabs		NP	
Lipotropics, Omega-3 Acids			
Lovaza	SCN	DAPO	P
omega-3 acid ethyl esters		DAPO	NP

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

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

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

(Effective 10/1/2015)

Lipotropics, Omega-3 Acids (cont)			
Vascepa	SCN	DAPO	NP
Lipotropics, Other			
atorvastatin			P
lovastatin			P
pravastatin			P
simvastatin			P
amlodipine / atorvastatin			NP
fluvastatin			NP
Advicor			NP
Altoprev			NP
Crestor			NP
Caduet			NP
Juxtapid	DR		NP
Kynamro	DR		NP
Lescol			NP
Lescol XL			NP
Liptruzet			NP
Livalo			NP
Simcor			NP
Vytorin			NP
Zetia			NP
Migraine Agents, Other			
rizatriptan			P
rizatriptan ODT			P
Sumatrip tan tablets			P
Imitrex Nasal Spray			P
Relpax			P
almotriptan			NP
naratriptan			NP
sumatriptan nasal spray			NP
zolmitriptan tablets			NP
zolmitriptan ODT			NP
Axert			NP
Cambia			NP
Frova			NP
Treximet	SCN		NP

Migraine Agents, Other (cont)			
Zecuity	SCN		NP
Zomig Nasal Spray	SCN		NP
Migraine Agents, Injectable			
Imitrex Injectable			P
sumatriptan injectable			NP
Alsuma	SCN		NP
Sumavel	SCN		NP
Multiple Sclerosis Agents, Immunomodulators			
Aubagio			P
Avonex			P
Betaseron			P
Copaxone 20 mg			P
Copaxone 40 mg			P
Gilenya			P
Rebif			P
Rebif Rebifose			P
Extavia			NP
Glatopa			NP
Plegridy			NP
Tecfidera			NP
Multiple Sclerosis Agents, Other			
Ampyra ER	SCN		NP
Neuropathic Pain			
duloxetine 20 mg DR caps			P
duloxetine 30 mg DR caps			P
Duloxetine 60 mg DR caps			P
gabapentin			P
Lyrica			P
Gralise	DR		NP
Horizant	DR		NP
duloxetine 40 mg DR caps			NP
Irenka DR			NP
NSAIDs			
diclofenac potassium			P
diclofenac sodium			P
diclofenac ER			P

NSAIDs (cont)			
flurbiprofen			P
ibuprofen Rx			P
indomethacin			P
ketoprofen			P
ketorolac			P
meloxicam tablets			P
nabumetone			P
naproxen Rx			P
naproxen DS Rx			P
naproxen sodium Rx			P
sulindac			P
celecoxib cap			NP
diclofenac sodium/misoprostol			NP
diclofenac solution			NP
diflunisal			NP
etodolac			NP
Mobic Suspension			NP
etodolac XL			NP
fenoprofen			NP
indomethacin ER			NP
ketoprofen ER			NP
meclufenamate			NP
mefenamic acid			NP
meloxicam suspension			NP
naproxen CR	SCN		NP
oxaprozin			NP
piroxicam			NP
tolmetin			NP
tolmetin DS			NP
Celebrex			NP
Duexis	SCN		NP
Indocin suppository	SCN		NP
Indocin suspension			NP
Nalfon 400mg cap	SCN		NP
Naprelan CR	SCN		NP
Ponstel			NP

NSAIDs (cont)			
Sprix	SCN		NP
Tivorbex	SCN		NP
Vimovo			NP
Zipsor	SCN		NP
Zorvolex	SCN		NP
Ophthalmics, Allergic Conjunctivitis			
cromolyn			P
ketorolac			P
ketotifen			P
Alex			P
Pataday			P
azelastine			NP
epinastine			NP
Alocril			NP
Alomide			NP
Bepreve			NP
Emadine			NP
Lastacaft			NP
Patanol			NP
Pazeo			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

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

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

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

(Effective 10/1/2015)

Ophthalmics, Antibacterial (cont)		
gatifloxacin		NP
levofloxacin		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/dexamethasone		P
sulfacetamide/prednisolone		P
Blephamide		P
Blephamide S.O.P.		P
Pred-G ointment		P
Pred-G drops		P
Tobradex suspension		P
Tobradex ointment		P
neomycin/bacitracin/poly/HC		NP
tobramycin/dexamethasone		NP
neomycin/polymyxin/HC		NP
Tobradex ST		NP
Zylet		NP
Ophthalmics, Anti-inflammatories		
dexamethasone		P
fluorometholone		P
flurbiprofen		P
ketorolac		P
ketorolac LS		P
prednisolone acetate		P
prednisolone sod phosphate		P
Durezol		P
Flarex		P

Ophthalmics, Anti-inflammatories (cont)		
FML Forte		P
FML SOP		P
Ophthalmics, Anti-inflammatories		
Lotemax solution		P
Maxidex		P
Pred Mild		P
bromfenac		NP
diclofenac		NP
omnipred		NP
Acular LS		NP
Acuvail		NP
llevro		NP
Lotemax gel		NP
Lotemax ointment		NP
Nevanac		NP
Prolensa		NP
Vexol		NP
Ophthalmics, Glaucoma-Beta Blockers		
betaxolol		P
carteolol		P
levobunolol		P
metipranolol		P
timolol		P
Betoptol S		P
Istalol		NP
Timoptic Ocudose		NP
Timoptic XE		NP
Ophthalmics, Glaucoma-Other		
brimonidine 0.2%		P
dorzolamide		P
dorzolamide w/ timolol		P
pilocarpine		P
Alphagan P 0.15%		P
Azopt		P
Combigan		P
Cosopt PF		P

Ophthalmics, Glaucoma-Other (cont)				
Isopto Carpine 2%				P
Simbrinza				P
apraclonidine				NP
brimonidine tartrate 0.15%				NP
Alphagan P 0.1%				NP
lopidine				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				NP
Lumigan 0.01% 5 ml				NP
Lumigan 0.01% 7.5 ml				NP
Zioptan				NP
Opioid Dependency Agents				
Suboxone SL Film	DR	SCN		P
buprenorphine	DR			NP
buprenorphine-naloxone tab	DR			NP
Bunavail	DR	SCN		NP
Zubsolv	DR	SCN		NP
Otics, Antibiotics				
neomycin/polymyxin/HC				P
ofloxacin				P
Cipro HC				P
Coly-mycin S				P
ciprofloxacin				NP
Ciprodex				NP
Cortisporin TC				NP
Otics, Anti-Infectives & Anesthetics				
acetic acid				P
antipyrine/benzocaine				P
acetic acid/aluminum				NP

Otics, Anti-Infectives & Anesthetics (cont)		
acetic acid HC		NP
Pinnacaine		NP
Pancreatic Enzymes		
Pancrelipase 5,000 DR	SCN	P
Zenpep DR	SCN	P
Creon DR		NP
Creon EC		NP
Pancreaze		NP
Pertzye		NP
Ultresa		NP
Viokace		NP
Phosphate Binders		
calcium acetate 667mg tablet		P
Eliphos		P
Phoslyra	SCN	P
Renagel		P
calcium acetate 667mg capsule		NP
sevelamer carbonate		NP
Auryxia	SCN	NP
Fosrenol		NP
Magnebind		NP
Renvela		NP
Velphoro	SCN	NP
Platelet Aggregation Inhibitors		
clopidogrel		P
dipyridamole		P
Aggrenox		P
Plavix 300 mg		P
aspirin/dipyridamole		NP
ticlopidine		NP
Brilinta		NP
Effient		NP
Zontivity		NP
Proton Pump Inhibitors		
lansoprazole RX		P

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

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

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

(Effective 10/1/2015)

Proton Pump Inhibitors (cont)			
omeprazole RX			P
pantoprazole			P
Nexium Suspension			P
Prilosec suspension			P
Protonix suspension			P
esomeprazole DR			NP
omeprazole-bicarb RX			NP
rabeprazole			NP
Aciphex Sprinkle DR caps			NP
Dexilant DR 30mg			NP
Dexilant DR 60mg			NP
Nexium			NP
Prevacid SoluTab 15mg			NP
Prevacid SoluTab 30mg			NP
Zegerid			NP
Pulmonary Arterial Hypertension			
sildenafil	DR		P
Letairis			P
Tracleer			P
Adcirca	DR	SCN	NP
Adempas			NP
Opsumit			NP
Orenitram ER		SCN	NP
Revatio suspension	DR		NP
Tyvaso		SCN	NP
Ventavis		SCN	NP
Sedative Hypnotics			
estazolam			P
temazepam 15mg			P
temazepam 30mg			P
triazolam			P
zaleplon			P
zolpidem			P
Rozerem			P
eszopiclone			NP
flurazepam			NP
temazepam 7.5mg			NP

Sedative Hypnotics (cont)			
temazepam 22.5mg			NP
zolpidem ER			NP
Belsomra			NP
Doral			NP
Edluar			NP
Intermezzo			NP
Silenor			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
cyclobenzaprine ER			NP
metaxalone			NP
orphenadrine			NP
orphenadrine compound			NP
tizanidine capsules			NP
Amrix			NP
Dantrium			NP
Fexmid			NP
Lorzone		SCN	NP
Soma			NP
Steroids, Topical Low			
fluocinolone oil			P
hydrocortisone			P
Scalpicin 1% liquid			
alclometasone dipropionate cream			NP
alclometasone dipropionate oint			NP
desonide cream/ointment			NP
desonide lotion			NP

Steroids, Topical Low (cont)			
hydrocortisone acetate/urea			NP
hydrocortisone-aloë 2%			NP
Capex Shampoo	SCN		NP
Derma-Smoother-FS			NP
Desonate			NP
Texacort			NP
Steroids, Topical Medium			
fluticasone cream/ointment			P
mometasone furoate			P
betamethasone valerate foam			NP
clocortolone			NP
fluticasone lotion			NP
fluocinolone acetonide			NP
hydrocortisone butyrate lipid cream	SCN		NP
hydrocortisone butyrate			NP
hydrocortisone valerate			NP
prednicarbate			NP
Cloderm			NP
Cordran Tape			NP
Cutivate lotion			NP
Armpatop			NP
Luxiq			NP
Pandel			NP
Synalar	SCN		NP
Steroids, Topical High			
betamethasone valerate			P
fluocinonide			P
fluocinonide-e			P
triamcinolone acetonide			P
amcinonide			NP
betamethasone dipropionate			NP
desoximetasone			NP
diflorasone diacetate			NP
triamcinolone spray			NP
Halog			NP
Kenalog aerosol spray			NP

Steroids, Topical High (cont)			
Topicort 0.05% ointment			NP
Topicort 0.25% spray			NP
Trianex			NP
Vanos			NP
Steroids, Topical Very High			
clobetasol cream/ointment/solution/gel			P
clobetasol emollient			P
halobetasol propionate			P
Clobex Lotion	SCN		P
Clobex Shampoo	SCN		P
betamethasone dipropionate aug			NP
clobetasol foam			NP
clobetasol lotion			NP
clobetasol shampoo			NP
clobetasol spray			NP
Apexicon E			NP
Clobex spray			NP
Olux-E			NP
Stimulants and Related Agents			
amphetamine salt combo	DR		P
dexmethylphenidate	DR		P
dextroamphetamine capsules	DR		P
dextroamphetamine capsule ER	DR		P
dextroamphetamine 5mg tablet	DR		P
dextroamphetamine 10mg tablet	DR		P
guanfacine ER			P
methylphenidate	DR		P
methylphenidate ER tablet	DR		P
Adderall XR	DR		P
Daytrana	DR		P
Dexedrine Spansules	DR		P
Focalin	DR		P
Focalin XR	DR		P
Metadate CD	DR		P

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

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

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

(Effective 10/1/2015)

Stimulants and Related Agents (cont)			
Methylin tablets		DR	P
Methylin chewable		DR	P
Procentra	SCN	DR	P
Quillivant XR		DR	P
Strattera		DR	P
Vyvanse*		DR	P
clonidine ER tab		SCN	NP
dexmethylphenidate XR Cap		DR	NP
Dextroamp-amphet ER		DR	NP
dextroamphetamine 2.5mg		DR	NP
dextroamphetamine solution	SCN	DR	NP
dextroamphetamine 7.5 mg		DR	NP
methamphetamine		DR	NP
methylphenidate CD		DR	NP
methylphenidate chew tab		DR	NP
methylphenidate liquid		DR	NP
methylphenidate ER capsule		DR	NP
modafinil			NP
Aptensio XR	SCN	DR	NP
Desoxyn		DR	NP
Dexedrine 5mg tablet		DR	NP
Dexedrine 10mg tablet		DR	NP
Evekeo		DR	NP
Kapvay			NP
Methylin solution		DR	NP
Nuvigil			NP
Ritalin LA		DR	NP
Zenzedi		DR	NP
* PA required for the treatment of Binge Eating Disorder (BED). Use Sec VI of the PA/DGA (Refer to topic #15937)			
Ulcerative Colitis			
balsalazide			P
sulfasalazine			P
Apriso	SCN		P
Canasa			P

Ulcerative Colitis (cont)			
Lialda			P
Rowasa			P
mesalamine			NP
Asacol HD	SCN		NP
Delzicol	SCN		NP
Dipentum			NP
Giazo	SCN		NP
Pentasa			NP
Uceris			NP

Preferred Brand Name Drugs with Generic Copay/Dispensing Fees	
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
Depakote Sprinkles	01/01/2012
Dexedrine Spansule	01/01/2014
Differin Cream	01/01/2012
Differin 0.1% gel	01/01/2012
Imitrex Injection	07/01/2012
Imitrex Nasal	07/01/2012
Tegretol XR 200mg	01/01/2012
Tegretol XR 400 mg	01/01/2012
Tobradex suspension	01/01/2012
Tricor	07/01/2015

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

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