

MEDICAID PHARMACY PRIOR AUTHORIZATION ADVISORY COMMITTEE
Recommendations Summary
November 2, 2022

In Attendance:

	Committee Member	Yes or No
1	Rosanne Barber	Yes
2	Ward Brown, M.D.	Yes
2	Catherine Decker, Pharm. D.	No
3	Kevin Izard, M.D.	Yes – joined virtual meeting at 9:45am
4	Steve Maike, RPh	Yes – joined virtual meeting at 11:00am
5	William E. Raduege, M.D.	Yes
6	Christopher Schwake, M.D.	Yes
7	Alicia Walker, Pharm. D.	Yes
8	Michael Witkovsky, M.D.	Yes – joined virtual meeting at 10:00am

**This meeting is traditionally in-person, but was held via webinar on November 2, 2022, given COVID*

NOVEMBER 2022 THERAPEUTIC DRUG CLASSES

ALZHEIMER'S AGENTS
ANTICONVULSANTS
ANTIDEPRESSANTS, OTHER
ANTIDEPRESSANTS, SSRIs
ANTIHISTAMINES, MINIMALLY SEDATING
ANTIHYPERTENSIVES, SYMPATHOLYTIC
ANTIHYPURICEMICS (GOUT AGENTS)
ANTIPARKINSON'S AGENTS
ANTIPSORIATICS, ORAL
ANTIPSORIATICS, TOPICAL
ANTIPSYCHOTICS (ORAL AND INJECTABLE)
ANXIOLYTICS
BILE SALTS
BRONCHODILATORS, BETA AGONIST
COPD AGENTS
COUGH AND COLD/NARCOTICS
CYTOKINE AND CAM ANTAGONISTS
EPINEPHRINE, SELF-INJECTED
ERYTHROPOIESIS STIMULATING PROTEINS
GLUCOCORTICOID, INHALED
GLUCOCORTICOID, ORAL
HISTAMINE II RECEPTOR BLOCKERS
IDIOPATHIC PULMONARY FIBROSIS - *New class*
IMMUNOMODULATORS, ASTHMA
IMMUNOMODULATORS FOR ATOPIC DERMATITIS
IMMUNOMODULATORS, TOPICAL
INTRANASAL RHINITIS AGENTS
LEUKOTRIENE MODIFIERS
METHOTREXATE
MOVEMENT DISORDERS
NEUROPATHIC PAIN (ANALGESICS/ANESTHETICS TOPICAL AND FIBROMYALGIA)
NSAIDS
OPHTHALMIC ANTIBIOTICS
OPHTHALMIC ANTIBIOTIC/STEROID COMBINATIONS
OPHTHALMICS FOR ALLERGIC CONJUNCTIVITIS
OPHTHALMIC ANTIINFLAMMATORIES
OPHTHALMICS, ANTI-INFLAMMATORY/IMMUNOMODULATOR
OPHTHALMICS, GLAUCOMA AGENTS
OTIC ANTIBIOTICS
OTIC ANTI-INFECTIVES
SEDATIVE HYPNOTICS
SICKLE CELL ANEMIA TREATMENTS
STEROIDS, TOPICAL-HIGH POTENCY
STEROIDS, TOPICAL-LOW POTENCY
STEROIDS, TOPICAL-MEDIUM POTENCY
STEROIDS, TOPICAL-VERY HIGH POTENCY
STIMULANTS AND RELATED AGENTS

Recommendations Summary:

The following drug classes presented for review had no recommended changes since the November 3, 2021, Wisconsin Medicaid Pharmacy PA Advisory Committee (PAC) meeting and were approved by the PAC in a block vote.

Drug Classes included in the committee block vote:

- Antihistamines, Minimally Sedating
- Antihypertensives, Sympatholytics
- Antipsoriatics, Oral
- COPD Agents
- Epinephrine, Self-Injected
- Erythropoiesis Stimulating Proteins
- Histamine II Receptor Blocker
- Immunomodulators, Asthma
- Immunomodulators, Topical
- Methotrexate
- Movement Disorders
- Neuropathic Pain
- Ophthalmic Antibiotics
- Ophthalmic Antibiotic-Steroid Combinations
- Otic Antibiotics
- Otic Anti-Infectives & Anesthetics
- Sickle Cell Anemia Treatments
- Steroids, Topical High
- Steroids, Topical Low
- Steroids, Topical Medium
- Steroids, Topical Very High

- Discussion:
Kim Wohler acknowledged the testimony provided in the morning session related to the Sickle Cell Anemia Treatments class and noted the State's efforts to provide access to a variety of medications in the class.

- Kevin Izard made a motion to accept staff recommendations as presented.
 - Second – Ward Brown
 - All members were in favor of the motion
 - Motion passed

The following drug classes presented for review had recommended changes since the November 3, 2021, Wisconsin Medicaid Pharmacy PA Advisory Committee (PAC) meeting and were approved by the PAC in a block vote.

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

- Alzheimer's Agents
- Anticonvulsants
- Antidepressants, Other
- Antidepressants, SSRIs
- Antihyperuricemics (Gout Agents)
- Antiparkinson's Agents
- Antipsoriatics, Topical
- Antipsychotics (Antipsychotics, Injectable)
- Anxiolytics
- Bile Salts
- Bronchodilators, Beta Agonist
- Cough And Cold, Narcotic
- Cytokine And Cam Antagonists
- Glucocorticoids, Inhaled
- Glucocorticoids, Oral
- Idiopathic Pulmonary Fibrosis (New Drug Class)
- Immunomodulators, Atopic Dermatitis
- Intranasal Rhinitis Agents
- Leukotriene Modifiers
- NSAIDS
- Ophthalmics For Allergic Conjunctivitis
- Ophthalmics, Anti-Inflammatories
- Ophthalmics, Anti-Inflammatory/Immunomodulator
- Ophthalmics, Glaucoma Agent
- Sedative Hypnotics
- Stimulants And Related Agents (Stimulants; Stimulants, Related Agents; And Stimulants, Related Agents-Wake Promoting)

- Discussion:
Kim Wohler acknowledged the testimony provided in the morning session regarding Dupixent in the Immunomodulators, Atopic Dermatitis class, and stated that the Committee discussed the review of clinical criteria for systemic agents in this class during the closed session.

Kevin Izard noted that the Committee had an in-depth conversation on the value of requiring step therapy with a topical calcineurin inhibitor in this class. Izard indicated the State plans to reassess the value of this step-through, and may update Prior Authorization criteria in this area.

Steve Maike added that in commercial pharmacy, he estimates Immunomodulators, Atopic Dermatitis is a top five trending class with intense scrutiny of utilization management, and the Committee will continue to monitor this class over time.

Kim Wohler stated that changes made to clinical Prior Authorization Criteria would be effective January 1, 2023.

- Rosanne Barber made a motion to accept staff recommendations as presented.
 - Second – William Raduege
 - All members were in favor of the motion
 - Motion passed

Wisconsin Medicaid ALZHEIMER'S AGENTS		Recommendations				
Brand Name	Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
DONEPEZIL TABLET (ORAL)	53.8%	P	P			
MEMANTINE TABLET (AG) (ORAL)	0.3%	P	P			
MEMANTINE TABLET (ORAL)	38.7%	P	P			
MEMANTINE ER (AG) (ORAL)	0.0%	NP	NP			
EXELON (TRANSDERM.)	1.8%	P	P			
DONEPEZIL ODT (ORAL)	0.2%	P	P			
MEMANTINE TABLET DOSE PACK (AG) (ORAL)	0.1%	P	P			
RIVASTIGMINE (AG) (TRANSDERM.)	0.0%	NP	NP			
RIVASTIGMINE CAPSULES (ORAL)	2.2%	P	P			
DONEPEZIL 23 MG (ORAL)	0.9%	NP	NP			
MEMANTINE ER (ORAL)	0.9%	NP	NP			
GALANTAMINE TABLET (ORAL)	0.3%	NP	NP			
GALANTAMINE ER (ORAL)	0.2%	NP	NP			
RIVASTIGMINE (TRANSDERM.)	0.1%	NP	NP			
NAMZARIC (ORAL)	0.1%	NP	NP			
GALANTAMINE SOLUTION (ORAL)	0.0%	NP	NP			
NAMZARIC DOSE PACK (ORAL)	0.0%	NP	NP			
ADLARITY (TRANSDERM)	0.0%	NR	NP			
MEMANTINE SOLUTION (ORAL)	0.1%	P	P			

Wisconsin Medicaid		Recommendations			COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
ANTICONVULSANTS		Curr. MS	Curr. PDL Status	PDL Rec			
Brand Name							
CLONAZEPAM (ORAL)		19.5%	P	P			
PHENOBARBITAL TABLET (ORAL)		0.6%	P	P			
CLONAZEPAM ODT (ORAL)		0.2%	NP	NP			
PHENOBARBITAL ELIXIR (ORAL)		0.3%	P	P			
DIASTAT (RECTAL)		0.0%	P	P			
DIASTAT ACUDIAL (RECTAL)		0.1%	P	P			
DIAZEPAM (AG) (RECTAL)		0.0%	P	P			
DIAZEPAM DEVICE (AG) (RECTAL)		0.2%	P	P			
VAL TOCO (NASAL)		0.2%	NP	P			
NAYZILAM (NASAL)		0.3%	NP	P			
TRILEPTAL SUSPENSION (ORAL)		0.0%	NP	NP			
TEGRETOL XR (ORAL)		0.7%	P	P			
CARBATROL (ORAL)		0.6%	P	P			
TEGRETOL SUSPENSION (ORAL)		0.1%	P	P			
TEGRETOL TABLET (ORAL)		0.9%	P	P			
OXCARBAZEPINE TABLETS (ORAL)		4.5%	P	P			
CARBAMAZEPINE TABLET (ORAL)		0.0%	NP	NP			
CARBAMAZEPINE CHEWABLE TABLET (ORAL)		0.3%	P	P			
CARBAMAZEPINE SUSPENSION (ORAL)		0.0%	NP	NP			
EQUETRO (ORAL)		0.0%	NP	NP			
CARBAMAZEPINE XR (AG) (ORAL)		0.0%	NP	NP			
CARBAMAZEPINE XR (ORAL)		0.0%	NP	NP			
OXCARBAZEPINE SUSPENSION (ORAL)		0.5%	P	P			
CARBAMAZEPINE ER (GENERIC CARBATROL) (ORAL)		0.0%	NP	NP			
OXTELLAR XR (ORAL)		0.2%	NP	NP			
APTIOM (ORAL)		0.1%	NP	NP			
FELBATOL TABLET (ORAL)		0.3%	P	P			
DEPAKOTE SPRINKLE (ORAL)		1.2%	P	P			
FELBATOL SUSPENSION (ORAL)		0.2%	P	P			
DIVALPROEX TABLET (ORAL)		4.1%	P	P			
DILANTIN INFATAB (ORAL)		0.0%	P	P			
VALPROIC ACID SOLUTION (ORAL)		0.8%	P	P			
PHENYTOIN SUSPENSION (AG) (ORAL)		0.0%	P	P			
DIVALPROEX ER (ORAL)		5.6%	P	P			
PRIMIDONE (ORAL)		0.7%	P	P			
ETHOSUXIMIDE CAPSULE (AG) (ORAL)		0.0%	P	P			
PHENYTOIN SUSPENSION (ORAL)		0.1%	P	P			
PHENYTOIN CAPSULE (ORAL)		0.6%	P	P			
PHENYTOIN CHEWABLE TABLET (ORAL)		0.1%	P	P			
CELONTIN (ORAL)		0.0%	P	P			
VALPROIC ACID CAPSULE (ORAL)		0.1%	P	P			
ETHOSUXIMIDE SYRUP (ORAL)		0.1%	P	P			
ETHOSUXIMIDE CAPSULE (ORAL)		0.2%	P	P			
DILANTIN 30 MG CAPSULE (ORAL)		0.0%	P	P			
DIVALPROEX SPRINKLE (ORAL)		0.0%	NP	NP			
PHENYTEK (ORAL)		0.0%	NP	NP			
PHENYTOIN EXT CAPSULE (GENERIC PHENYTEK) (ORAL)		0.1%	P	P			
FELBAMATE SUSPENSION (ORAL)		0.0%	NP	NP			
FELBAMATE TABLET (ORAL)		0.0%	NP	NP			
GABITRIL (ORAL)		0.0%	P	P			
LAMOTRIGINE TABLET (ORAL)		23.4%	P	P			
TOPIRAMATE TABLETS (ORAL)		12.6%	P	P			
LEVETIRACETAM TABLETS (ORAL)		7.2%	P	P			
ZONISAMIDE (ORAL)		1.9%	P	P			
LEVETIRACETAM SOLUTION (ORAL)		2.7%	P	P			
CLOBAZAM TABLET (ORAL)		1.0%	P	P			
LACOSAMIDE TABLET (ORAL)		0.9%	P	P			
LEVETIRACETAM ER (ORAL)		0.6%	P	P			
LAMICTAL TABLET DOSE PACK (ORAL)		0.0%	P	P			
LAMOTRIGINE DISPERSIBLE TABLET (ORAL)		0.4%	P	P			
QUDEXY XR (ORAL)		0.0%	NP	NP			
CLOBAZAM SUSPENSION (ORAL)		0.6%	P	P			
TOPIRAMATE SPRINKLE (ORAL)		0.3%	P	P			
LAMOTRIGINE XR (ORAL)		1.3%	P	P			
LACOSAMIDE SOLUTION (ORAL)		0.0%	P	P			
LAMICTAL ODT DOSE PACK (ORAL)		0.0%	NP	NP			
EPRONTIA SOLUTION (ORAL)		0.1%	NR	NP			
LAMOTRIGINE ODT DOSE PACK (ORAL)		0.0%	NP	NP			
BANZEL TABLET (ORAL)		0.1%	NP	NP			
SPRITAM (ORAL)		0.0%	NP	NP			
VIMPAT SOLUTION (ORAL)		0.3%	NP	NP			
XCOPRI TITRATION PAK (ORAL)		0.0%	NP	NP			
LAMOTRIGINE ODT (ORAL)		0.1%	NP	NP			
LAMICTAL ODT (ORAL)		0.0%	NP	NP			
VIMPAT TABLET (ORAL)		0.9%	NP	NP			
SYMPAZAN (ORAL)		0.0%	NP	NP			
FYCOMPA TABLET (ORAL)		0.1%	NP	NP			
LAMOTRIGINE TABLET DOSE PACK (ORAL)		0.0%	P	P			
TIAGABINE (ORAL)		0.0%	NP	NP			
TROKENDI XR (ORAL)		0.2%	NP	NP			
XCOPRI TABLET (ORAL)		0.1%	NP	NP			
RUFINAMIDE TABLET (ORAL)		0.0%	NP	NP			
BANZEL SUSPENSION (ORAL)		0.0%	NP	NP			
LAMICTAL XR (ORAL)		0.1%	NP	NP			
TOPIRAMATE ER (QUDEXY) (AG) (ORAL)		0.1%	NP	NP			
FYCOMPA SUSPENSION (ORAL)		0.0%	NP	NP			
BRIVIAC SOLUTION (ORAL)		0.1%	NP	NP			
TOPIRAMATE ER (QUDEXY) (ORAL)		0.0%	NP	NP			
BRIVIAC TABLET (ORAL)		0.3%	NP	NP			
ELEPSIA XR TABLET (ORAL)		0.0%	NP	NP			
RUFINAMIDE SUSPENSION (ORAL)		0.0%	NP	NP			
LAMICTAL XR DOSE PACK (ORAL)		0.0%	NP	NP			
EPIDIOLEX (ORAL)		0.6%	NP	NP			
DIACOMIT POWDER PACK (ORAL)		0.0%	NP	NP			
DIACOMIT CAPSULE (ORAL)		0.0%	NP	NP			
SABRIL POWDER PACK (ORAL)		0.1%	P	P			
SABRIL TABLET (ORAL)		0.0%	P	P			
VIGABATRIN POWDER PACK (ORAL)		0.0%	NP	NP			
FINTEPLA (ORAL)		0.0%	NP	NP			
VIGABATRIN TABLET (ORAL)		0.0%	NP	NP			

Wisconsin Medicaid ANTIDEPRESSANTS, OTHER		Recommendations				
Brand Name	Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
APLENZIN (ORAL)	0.0%	NP	NP			
TRAZODONE (ORAL)	32.0%	P	P			
BUPROPION XL (ORAL)	24.5%	P	P			
VENLAFAXINE (ORAL)	1.4%	P	P			
BUPROPION SR (ORAL)	5.8%	P	P			
VENLAFAXINE ER CAPSULES (ORAL)	16.6%	P	P			
MIRTAZAPINE TABLET (ORAL)	11.3%	P	P			
BUPROPION (ORAL)	1.6%	P	P			
VENLAFAXINE ER TABLETS (AG) (ORAL)	0.0%	NP	NP			
MIRTAZAPINE ODT (ORAL)	0.3%	P	P			
NEFAZODONE (ORAL)	0.0%	NP	NP			
DESVENLAFAXINE ER (PRISTIQ) (ORAL)	3.3%	P	P			
DESVENLAFAXINE ER (PRISTIQ) (AG) (ORAL)	0.3%	P	P			
MARPLAN (ORAL)	0.0%	P	P			
VIIBRYD (ORAL)	1.1%	NP	NP			
PHENELZINE (ORAL)	0.0%	P	P			
TRINTELLIX (ORAL)	1.4%	NP	NP			
FETZIMA (ORAL)	0.2%	NP	NP			
VENLAFAXINE ER TABLETS (ORAL)	0.0%	NP	NP			
FORFIVO XL (ORAL)	0.0%	NP	NP			
VILAZODONE (ORAL)	0.0%	NR	NP			
VILAZODONE (AG) (ORAL)	0.0%	NR	NP			
TRANLYCYPROMINE SULFATE (ORAL)	0.0%	P	P			
VENLAFAXINE BESYLATE ER (ORAL)	0.0%	NR	NP			
DESVENLAFAXINE ER (NO BRAND) (ORAL)	0.0%	NP	NP			
VIIBRYD DOSE PACK (ORAL)	0.0%	NP	NP			
EMSAM (TRANSDERMAL)	0.0%	NP	NP			
BUPROPION XL (FORFIVO XL) (AG) (ORAL)	0.0%	NP	NP			

Wisconsin Medicaid ANTIDEPRESSANTS, SSRIs		Recommendations				
Brand Name	Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
CITALOPRAM TABLET (ORAL)	7.9%	P	P			
FLUOXETINE CAPSULE (ORAL)	25.1%	P	P			
SERTRALINE TABLET (ORAL)	36.9%	P	P			
ESCITALOPRAM TABLET (ORAL)	23.0%	P	P			
PAROXETINE TABLET (ORAL)	4.5%	P	P			
FLUOXETINE TABLET (ORAL)	0.2%	NP	NP			
FLUVOXAMINE (ORAL)	1.0%	P	P			
FLUOXETINE 60 MG (ORAL)	0.0%	NP	NP			
FLUOXETINE SOLUTION (ORAL)	0.7%	P	P			
PAROXETINE CR (AG) (ORAL)	0.0%	NP	NP			
SERTRALINE CONC (ORAL)	0.4%	P	P			
CITALOPRAM SOLUTION (ORAL)	0.1%	P	P			
PAROXETINE CR (ORAL)	0.0%	NP	NP			
PEXEVA (ORAL)	0.0%	NP	NP			
ESCITALOPRAM SOLUTION (ORAL)	0.2%	P	P			
SERTRALINE CAPSULE (ORAL)	0.0%	NR	NP			
BRISDELLE (ORAL)	0.0%	NP	NP			
PAROXETINE (BRISDELLE) (AG) (ORAL)	0.0%	NP	NP			
FLUOXETINE CAPSULE DR (ORAL)	0.0%	NP	NP			
PAROXETINE (BRISDELLE) (ORAL)	0.0%	NP	NP			
CITALOPRAM CAPSULE (ORAL)	0.0%	NR	NP			
PAXIL SUSPENSION (ORAL)	0.0%	P	P			
PAROXETINE SUSPENSION (ORAL)	0.0%	NP	NP			
FLUVOXAMINE ER (ORAL)	0.1%	NP	NP			

Wisconsin Medicaid		Recommendations					
ANTIHYPURICEMICS		Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
Brand Name							
ALLOPURINOL (ORAL)		84.0%	P	P			
COLCHICINE TABLET (AG) (ORAL)		0.1%	P	P			
COLCHICINE TABLET (ORAL)		11.4%	P	P			
FEBUXOSTAT (ORAL)		0.0%	NP	P			
MITIGARE (ORAL)		0.3%	NP	NP			
PROBENECID / COLCHICINE (ORAL)		1.3%	P	P			
PROBENECID (ORAL)		0.8%	P	P			
COLCHICINE CAPSULE (AG) (ORAL)		0.0%	NP	NP			
ULORIC (ORAL)		2.2%	NP	NP			
GLOPERBA (ORAL)		0.0%	NP	NP			

Wisconsin Medicaid		Recommendations					
ANTIPARKINSONS AGENTS		Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
Brand Name							
DHIVY TABLET (ORAL)		0.0%	NR	NP			
ZELAPAR (ORAL)		0.0%	NP	NP			
AZILECT (ORAL)		0.0%	NP	NP			
RASAGILINE (ORAL)		0.2%	NP	NP			
AMANTADINE SYRUP (ORAL)		0.6%	P	P			
ROPINIROLE (ORAL)		22.8%	P	P			
PRAMIPEXOLE (ORAL)		17.2%	P	P			
BENZTROPINE (ORAL)		37.0%	P	P			
TRIHEXYPHENIDYL TABLET (ORAL)		5.5%	P	P			
AMANTADINE CAPSULE (ORAL)		3.1%	P	P			
CARBIDOPA / LEVODOPA (ORAL)		7.1%	P	P			
CARBIDOPA / LEVODOPA ER (ORAL)		1.6%	P	P			
SELEGILINE TABLET (ORAL)		0.0%	P	P			
TRIHEXYPHENIDYL ELIXIR (ORAL)		0.2%	P	P			
AMANTADINE TABLET (ORAL)		2.4%	P	P			
NEUPRO (TRANSDERM)		0.3%	NP	NP			
ENTACAPONE (ORAL)		0.1%	NP	NP			
ROPINIROLE ER (ORAL)		0.2%	NP	NP			
CARBIDOPA/LEVODOPA/ENTACAPONE (ORAL)		0.1%	P	P			
CARBIDOPA / LEVODOPA ODT (ORAL)		0.1%	P	P			
SELEGILINE CAPSULE (ORAL)		0.0%	P	P			
BROMOCRIPTINE (ORAL)		0.7%	P	P			
CARBIDOPA (ORAL)		0.1%	P	P			
RYTARY (ORAL)		0.5%	NP	NP			
OSMOLEX ER (ORAL)		0.0%	NP	NP			
ONGENTYS (ORAL)		0.0%	NP	NP			
PRAMIPEXOLE ER (ORAL)		0.1%	NP	NP			
INBRIJA (INHALATION)		0.0%	NP	NP			
STALEVO (ORAL)		0.0%	NP	NP			
XADAGO (ORAL)		0.0%	NP	NP			
KYNMOBI (SUBLINGUAL)		0.0%	NP	NP			
GOCOVRI (ORAL)		0.0%	NP	NP			
TOLCAPONE (ORAL)		0.0%	NP	NP			
NOURIANZ (ORAL)		0.0%	NP	NP			

Wisconsin Medicaid		Recommendations					
ANTIPSORIATICS, TOPICAL		Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
Brand Name							
TACLONEX SCALP (TOPICAL)		7.4%	P	P			
VECTICAL (TOPICAL)		0.3%	P	P			
CALCIPOTRIENE SOLUTION (TOPICAL)		7.7%	P	P			
ENSTILAR (TOPICAL)		4.1%	NP	NP			
SORILUX (TOPICAL)		0.0%	NP	NP			
CALCIPOTRIENE CREAM (TOPICAL)		47.5%	P	P			
CALCIPOTRIENE FOAM (AG) (TOPICAL)		0.0%	NP	NP			
CALCIPOTRIENE OINTMENT (TOPICAL)		30.4%	P	P			
CALCIPOTRIENE/BETAMETHASONE OINTMENT (AG) (TOPICAL)		0.0%	NP	NP			
CALCIPOTRIENE/BETAMETHASONE OINTMENT (TOPICAL)		2.4%	NP	NP			
CALCIPOTRIENE/BETAMETHASONE SUSPENSION (AG) (TOPICAL)		0.0%	NP	NP			
CALCITRIOL OINTMENT (TOPICAL)		0.0%	NP	NP			
DUOBRII (TOPICAL)		0.3%	NP	NP			
ZORYVE (TOPICAL)		0.0%	NR	NP			
CALCIPOTRIENE FOAM (TOPICAL)		0.0%	NR	NP			
CALCIPOTRIENE/BETAMETHASONE SUSPENSION (TOPICAL)		0.0%	NP	NP			
VTAMA (TOPICAL)		0.0%	NR	NP			

Wisconsin Medicaid		Recommendations					
ANTIPSYCHOTICS		Curr.	Curr.	PDL	COMMITTEE	STATE	SECRETARY
Brand Name	MS	PDL Status	Rec	RECOMMENDATIONS	MODIFICATIONS	MODIFICATIONS	
SAPHRIS (SUBLINGUAL)	0.3%	NP	NP				
RISPERIDONE TABLET (ORAL)	11.2%	P	P				
QUETIAPINE TABLETS (ORAL)	25.2%	P	P				
OLANZAPINE TABLET (ORAL)	8.5%	P	P				
ARIPIRAZOLE TABLET (ORAL)	20.2%	P	P				
QUETIAPINE ER (ORAL)	1.8%	P	P				
ZIPRASIDONE CAPSULE (ORAL)	3.4%	P	P				
RISPERIDONE SOLUTION (ORAL)	0.4%	P	P				
OLANZAPINE ODT (ORAL)	0.7%	P	P				
CLOZAPINE (ORAL)	2.2%	P	P				
RISPERIDONE ODT (ORAL)	0.3%	P	P				
ASENAPINE (AG) (SUBLINGUAL)	0.0%	NP	NP				
ASENAPINE (SUBLINGUAL)	0.0%	NP	NP				
PALIPERIDONE (AG) (ORAL)	0.0%	NP	NP				
PALIPERIDONE (ORAL)	1.2%	NP	NP				
LATUDA (ORAL)	6.8%	P	P				
ARIPIRAZOLE SOLUTION (ORAL)	0.2%	P	P				
FANAPT TABLET (ORAL)	0.1%	NP	NP				
CLOZAPINE ODT (ORAL)	0.1%	NP	NP				
VRAYLAR (ORAL)	0.0%	P	Alternate				
VRAYLAR (ORAL)	5.3%	P	P				
REXULTI (ORAL)	1.2%	NP	NP				
CAPLYTA (ORAL)	0.3%	NP	NP				
SECUADO (TRANSDERMAL)	0.0%	NP	NP				
CLOZAPINE ODT (AG) (ORAL)	0.0%	NP	NP				
ARIPIRAZOLE ODT (ORAL)	0.1%	P	P				
ABILIFY MYCITE (ORAL)	0.0%	NP	NP				
NUPLAZID CAPSULE (ORAL)	0.0%	NP	NP				
NUPLAZID TABLET (ORAL)	0.0%	NP	NP				
VERSACLOZ (ORAL)	0.0%	NP	NP				
SYMBYAX (ORAL)	0.0%	NP	NP				
OLANZAPINE/FLUOXETINE (ORAL)	0.0%	NP	NP				
LYBALVI (ORAL)	0.1%	NR	NP				
HALDOL DECANOATE (INTRAMUSC)	0.0%	P	P				
HALOPERIDOL DECANOATE (INJECTION)	0.9%	P	P				
FLUPHENAZINE DECANOATE (INJECTION)	0.2%	P	P				
RISPERDAL CONSTA (INTRAMUSC)	0.6%	P	P				
PERSERIS (SUBCUTANEOUS)	0.0%	P	P				
INVEGA SUSTENNA (INTRAMUSC)	2.1%	P	P				
ARISTADA INITIO (INTRAMUSC)	0.0%	P	P				
ZYPREXA RELPREVV (INTRAMUSC)	0.0%	P	P				
ABILIFY MAINTENA (INTRAMUSC.)	1.0%	P	P				
ARISTADA (INTRAMUSC)	0.8%	P	P				
INVEGA TRINZA (INTRAMUSC)	0.2%	P	P				
INVEGA HAFYERA (INTRAMUSC)	0.0%	NR	P				
ZIPRASIDONE (INTRAMUSC)	0.0%	NP	NP				
HALOPERIDOL LACTATE CONC (ORAL)	0.1%	P	P				
HALOPERIDOL (ORAL)	2.4%	P	P				
PERPHENAZINE (ORAL)	0.2%	P	P				
LOXAPINE (ORAL)	0.3%	P	P				
TRIFLUOPERAZINE (ORAL)	0.1%	P	P				
THIORIDAZINE (ORAL)	0.0%	NP	NP				
THIOTHIXENE (ORAL)	0.1%	P	P				
FLUPHENAZINE TABLET (ORAL)	0.6%	P	P				
CHLORPROMAZINE (ORAL)	0.5%	P	P				
PIMOZIDE (ORAL)	0.1%	P	P				
FLUPHENAZINE ELIXIR/SOLN (ORAL)	0.0%	P	P				
MOLINDONE (ORAL)	0.0%	NP	NP				
AMITRIPTYLINE / PERPHENAZINE (ORAL)	0.0%	P	P				

Wisconsin Medicaid		Recommendations					
ANXIOLYTICS		Curr.	Curr.	PDL	COMMITTEE	STATE	SECRETARY
Brand Name	MS	PDL Status	Rec	RECOMMENDATIONS	MODIFICATIONS	MODIFICATIONS	
LOREEV XR CAP ER 24H (ORAL)	0.0%	NR	NP				
CHLORDIAZEPOXIDE (ORAL)	0.6%	P	P				
DIAZEPAM TABLET (ORAL)	9.8%	P	P				
ALPRAZOLAM TABLET (ORAL)	28.4%	P	P				
LORAZEPAM TABLET (ORAL)	23.9%	P	P				
BUSPIRONE (ORAL)	35.2%	P	P				
ALPRAZOLAM ER (ORAL)	1.0%	P	P				
DIAZEPAM SOLUTION (ORAL)	0.5%	P	P				
LORAZEPAM INTENSOL (ORAL)	0.2%	P	P				
DIAZEPAM INTENSOL (ORAL)	0.1%	NP	NP				
ALPRAZOLAM ODT (ORAL)	0.0%	NP	NP				
OXAZEPAM (ORAL)	0.0%	NP	NP				
CLORAZEPATE (ORAL)	0.3%	NP	NP				
ALPRAZOLAM INTENSOL (ORAL)	0.0%	P	NP				
MEPROBAMATE (ORAL)	0.0%	NP	NP				

Wisconsin Medicaid		Recommendations					
BILE SALTS		Curr.	Curr.	PDL	COMMITTEE	STATE	SECRETARY
Brand Name	MS	PDL Status	Rec	RECOMMENDATIONS	MODIFICATIONS	MODIFICATIONS	
URSODIOL 300 MG CAPSULE (ORAL)	74.4%	P	P				
URSODIOL TABLET (ORAL)	23.1%	P	P				
RELTONE (ORAL)	0.0%	NP	NP				
OCALIVA (ORAL)	0.9%	NP	NP				
CHOLBAM (ORAL)	0.6%	NP	NP				
BYLVAY CAPSULE (ORAL)	0.0%	NP	NP				
BYLVAY PELLETT (ORAL)	0.0%	NP	NP				
CHENODAL (ORAL)	0.4%	NP	NP				
LIVMARLI (ORAL)	0.6%	NR	NP				

Wisconsin Medicaid		Recommendations					
BRONCHODILATORS, BETA AGONIST		Curr.	Curr.	PDL	COMMITTEE	STATE	SECRETARY
Brand Name	MS	PDL Status	Rec	RECOMMENDATIONS	MODIFICATIONS	MODIFICATIONS	
SEREVENT (INHALATION)	0.2%	P	P				
STRIVERDI RESPIMAT (INHALATION)	0.0%	NP	NP				
ALBUTEROL NEB SOLN 2.5 MG/3 ML (INHALATION)	8.1%	P	P				
ALBUTEROL NEB SOLN 100 MG/20 ML (INHALATION)	0.0%	P	P				
ALBUTEROL NEB SOLN 2.5 MG/0.5 ML (INHALATION)	0.0%	P	P				
ALBUTEROL NEB SOLN 0.63, 1.25 MG (AG) (INHALATION)	0.2%	P	P				
ALBUTEROL NEB SOLN 0.63, 1.25 MG (INHALATION)	0.6%	P	P				
LEVALBUTEROL NEB SOLN (INHALATION)	0.1%	NP	NP				
LEVALBUTEROL NEB SOLN CONC (INHALATION)	0.0%	NP	NP				
METAPROTERENOL SYRUP (ORAL)	0.0%	NP	NP				
ALBUTEROL SYRUP (ORAL)	0.1%	P	P				
ALBUTEROL ER (ORAL)	0.0%	P	P				
ALBUTEROL TABLET (ORAL)	0.0%	P	P				
TERBUTALINE (AG) (ORAL)	0.0%	P	P				
TERBUTALINE (ORAL)	0.0%	P	P				
ARFORMOTEROL (AG) (INHALATION)	0.0%	NP	NP				
ARFORMOTEROL (INHALATION)	0.0%	NP	NP				
FORMOTEROL (AG) (INHALATION)	0.0%	NP	NP				
BROVANA (INHALATION)	0.0%	NP	NP				
PERFOROMIST (INHALATION)	0.0%	NP	NP				
FORMOTEROL (INHALATION)	0.0%	NP	NP				
PROAIR HFA (INHALATION)	6.8%	P	P				
PROVENTIL HFA (INHALATION)	0.0%	P	P				
VENTOLIN HFA (INHALATION)	1.8%	P	P				
PROAIR RESPICLICK (INHALATION)	0.0%	NP	NP				
PROAIR DIGIHALER (INHALATION)	0.0%	NP	NP				
ALBUTEROL HFA (PROVENTIL) (AG) (INHALATION)	1.5%	P	NP				
ALBUTEROL HFA (PROAIR) (AG) (INHALATION)	27.2%	P	P				
ALBUTEROL HFA (PROVENTIL) (INHALATION)	6.7%	P	NP				
ALBUTEROL HFA (PROAIR) (INHALATION)	18.8%	P	P				
ALBUTEROL HFA (VENTOLIN) (AG) (INHALATION)	27.4%	P	NP				
LEVALBUTEROL HFA (AG) (INHALATION)	0.3%	NP	NP				
XOPENEX HFA (INHALATION)	0.0%	NP	NP				

Wisconsin Medicaid		Recommendations					
COUGH AND COLD, NARCOTIC		Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
Brand Name							
GUAIFENESIN/CODEINE LIQUID OTC (ORAL)		60.2%	P	P			
PROMETHAZINE/CODEINE SYRUP (ORAL)		39.2%	P	P			
HYDROCODONE/HOMATROPINE SYRUP (ORAL)		0.0%	NP	NP			
PROMETHAZINE/PHENYLEPHRINE/CODEINE SYRUP (ORAL)		0.2%	P	NP			
HYDROCODONE/CHLORPHENIRAMINE SUSPENSION ER 12H (ORAL)		0.4%	NP	NP			

Wisconsin Medicaid		Recommendations					
CYTOKINE AND CAM ANTAGONISTS		Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
Brand Name							
OTEZLA (ORAL)		8.6%	P	P			
XELJANZ (ORAL)		2.7%	P	P			
ENBREL VIAL (SUBCUTANEOUS)		0.1%	P	P			
ENBREL KIT (INJECTION)		0.0%	P	P			
KINERET (INJECTION)		0.2%	NP	NP			
ENBREL SYRINGE (INJECTION)		1.6%	P	P			
ENBREL MINI CARTRIDGE (SUBCUTANE.)		0.9%	P	P			
ENBREL PEN (INJECTION)		8.5%	P	P			
ORENCIA CLICKJECT (SUBCUTANE.)		1.9%	P	P			
ORENCIA SYRINGE (SUBCUTANE.)		0.7%	P	P			
HUMIRA KIT (INJECTION)		3.7%	P	P			
HUMIRA PEN KIT (INJECTION)		48.1%	P	P			
SIMPONI SYRINGE (INJECTION)		0.1%	NP	NP			
SIMPONI PEN INJECTOR (INJECTION)		0.5%	NP	NP			
CIMZIA SYRINGE KIT (INJECTION)		1.9%	NP	NP			
XELJANZ XR (ORAL)		0.2%	NP	NP			
KEVZARA SYRINGE (SUBCUTANEOUS)		0.1%	NP	NP			
XELJANZ SOLUTION (ORAL)		0.0%	NP	NP			
ACTEMRA SYRINGE (SUBCUTANE.)		0.7%	NP	NP			
KEVZARA PEN (SUBCUTANEOUS)		0.4%	NP	NP			
TALTZ SYRINGE (SUBCUTANE.)		0.3%	NP	NP			
CIBINQO (ORAL)		0.0%	NR	NP			
ACTEMRA PEN (SUBCUTANEOUS)		0.8%	NP	NP			
OLUMIANT (ORAL)		0.1%	NP	NP			
TALTZ AUTOINJECTOR (SUBCUTANE.)		2.5%	NP	NP			
SILIQ (SUBCUTANE.)		0.0%	NP	NP			
COSENTYX PEN INJECTER (SUBCUTANE.)		4.8%	NP	NP			
RINVOQ ER (ORAL)		2.0%	NP	NP			
COSENTYX SYRINGE (SUBCUTANE.)		0.3%	NP	NP			
CIMZIA KIT (INJECTION)		0.0%	NP	NP			
SKYRIZI VIAL (INTRAVEN.)		0.0%	NR	NP			
TREMIFYA SYRINGE (SUBCUTANE.)		0.2%	NP	NP			
TREMIFYA AUTOINJECTOR (SUBCUTANE.)		0.8%	NP	NP			
ENSPRYNG (SUBCUTANEOUS)		0.0%	NP	NP			
SKYRIZI SYRINGE (SUBCUTANEOUS)		0.3%	NP	NP			
SKYRIZI ON-BODY (SUBCUTANEOUS)		0.0%	NR	NP			
SKYRIZI PEN (SUBCUTANEOUS)		1.3%	NP	NP			
STELARA SYRINGE (INJECTION)		5.6%	NP	NP			
STELARA VIAL (INJECTION)		0.1%	NP	NP			

Wisconsin Medicaid GLUCOCORTICOIDS, INHALED		Recommendations				
Brand Name	Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
ADVAIR DISKUS (INHALATION)	27.5%	P	P			
SYMBICORT (INHALATION)	28.4%	P	P			
ADVAIR HFA (INHALATION)	5.1%	P	P			
DULERA (INHALATION)	4.9%	P	P			
AIRDUO RESPICLICK (INHALATION)	0.0%	NP	NP			
BREO ELLIPTA (INHALATION)	1.2%	NP	NP			
FLUTICASONE/SALMETEROL (AIRDUO) (AG) (INHALATION)	0.0%	NP	NP			
FLUTICASONE/SALMETEROL (ADVAIR) (INHALATION)	0.0%	NP	NP			
AIRDUO DIGIHALER (INHALATION)	0.0%	NP	NP			
TRELEGY ELLIPTA (INHALATION)	2.6%	NP	NP			
BUDESONIDE/FORMOTEROL (AG) (INHALATION)	0.0%	NP	NP			
BREZTRI AEROSPHERE (INHALATION)	0.4%	NP	NP			
FLUTICASONE/SALMETEROL (ADVAIR) (AG) (INHALATION)	0.0%	NP	NP			
FLUTICASONE/VILANTEROL (AG) (INHALATION)	0.0%	NR	NP			
FLOVENT HFA (INHALATION)	23.4%	P	P			
PULMICORT FLEXHALER (INHALATION)	1.6%	P	P			
FLOVENT DISKUS (INHALATION)	0.5%	P	P			
ASMANEX (INHALATION)	0.7%	P	P			
ARNUITY ELLIPTA (INHALATION)	0.1%	NP	NP			
QVAR REDIHALER (INHALATION)	0.2%	NP	NP			
ASMANEX HFA (INHALATION)	0.0%	NP	NP			
BUDESONIDE 0.25, 0.5 MG RESPULES (INHALATION)	2.9%	P	P			
FLUTICASONE HFA (AG) (INHALATION)	0.0%	NR	NP			
ARMONAIR DIGIHALER (INHALATION)	0.0%	NP	NP			
ALVESCO (INHALATION)	0.1%	NP	NP			
BUDESONIDE 1 MG RESPULES (INHALATION)	0.4%	P	P			

Wisconsin Medicaid GLUCOCORTICOIDS, ORAL		Recommendations				
Brand Name	Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
RAYOS TABLET DR (ORAL)	0.0%	NP	NP			
PREDNISONE TABLET (ORAL)	65.8%	P	P			
PREDNISOLONE SOLUTION (ORAL)	3.5%	P	P			
METHYLPREDNISOLONE TAB DS PK (ORAL)	13.9%	P	P			
DEXAMETHASONE TABLET (ORAL)	6.2%	P	P			
PREDNISOLONE SODIUM PHOSPHATE (ORAL)	5.3%	P	P			
DEXAMETHASONE SOLUTION (ORAL)	0.2%	P	P			
METHYLPREDNISOLONE 4 MG TABLET (ORAL)	0.3%	P	P			
MEDROL TABLET (ORAL)	0.0%	NP	NP			
DEXAMETHASONE ELIXIR (ORAL)	0.1%	P	P			
PREDNISONE TAB DS PK (ORAL)	0.0%	P	P			
HYDROCORTISONE (ORAL)	2.3%	P	P			
DEXAMETHASONE INTENSOL (ORAL)	0.4%	P	P			
METHYLPREDNISOLONE 16 MG TABLET (ORAL)	0.0%	P	P			
METHYLPREDNISOLONE 32 MG TABLET (ORAL)	0.1%	P	P			
METHYLPREDNISOLONE 8 MG TABLET (ORAL)	0.1%	P	P			
PREDNISONE SOLUTION (ORAL)	0.2%	P	P			
BUDESONIDE EC (ORAL)	1.3%	P	P			
HEMADY (ORAL)	0.0%	NP	NP			
PREDNISOLONE SODIUM PHOSPHATE SOLUTION (MILLIPRED) (ORAL)	0.0%	NP	NP			
PREDNISONE INTENSOL (ORAL)	0.0%	P	P			
TAPERDEX (ORAL)	0.0%	NP	NP			
DEXAMETHASONE TAB DS PK (ORAL)	0.0%	NP	NP			
PREDNISOLONE SODIUM PHOSPHATE SOLUTION (VERIPRED) (ORAL)	0.0%	NP	NP			
PREDNISOLONE SODIUM PHOSPHATE ODT (AG) (ORAL)	0.1%	P	P			
PREDNISOLONE SODIUM PHOSPHATE ODT (ORAL)	0.0%	P	P			
ORTIKOS CAPSULE ER (ORAL)	0.0%	NP	NP			
MILLIPRED DP TAB DS PK (ORAL)	0.0%	NP	NP			
MILLIPRED TABLET (ORAL)	0.0%	NP	NP			
ALKINDI SPRINKLE (ORAL)	0.0%	NP	NP			
EMFLAZA TABLET (ORAL)	0.1%	NP	NP			
EMFLAZA SUSPENSION (ORAL)	0.0%	NP	NP			
TARPEYO (ORAL)	0.0%	NR	NP			

Wisconsin Medicaid IDIOPATHIC PULMONARY FIBROSIS		Recommendations				
Brand Name	Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
PIRFENIDONE (ORAL)	0.0%	NR	P			
OFEV (ORAL)	86.8%	NR	P			
ESBRIET (ORAL)	13.2%	NR	NP			

Wisconsin Medicaid IMMUNOMODULATORS, ASTHMA		Recommendations				
Brand Name	Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
XOLAIR SYRINGE (SUB-Q)	64.2%	P	P			
XOLAIR VIAL (SUB-Q)	5.5%	P	P			
NUCALA VIAL (SUBCUTANEOUS)	0.3%	NP	NP			
NUCALA SYRINGE (SUBCUTANEOUS)	0.3%	NP	NP			
TEZSPIRE SYRINGE (SUBCUTANEOUS)	0.0%	NR	NP			
NUCALA AUTO-INJECTOR (SUBCUTANEOUS)	8.0%	NP	NP			
FASENRA PEN (SUBCUTANEOUS)	19.9%	P	P			
FASENRA SYRINGE (SUBCUTANEOUS)	1.8%	P	P			

Wisconsin Medicaid IMMUNOMODULATORS, ATOPIC DERMATITIS		Recommendations				
Brand Name	Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
ELIDEL (TOPICAL)	34.0%	P	P			
PROTOPIC (TOPICAL)	8.9%	P	P			
PIMECROLIMUS (TOPICAL)	0.0%	NP	NP			
TACROLIMUS (AG) (TOPICAL)	1.1%	NP	NP			
TACROLIMUS (TOPICAL)	7.0%	NP	NP			
PIMECROLIMUS (AG) (TOPICAL)	0.0%	NP	NP			
EUCRISA (TOPICAL)	0.0%	NP	Alternate			
EUCRISA (TOPICAL)	0.7%	NP	NP			
OPZELURA (TOPICAL)	0.6%	NR	NP			
ADBRY (SUBCUTANEOUS)	0.0%	NR	Alternate			
ADBRY (SUBCUTANEOUS)	0.0%	NR	NP			
DUPIXENT PEN (SUBCUTANEOUS)	0.0%	NP	Alternate			
DUPIXENT PEN (SUBCUTANEOUS)	26.8%	NP	NP			
DUPIXENT SYRINGE (SUBCUTANEOUS)	0.0%	NP	Alternate			
DUPIXENT SYRINGE (SUBCUTANEOUS)	20.8%	NP	NP			

Wisconsin Medicaid INTRANASAL RHINITIS AGENTS		Recommendations				
Brand Name	Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
OLOPATADINE (AG) (NASAL)	0.0%	NP	NP			
AZELASTINE (ASTELIN) (NASAL)	5.2%	P	P			
OLOPATADINE (NASAL)	0.1%	NP	NP			
AZELASTINE (ASTEPRO) (NASAL)	0.0%	NP	NP			
AZELASTINE (ASTEPRO) (AG) (NASAL)	0.0%	NP	NP			
IPRATROPIUM (NASAL)	2.7%	P	P			
FLUTICASONE (NASAL)	90.8%	P	P			
DYMISTA (NASAL)	0.0%	NP	NP			
QNASL 80 (NASAL)	0.1%	NP	NP			
ZETONNA (NASAL)	0.0%	NP	NP			
OMNARIS (NASAL)	0.0%	NP	NP			
BECONASE AQ (NASAL)	0.5%	P	P			
MOMETASON (NASAL)	0.5%	NP	NP			
FLUNISOLIDE (NASAL)	0.0%	NP	NP			
QNASL 40 (NASAL)	0.0%	NP	NP			
AZELASTINE/FLUTICASONE (AG) (NASAL)	0.0%	NP	NP			
AZELASTINE/FLUTICASONE (NASAL)	0.1%	NP	NP			
XHANCE (NASAL)	0.0%	NP	NP			
RYALTRIS (NASAL)	0.0%	NA	NP			

Wisconsin Medicaid LEUKOTRIENE MODIFIERS		Recommendations				
Brand Name	Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
MONTELUKAST TABLET (ORAL)	72.7%	P	P			
MONTELUKAST CHEWABLE TABLET (ORAL)	26.8%	P	P			
MONTELUKAST GRANULES (ORAL)	0.1%	NP	NP			
ZAFIRLUKAST (ORAL)	0.1%	NP	NP			
ZAFIRLUKAST TABLET (AG) (ORAL)	0.0%	NR	NP			
ZYFLO (ORAL)	0.0%	NP	NP			
ZILEUTON ER (ORAL)	0.2%	NP	NP			

Wisconsin Medicaid		Recommendations					
NSAIDS		Curr.	Curr.	PDL	COMMITTEE	STATE	SECRETARY
Brand Name	MS	PDL Status	Rec	RECOMMENDATIONS	MODIFICATIONS	MODIFICATIONS	
PENNSAID PUMP (TOPICAL)	0.0%	NP	NP				
DUEXIS (ORAL)	0.0%	NP	NP				
ARTHROTEC (ORAL)	0.0%	NP	NP				
VIMOVO (ORAL)	0.0%	NP	NP				
MELOXICAM TABLET (ORAL)	15.2%	P	P				
IBUPROFEN TABLET OTC (ORAL)	1.9%	P	P				
NAPROXEN SODIUM OTC (ORAL)	0.4%	P	P				
IBUPROFEN TABLET (ORAL)	31.1%	P	P				
NAPROXEN TABLET (ORAL)	11.5%	P	P				
CELECOXIB (AG) (ORAL)	0.1%	P	P				
IBUPROFEN CAPSULE OTC (ORAL)	0.0%	P	P				
INDOMETHACIN CAPSULE (ORAL)	1.3%	P	P				
IBUPROFEN SUSPENSION OTC (ORAL)	2.7%	P	P				
IBUPROFEN SUSPENSION (ORAL)	7.0%	P	P				
DICLOFENAC SODIUM (ORAL)	8.0%	P	P				
CELECOXIB (ORAL)	4.9%	P	P				
IBUPROFEN TAB CHEW OTC (ORAL)	0.0%	P	P				
INDOMETHACIN CAPSULE ER (ORAL)	0.0%	NP	NP				
DICLOFENAC SODIUM GEL OTC (TOPICAL)	0.2%	P	P				
NAPROXEN SODIUM (ORAL)	0.0%	NP	NP				
SULINDAC (ORAL)	0.1%	P	P				
KETOROLAC (ORAL)	2.7%	P	P				
DICLOFENAC POTASSIUM (ORAL)	0.5%	P	P				
NABUMETONE (ORAL)	1.0%	P	P				
IBUPROFEN DROPS SUSPENSION OTC (ORAL)	0.0%	P	P				
PIROXICAM (ORAL)	0.0%	NP	NP				
DICLOFENAC GEL (TOPICAL)	10.9%	P	P				
DICLOFENAC SOLUTION (TOPICAL)	0.0%	NP	NP				
FLURBIPROFEN (ORAL)	0.0%	P	P				
ETODOLAC (ORAL)	0.1%	NP	NP				
MEFENAMIC ACID (ORAL)	0.0%	NP	NP				
DICLOFENAC SR (ORAL)	0.1%	P	P				
DIFLUNISAL (ORAL)	0.0%	NP	NP				
ZIPSOR (ORAL)	0.0%	NP	NP				
NAPRELAN (ORAL)	0.0%	NP	NP				
NAPROXEN EC (ORAL)	0.1%	P	P				
OXAPROZIN (ORAL)	0.0%	NP	NP				
DICLOFENAC SODIUM/MISOPROSTOL (ORAL)	0.0%	NP	NP				
ZORVOLEX (ORAL)	0.0%	NP	NP				
IBUPROFEN/FAMOTIDINE TABLET (AG) (ORAL)	0.0%	NR	NP				
ETODOLAC TAB SR (ORAL)	0.0%	NP	NP				
TOLMETIN SODIUM TABLET (ORAL)	0.0%	NP	NP				
FLECTOR (TOPICAL)	0.0%	NP	NP				
NAPROXEN EC (AG) (ORAL)	0.0%	NP	NP				
SPRIX (NASAL)	0.0%	NP	NP				
INDOCIN (RECTAL)	0.0%	NP	NP				
IBUPROFEN/FAMOTIDINE (ORAL)	0.0%	NP	NP				
NAPROXEN SUSPENSION (ORAL)	0.0%	NP	NP				
FENOPROFEN (ORAL)	0.0%	NP	NP				
DICLOFENAC PATCH (AG) (TRANSDERMAL)	0.0%	NP	NP				
NAPROXEN CR (AG) (ORAL)	0.0%	NP	NP				
NALFON (ORAL)	0.0%	NP	NP				
KETOPROFEN (ORAL)	0.0%	NP	NP				
NAPROXEN SUSPENSION (AG) (ORAL)	0.0%	NP	NP				
NAPROXEN/ESOMEPRAZOLE (AG) (ORAL)	0.0%	NP	NP				
MECLOFENAMATE (ORAL)	0.0%	NP	NP				
FENOPROFEN (AG) (ORAL)	0.0%	NP	NP				
KETOROLAC (SPRIX) (AG) (NASAL)	0.0%	NP	NP				
VIVLODEX (ORAL)	0.0%	NP	NP				
NAPROXEN CR (ORAL)	0.0%	NP	NP				
KETOPROFEN ER (ORAL)	0.0%	NP	NP				
LICART PATCH (TRANSDERMAL)	0.0%	NP	NP				
DICLOFENAC POTASSIUM CAPSULE (AG) (ORAL)	0.0%	NR	NP				
NAPROXEN/ESOMEPRAZOLE (ORAL)	0.0%	NP	NP				
MELOXICAM CAPSULE (ORAL)	0.0%	NP	NP				
DICLOFENAC POTASSIUM CAPSULE (ORAL)	0.0%	NR	NP				
RELAFEN DS (ORAL)	0.0%	NP	NP				
DICLOFENAC (PENNSAID PUMP) (TOPICAL)	0.0%	NR	NP				

Wisconsin Medicaid		Recommendations					
OPHTHALMICS FOR ALLERGIC CONJUNCTIVITIS		Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
Brand Name							
BEPREVE (OPHTHALMIC)	0.0%	NP	NP				
ALREX (OPHTHALMIC)	1.0%	P	P				
AZELASTINE (OPHTHALMIC)	0.5%	NP	NP				
OLOPATADINE OTC (PATADAY ONCE DAILY) (OPHTHALMIC)	0.0%	NR	P				
OLOPATADINE OTC (PATADAY TWICE A DAY) (OPHTHALMIC)	0.0%	NR	P				
KETOTIFEN OTC (OPHTHALMIC)	25.1%	P	P				
ZADITOR OTC (OPHTHALMIC)	0.5%	P	P				
OLOPATADINE (PATANOL) (OPHTHALMIC)	69.2%	P	NP				
OLOPATADINE DROPS (PATADAY) (OPHTHALMIC)	0.2%	NP	NP				
EPINASTINE (OPHTHALMIC)	0.0%	NP	NP				
ZERVIATE (OPHTHALMIC)	0.0%	NP	NP				
BEPOTASTINE (AG) (OPHTHALMIC)	0.0%	NP	NP				
BEPOTASTINE (OPHTHALMIC)	0.0%	NP	NP				
CROMOLYN SODIUM (OPHTHALMIC)	3.5%	P	P				
ALOWIDE (OPHTHALMIC)	0.0%	NP	NP				
ALOCRIL (OPHTHALMIC)	0.0%	NP	NP				

Wisconsin Medicaid		Recommendations					
OPHTHALMICS, ANTI-INFLAMMATORIES		Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
Brand Name							
ACUVAIL (OPHTHALMIC)	0.0%	NP	NP				
DICLOFENAC (OPHTHALMIC)	1.4%	P	P				
FLURBIPROFEN (OPHTHALMIC)	0.1%	P	P				
KETOROLAC (OPHTHALMIC)	17.4%	P	P				
PROLENSA (OPHTHALMIC)	0.1%	NP	NP				
NEVANAC (OPHTHALMIC)	0.0%	NP	P				
KETOROLAC LS (OPHTHALMIC)	2.5%	P	P				
BROMFENAC (OPHTHALMIC)	0.0%	NP	NP				
BROMSITE (OPHTHALMIC)	0.0%	NP	NP				
ILEVRO (OPHTHALMIC)	0.9%	P	P				
LOTEMAX OINTMENT (OPHTHALMIC)	0.0%	NP	NP				
LOTEMAX DROPS (OPHTHALMIC)	3.2%	P	P				
LOTEMAX GEL (OPHTHALMIC)	0.0%	NP	NP				
FML FORTE (OPHTHALMIC)	0.2%	P	P				
PRED MILD (OPHTHALMIC)	0.2%	P	P				
FLAREX (OPHTHALMIC)	0.1%	P	P				
FML (OPHTHALMIC)	0.0%	NP	NP				
MAXIDEX (OPHTHALMIC)	0.5%	P	P				
FLUOROMETHOLONE (OPHTHALMIC)	8.7%	P	P				
FML S.O.P. (OPHTHALMIC)	0.0%	NP	NP				
PREDNISOLONE ACETATE (OPHTHALMIC)	57.4%	P	P				
DEXAMETHASONE (OPHTHALMIC)	3.1%	P	P				
PREDNISOLONE SOD PHOSPHATE (OPHTHALMIC)	0.0%	NP	NP				
INVELTYS (OPHTHALMIC)	0.0%	NP	NP				
DUREZOL (OPHTHALMIC)	4.1%	P	P				
DIFLUPREDNATE (AG) (OPHTHALMIC)	0.0%	NR	NP				
LOTEPREDNOL DROPS (AG) (OPHTHALMIC)	0.0%	NP	NP				
DIFLUPREDNATE (OPHTHALMIC)	0.0%	NR	NP				
LOTEPREDNOL GEL (AG) (OPHTHALMIC)	0.1%	NP	NP				
LOTEPREDNOL GEL (OPHTHALMIC)	0.0%	NP	NP				
LOTEPREDNOL DROPS (OPHTHALMIC)	0.0%	NP	NP				

Wisconsin Medicaid		Recommendations					
OPHTHALMICS, ANTI-INFLAMMATORY/IMMUNOMODULATOR		Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
Brand Name							
RESTASIS (OPHTHALMIC)	92.0%	P	P				
RESTASIS MULTIDOSE (OPHTHALMIC)	0.0%	NP	NP				
XIIDRA (OPHTHALMIC)	7.5%	NP	P				
EYSUVIS (OPHTHALMIC)	0.1%	NP	NP				
CYCLOSPORINE (AG) (OPHTHALMIC)	0.0%	NR	NP				
TYRVAYA SPRAY (NASAL)	0.1%	NR	NP				
CYCLOSPORINE (OPHTHALMIC)	0.0%	NR	NP				
CEQUA (OPHTHALMIC)	0.1%	NP	NP				

Wisconsin Medicaid		Recommendations					
OPHTHALMICS, GLAUCOMA AGENTS		Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
Brand Name							
ALPHAGAN P 0.1% (OPHTHALMIC)	0.0%	NP	NP				
ALPHAGAN P 0.15% (OPHTHALMIC)	0.9%	P	P				
BRIMONIDINE 0.2% (OPHTHALMIC)	8.6%	P	P				
APRACLONIDINE (OPHTHALMIC)	0.0%	NP	NP				
IOPIDINE (OPHTHALMIC)	0.0%	NP	NP				
BRIMONIDINE P 0.15% (OPHTHALMIC)	0.1%	NP	NP				
TIMOPTIC OCUDOSE (OPHTHALMIC)	0.1%	NP	NP				
COMBIGAN (OPHTHALMIC)	4.7%	P	P				
BETOPTIC S (OPHTHALMIC)	0.2%	P	P				
ISTALOL (OPHTHALMIC)	0.0%	NP	NP				
CARTEOLOL (OPHTHALMIC)	0.1%	P	P				
LEVOBUNOLOL (OPHTHALMIC)	0.2%	P	P				
TIMOLOL (OPHTHALMIC)	14.0%	P	P				
TIMOLOL (TIMOPTIC OCUDOSE) (AG) (OPHTHALMIC)	0.0%	NP	NP				
BETAXOLOL (OPHTHALMIC)	0.0%	NP	NP				
TIMOLOL (ISTALOL) (AG) (OPHTHALMIC)	0.0%	NP	NP				
TIMOLOL (ISTALOL) (OPHTHALMIC)	0.0%	NP	NP				
BRIMONIDINE TARTRATE/TIMOLOL DROPS (AG) (OPHTHALMIC)	0.0%	NR	NP				
TIMOLOL (TIMOPTIC OCUDOSE) (OPHTHALMIC)	0.1%	NP	NP				
BRIMONIDINE TARTRATE/TIMOLOL DROPS (OPHTHALMIC)	0.0%	NR	NP				
AZOPT (OPHTHALMIC)	1.5%	P	P				
SIMBRINZA (OPHTHALMIC)	1.2%	P	P				
DORZOLAMIDE/TIMOLOL/PF DROPS (AG) (OPHTHALMIC)	0.1%	P	P				
DORZOLAMIDE / TIMOLOL (OPHTHALMIC)	9.0%	P	P				
DORZOLAMIDE (OPHTHALMIC)	4.5%	P	P				
DORZOLAMIDE/TIMOLOL/PF DROPS (OPHTHALMIC)	0.3%	P	P				
BRINZOLAMIDE (AG) (OPHTHALMIC)	0.0%	NP	NP				
BRINZOLAMIDE (OPHTHALMIC)	0.0%	NP	NP				
COSOPT PF (OPHTHALMIC)	0.0%	NP	NP				
PILOCARPINE (OPHTHALMIC)	0.5%	P	P				
LUMIGAN 7.5ML (OPHTHALMIC)	0.0%	NP	P				
LUMIGAN 5ML (OPHTHALMIC)	0.1%	NP	P				
TRAVATAN Z 5 ML (OPHTHALMIC)	1.1%	P	P				
LUMIGAN 2.5ML (OPHTHALMIC)	0.4%	NP	P				
TRAVATAN Z 2.5 ML (OPHTHALMIC)	6.3%	P	P				
XALATAN 2.5 ML (OPHTHALMIC)	0.0%	P	P				
LATANOPROST 2.5 ML (OPHTHALMIC)	43.0%	P	NP				
BIMATOPROST 2.5ML (OPHTHALMIC)	0.0%	NP	NP				
XELPROS (OPHTHALMIC)	0.0%	NP	NP				
TRAVOPROST 2.5 ML (AG) (OPHTHALMIC)	0.0%	NP	NP				
TRAVOPROST 2.5 ML (OPHTHALMIC)	0.0%	NP	NP				
VYZULTA (OPHTHALMIC)	0.3%	NP	NP				
TRAVOPROST 5 ML (AG) (OPHTHALMIC)	0.0%	NP	NP				
ZIOPTAN (OPHTHALMIC)	0.3%	NP	NP				
TRAVOPROST 5 ML (OPHTHALMIC)	0.0%	NP	NP				
BIMATOPROST 5ML (OPHTHALMIC)	0.0%	NP	NP				
BIMATOPROST 7.5ML (OPHTHALMIC)	0.0%	NP	NP				
RHOPRESSA (OPHTHALMIC)	1.6%	P	P				
ROCKLATAN (OPHTHALMIC)	0.6%	P	P				

Wisconsin Medicaid		Recommendations					
SEDATIVE HYPNOTICS		Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
Brand Name							
ESTAZOLAM (ORAL)	0.1%	NP	NP				
ZOLPIDEM (ORAL)	62.8%	P	P				
TEMAZEPAM (ORAL)	7.2%	P	P				
TEMAZEPAM (AG) (ORAL)	1.5%	P	P				
ESZOPICLONE (ORAL)	10.7%	P	P				
ZOLPIDEM ER (ORAL)	4.4%	NP	NP				
ZALEPLON (ORAL)	3.3%	P	P				
FLURAZEPAM (ORAL)	0.1%	NP	NP				
TRIAZOLAM (ORAL)	1.0%	P	P				
ROZEREM (ORAL)	4.8%	P	P				
RAMELTEON (ORAL)	0.2%	NP	NP				
TEMAZEPAM 7.5 MG (ORAL)	0.0%	NP	NP				
BELSOMRA (ORAL)	2.2%	NP	NP				
TEMAZEPAM 22.5 MG (ORAL)	0.0%	NP	NP				
EDLUAR (SUBLINGUAL)	0.0%	NP	NP				
DAYVIGO (ORAL)	1.0%	NP	NP				
DOXEPIN (AG) (ORAL)	0.2%	NP	NP				
QUVIVIQ (ORAL)	0.0%	NR	NP				
DOXEPIN (ORAL)	0.4%	NP	NP				
ZOLPIDEM (SUBLINGUAL)	0.0%	NP	NP				
SILENOR (ORAL)	0.0%	NP	NP				
IGALMI (SUBLINGUAL)	0.0%	NR	NP				

Wisconsin Medicaid		Recommendations					
STIMULANTS AND RELATED AGENTS		Curr. MS	Curr. PDL Status	PDL Rec	COMMITTEE RECOMMENDATIONS	STATE MODIFICATIONS	SECRETARY MODIFICATIONS
Brand Name							
AMPHETAMINE SALT COMBO (ORAL)	9.5%	NP	NP				
DEXMETHYLPHENIDATE ER (AG) (ORAL)	0.0%	NP	NP				
CONCERTA (ORAL)	10.1%	P	P				
ADDERALL XR (ORAL)	9.2%	NP	NP				
DAYTRANA (TRANSDERMAL)	0.2%	P	P				
DEXEDRINE SPANSULE (ORAL)	0.0%	NP	NP				
METHYLPHENIDATE (ORAL)	6.5%	P	P				
DEXMETHYLPHENIDATE (ORAL)	1.7%	P	P				
GUANFACINE ER (ORAL)	8.5%	P	P				
METHYLPHENIDATE ER (METADATE ER) (ORAL)	0.8%	P	P				
METHYLPHENIDATE ER (CONCERTA) (AG) (ORAL)	0.0%	NP	NP				
AMPHETAMINE SALT COMBO ER (ORAL)	0.0%	NP	NP				
MODAFINIL (ORAL)	0.7%	P	P				
ARMODAFINIL (ORAL)	0.1%	P	P				
ARMODAFINIL (AG) (ORAL)	0.1%	P	P				
METHYLPHENIDATE ER (CONCERTA) (ORAL)	0.0%	NP	NP				
DEXTROAMPHETAMINE TABLET (ORAL)	0.3%	NP	NP				
AMPHETAMINE SALT COMBO ER (AG) (ORAL)	0.0%	NP	NP				
DEXMETHYLPHENIDATE (AG) (ORAL)	0.0%	P	P				
VYVANSE CAPSULE (ORAL)	34.0%	P	P				
CLONIDINE ER (ORAL)	1.2%	P	P				
ATOMOXETINE (AG) (ORAL)	0.0%	P	P				
ATOMOXETINE (ORAL)	4.2%	P	P				
RITALIN LA (ORAL)	0.0%	NP	NP				
FOCALIN (ORAL)	0.1%	P	P				
AMPHETAMINE SULFATE (ORAL)	0.0%	NP	NP				
METHYLPHENIDATE SOLUTION (ORAL)	0.2%	P	P				
METHYLPHENIDATE CD (AG) (ORAL)	0.7%	P	P				
METHYLPHENIDATE CD (ORAL)	1.6%	P	P				
FOCALIN XR (ORAL)	5.1%	P	P				
DEXMETHYLPHENIDATE ER (ORAL)	0.0%	NP	NP				
METHYLIN SOLUTION (ORAL)	0.0%	P	P				
METHYLPHENIDATE ER (RITALIN LA) (ORAL)	1.0%	P	P				
APTENSIO XR (ORAL)	0.1%	P	P				
QUILLIVANT XR (ORAL)	0.5%	P	P				
DEXTROAMPHETAMINE CAPSULE ER (ORAL)	0.3%	NP	NP				
METHYLPHENIDATE CHEWABLE TABLETS (ORAL)	0.3%	P	P				
QELBREE (ORAL)	0.2%	NP	NP				
QUILLICHEW ER (ORAL)	0.5%	P	P				
ADHANSIA XR (ORAL)	0.0%	NP	NP				
AZSTARYS (ORAL)	0.0%	NP	NP				
METHYLPHENIDATE ER (APTENSIO XR) (AG) (ORAL)	0.0%	NP	NP				
VYVANSE CHEWABLE TABLET (ORAL)	1.7%	P	P				
METHYLPHENIDATE ER (APTENSIO XR) (ORAL)	0.0%	NP	NP				
MYDAYIS ER (ORAL)	0.2%	NP	NP				
ADZENYS XR ODT (ORAL)	0.0%	NP	NP				
JORNAY PM (ORAL)	0.4%	NP	NP				
EVEKEO ODT (ORAL)	0.0%	NP	NP				
DYANAVEL XR TABLET (ORAL)	0.0%	NR	NP				
COTEMPLA XR ODT (ORAL)	0.0%	NP	NP				
ZENZEDI (ORAL)	0.0%	NP	NP				
DYANAVEL XR (ORAL)	0.0%	NP	NP				
DEXTROAMPHETAMINE SOLUTION (ORAL)	0.0%	NP	NP				
METHYLPHENIDATE ER 72 MG TABLETS (ORAL)	0.0%	NP	NP				
METHYLPHENIDATE PATCH TD24 (TRANSDERMAL)	0.0%	NR	NP				
SUNOSI (ORAL)	0.0%	NP	NP				
EVEKEO (ORAL)	0.0%	NP	NP				
METHAMPHETAMINE (ORAL)	0.0%	NP	NP				