

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

Preliminary (Effective 07/01/2019)

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/Subsystem/Publications/ForwardHealthCommunications.aspx?panel=Forms>

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

Preliminary (Effective 07/01/2019)

Acne Agents, Topical			
benzoyl peroxide OTC 2.5%	SCN	P	
benzoyl peroxide OTC 5%	SCN	P	
benzoyl peroxide OTC 10%	SCN	P	
clindamycin gel (Gen-Cleocin T)		P	
clindamycin solution		P	
erythromycin gel		P	
erythromycin solution		P	
sodium sulfacetamide-sulfur cleanser/wash/susp		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
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 (Gen-Voltaren)		NP	
diclofenac 1.3% patch (Gen-Flector)		NP	
diclofenac 1.5% soln (Gen-Pennsaid)		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	
Allzital	SCN	NP	
Bupap	SCN	NP	
Esgic		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 (Gen-Ultram ER)		P	
Butrans transdermal		P	
Embeda ER		P	
Hysingla ER		P	
buprenorphine transdermal		NP	
fentanyl transdermal 37.5mcg		NP	

Analgesics, Opioids Long-Acting (cont)			
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 (Gen-Conzip)	SCN	NP	
tramadol ER tab (Gen-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	
oxycodone tablets		P	
oxycodone/apap 325mg		P	
tramadol		P	
tramadol/apap 325mg		P	
benzhydrocodone/apap tab		NP	
butorphanol spray		NP	
codeine		NP	
dihydrocodeine/apap/caffeine		NP	
dihydrocodeine/asa/caffeine		NP	
levorphanol		NP	
hydrocodone/apap*		NP	

Analgesics, Opioids Short-Acting (cont)			
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
Capital w-codeine			NP
Dilaudid Liquid			NP
Ibudone			NP
Nalocet	SCN		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 10/300			NP
Xodol			NP
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			
testosterone gel/pump (Gen-Vogelxo)			P
Androgel gel/pump			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

Preliminary (Effective 07/01/2019)

Androgenic Agents (cont)		
testosterone gel/pump (Gen-Androge)		NP
testosterone pump (Gen-Axiron and Gen-Fortesta)		NP
Androderm		NP
Axiron		NP
Fortesta		NP
Testim	SCN	NP
Vogelxo		NP
Androgenic Agents, Injectable		
testosterone cypionate*		P
testosterone enanthate*		P
Depo-testosterone*		P
Xyosted*		NP
* Policy for obtaining provider-administered drugs applies. Refer to topic #5697.		
Angiotensin Modulators, ACE Inhibitors		
benazepril		P
captopril		P
enalapril		P
enalapril/HCTZ		P
fosinopril		P
lisinopril		P
lisinopril/HCTZ		P
ramipril		P
benazepril/HCTZ		NP
captopril/HCTZ	SCN	NP
fosinopril/HCTZ		NP
moexipril		NP
moexipril/HCTZ		NP
perindopril		NP
quinapril		NP
quinapril/HCTZ		NP
trandolapril		NP
Epaned *	SCN	NP
Qbrelis solution	SCN	NP
Prestalia	SCN	NP
*Prior Authorization is not required for members 12 years of age and younger.		

Angiotensin Modulators, ARBs and DRIs		
losartan		P
losartan/HCTZ		P
valsartan		P
valsartan/HCTZ		P
Entresto		P
aliskiren tabs (Gen-Tekturna)	SCN	NP
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
Micardis		NP
Micardis/HCTZ		NP
Tekturna		NP
Tekturna/HCTZ		NP
Angiotensin Modulators, Combination		
amlodipine/benazepril		P
amlodipine/olmesartan		P
amlodipine/olmesartan/HCTZ		P
amlodipine/valsartan		P
amlodipine/valsartan/HCTZ		P
telmisartan/amlodipine		NP
trandolapril/verapamil		NP
Amturnide		NP
Byvalson		NP
Tarka		NP
Tekamlo		NP
Twynsta		NP
Antibiotics, Beta-Lactam		
amoxicillin		P
amoxicillin clavulanate		P

Antibiotics, Beta-Lactam (cont)		
amoxicillin clavulanate 250mg susp		P
ampicillin		P
cefaclor caps		P
cefadroxil capsule		P
cefadroxil susp		P
cefdinir		P
cephalexin caps		P
cephalexin 750mg	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
cefaclor susp	SCN	NP
cefaclor tab ER		NP
cefadroxil tablet		NP
cefixime capsule	SCN	NP
cefixime suspension		NP
cefepodoxime		NP
cephalexin tabs		NP
Daxbia	SCN	NP
Spectracef		NP
Antibiotics, GI		
metronidazole tablets		P
neomycin		P
tinidazole		P
vancomycin		P
Firvaq	SCN	P
Xifaxan		P
metronidazole capsule		NP
Dificid		NP

Antibiotics, GI (cont)		
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/gran/susp		P
E.E.S. Filmtab/Granules		P
Eryped		P
Ery-Tab DR		P
Erythrocin		P
PCE		P
clarithromycin ER tab		NP
erythromycin filmtab		NP
Antibiotics, Tetracyclines		
doxycycline hyclate capsules		P
doxycycline hyclate 20mg tablets		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 tabs		NP
doxycycline monohydrate susp		NP
doxycycline monohydrate 75mg capsules		NP
doxycycline monohydrate 150mg capsules		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

Preliminary (Effective 07/01/2019)

Antibiotics, Tetracyclines (cont)		
minocycline tablets		NP
minocycline ER		NP
tetracycline		NP
Doryx DR		NP
Minolira ER	SCN	NP
Morgidox capsule	SCN	NP
Nuzyra	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
Nuessa	SCN	P
Vandazole		P
Anticoagulants		
enoxaparin		P
warfarin		P
Eliquis		P

Anticoagulants (cont)		
Eliquis Dose Pack		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
carbamazepine ER tab		P
clobazam susp/tabs		P
clonazepam tablets		P
diazepam rectal		P
divalproex tabs		P
divalproex ER tabs		P
divalproex sprinkles		P
ethosuximide		P
felbamate		P
gabapentin caps/tabs		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
Dilantin 30mg cap		P
Dilantin Infatab		P
Gabitril	SCN	P
Lamictal Starter Kits	SCN	P

Anticonvulsants (cont)		
Lyrica		P
Peganone		P
Roweepra	SCN	P
Roweepra XR	SCN	P
Sabril	SCN	P
Tegretol tab		P
Tegretol suspension		P
carbamazepine suspension		NP
carbamazepine tab		NP
clonazepam ODT		NP
lamotrigine ER		NP
lamotrigine ODT		NP
tiagabine		NP
topiramate ER		NP
vigabatrin		NP
Aptiom	SCN	NP
Banzel		NP
Briviact		NP
Diacomit	SCN	NP
Epidiolex	SCN	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
Oxtellar XR	SCN	NP
Phenytek	SCN	NP
Qudexy		NP
Spritam	SCN	NP
Sympazan	SCN	NP
Trileptal suspension		NP
Trokendi XR	SCN	NP
Vigadrone		NP
Vimpat		NP
Vimpat solution		NP
Antidepressants, Other		
bupropion		P
bupropion SR		P

Antidepressants, Other (cont)		
bupropion XL (Gen-Wellbutrin)		P
desvenlafaxine ER (Gen-Pristiq)		P
duloxetine 20mg DR caps		P
duloxetine 30mg DR caps		P
duloxetine 60mg DR caps		P
mirtazapine		P
phenelzine		P
tranylcypromine sulfate		P
trazodone		P
venlafaxine		P
venlafaxine ER capsules		P
Marplan		P
Nardil		P
bupropion XL (Gen-Forfivo XL)	SCN	NP
desvenlafaxine ER (No Brand)		NP
desvenlafaxine fumarate ER		NP
desvenlafaxine ER (Gen-Khedezla)		NP
duloxetine 40mg 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 90mg caps		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

Preliminary (Effective 07/01/2019)

Antidepressants, SSRI (cont)		
fluoxetine 10mg, 20mg, 60mg tablets		NP
fluvoxamine ER		NP
paroxetine 7.5mg cap (Gen-Brisdelle)		NP
paroxetine CR	SCN	NP
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 suppos.		P
trimethobenzamide caps		P
Emend capsules		P
aprepitant capsules		NP
metoclopramide ODT		NP
Akynzeo		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 suppos.		P
promethazine syrup		P
Diclegis	SCN	P
Transderm-Scop	SCN	P
scopolamine patch		NP
Bonjesta	SCN	NP
Antiemetics, Cannabinoids		
dronabinol		NP

Antiemetics, Cannabinoids (cont)			
Cesamet			NP
Syndros	SCN		NP
Antifungals, Oral			
clotrimazole troche			P
fluconazole			P
griseofulvin suspension			P
griseofulvin ultra-micro tabs			P
itraconazole			P
ketoconazole tablets			P
nystatin			P
terbinafine			P
Sporanox (liquid)			P
flucytosine			NP
griseofulvin microsize tablets			NP
itraconazole solution			NP
voriconazole 50mg			NP
voriconazole 200mg			NP
voriconazole suspension			NP
Ancobon			NP
Cresemba			NP
Grifulvin V Tablets			NP
Noxafil			NP
Onmel	DR	SCN	NP
Oravig			NP
Tolsura			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/gel/shampoo/susp			NP

Antifungals, Topical (cont)			
clotrimazole/betamethasone lotion			NP
econazole nitrate			NP
ketoconazole foam			NP
luliconazole cream			NP
miconazole/zinc/pet oint	SCN		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
Clarinex			NP
Clarinex D			NP
Clarinex Syrup			NP
Semprex-D	SCN		NP
Antihypertensives, Sympatholytics			
clonidine (oral)			P
guanfacine			P
methylidopa			P

Antihypertensives, Sympatholytics (cont)		
Catapres-TTS		P
clonidine trans patch		NP
methylidopa/HCTZ	SCN	NP
Antiparasitics, Topical		
permethrin OTC	SCN	P
permethrin Rx		P
Eurax Cream		P
Natroba		P
Sklice		P
malathion		NP
spinosad		NP
Crotan Lotion	SCN	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
trihexphenidyl		P
entacapone		NP
pramipexole ER		NP
rasagiline		NP
ropinirole ER		NP
tolcapone		NP
Azilect		NP
Comtan		NP
Gocovri ER	SCN	NP
Inbrija	SCN	NP
Neupro patches		NP
Osmolex ER	SCN	NP
Rytary 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

Preliminary (Effective 07/01/2019)

Antiparkinson's Agents (cont)		
Stalevo		NP
Tasmar		NP
Xadago	SCN	NP
Zelapar		NP
Antipsoriatics, Oral		
acitretin		P
methoxsalen		NP
Antipsoriatics, Topical		
calcipotriene cream/oint/solution		P
calcitrene		P
Taclonex susp		P
Vectical		
calcipotriene/betamethasone dipropionate oint	SCN	P
calcitriol oint		NP
tazarotene cream		NP
Duobrii lotion		NP
Enstilar	SCN	NP
Sorilux		NP
Tazorac	SCN	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
pimozide*		P
quetiapine*		P
quetiapine fumarate ER*		P
risperidone*		P
thiothixene*	SCN	P
trifluoperazine*		P
ziprasidone capsules*		P

Antipsychotics (cont)		
Latuda*	SCN	P
clozapine ODT*		NP
molindone tablets*		NP
olanzapine/fluoxetine*		NP
paliperidone tablets*		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
Aristada Initio ER*	SCN	P
Haldol Decanoate*		P
Invega Sustenna*		P
Invega Trinza*		P
Risperdal Consta*		P
Zyprexa Relprevv*		P
Perseris ER*	SCN	NP
*Policy for obtaining provider-administered drugs applies. Refer to topic #5697.		
Antivirals, Influenza		
oseltamivir		P
Relenza	SCN	P
rimantadine		NP
Tamiflu	SCN	NP
Xofluza		NP

Antivirals, Other		
acyclovir		P
valacyclovir		P
famciclovir		NP
Antivirals, Topical		
Zovirax Cream		P
Zovirax Ointment		P
acyclovir cream		NP
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
BPH Agents, Alpha Reductase Inhibitors		
dutasteride		P
finasteride		P
dutasteride/tamsulosin	SCN	NP
BPH Agents, Androgenic		
alfuzosin		P
tamsulosin		P
terazosin		P
doxazosin		NP
silodosin capsule		NP
Cardura XL		NP
Rapaflo		NP
Beta Blockers		
atenolol		P
atenolol/chlorthalidone		P

Beta Blockers (cont)		
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
Hemangeol	SCN	NP
Inderal XL		NP
Innopran XL		NP
Kapsargo sprinkles		NP
Levitol		NP
Lopressor HCT		NP
Sotylize		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		P
darifenacin ER		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

Preliminary (Effective 07/01/2019)

Bladder Relaxant Preparations (cont)		
solifenacin tabs		NP
tolterodine		NP
tolterodine ER		NP
tropium		NP
tropium 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
Boniva	SCN	NP
Forteo		NP
Fosamax Plus D		NP
Tymlos		NP
Bronchodilators, Beta Agonists		
albuterol		P
albuterol ER	SCN	P
albuterol neb (2.5mg/0.5ml)		P
albuterol neb (2.5mg/3ml)		P
albuterol neb (100mg/20ml)		P
albuterol neb low-dose (0.63mg/3ml)		P
albuterol neb low-dose (1.25mg/3ml)		P
terbutaline tablets		P
Proair HFA		P
Proventil HFA		P
Serevent	SCN	P
albuterol HFA		NP
levalbuterol nebulizer		NP

Bronchodilators, Beta Agonists (cont)		
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
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 360mg 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
Stiolto Respimat		P
Anoro Ellipta	SCN	NP

COPD Agents (cont)		
Daliresp		NP
Incruse Ellipta	SCN	NP
Lonhala Magnair Kits	SCN	NP
Seebri Neohaler		NP
Spiriva Respimat		NP
Tudorza Pressair		NP
Utibron Neohaler		NP
Yupelri	SCN	NP
Cough and Cold – Narcotic Liquids		
guaifenesin/codeine		P
phenylephrine/promethazine/codeine		P
promethazine/codeine		P
<p>NOTE: Cough and Cold-Narcotic Liquids listed are covered legend and OTC by active ingredient. Cough and Cold-Narcotic Liquids not listed are either non-preferred or non-covered.</p> <p>Note: Coverage information for non-narcotic OTC cough and cold products can be found in the Over-the-Counter Drugs data tables on the Pharmacy page of the Providers area of the Portal.</p>		
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
Siliq		NP
Simponi		NP
Skyrizi		NP
Stelara		NP
Taltz		NP
Tremfya		NP
Xeljanz		NP
Xeljanz XR		NP

Epinephrine, Self Injected		
epinephrine auto inject (Gen-EpiPen)		P
epinephrine 0.15 MG (AG EpiPen JR)	SCN	P
epinephrine 0.3 MG (AG EpiPen)	SCN	P
epinephrine 0.15 MG (AG Adrenaclick)**		P
epinephrine 0.3 MG (AG Adrenaclick)**		P
EpiPen JR 0.15 MG**	SCN	P
EpiPen 0.3 MG **	SCN	P
Symjepi		NP
** Products added as preferred temporarily due to shortage		
Erythropoiesis Stimulating Proteins		
Aranesp		P
Procrit		P
Retacrit	SCN	P
Epogen		NP
Mircera	SCN	NP
Fibromyalgia		
duloxetine 20mg DR caps		P
duloxetine 30mg DR caps		P
duloxetine 60mg DR caps		P
Lyrica		P
Savella	SCN	P
duloxetine 40mg 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

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

Preliminary (Effective 07/01/2019)

GI Motility, Chronic – Constipation (cont)		
Linzess	SCN	P
Movantik		P
Motegrity		NP
Relistor tablet		NP
Symproic		NP
Trulance	SCN	NP
GI Motility, Chronic – Diarrhea		
Lotronex	SCN	P
Xifaxan 550mg		P
alosetron		NP
Viberzi	SCN	NP
Glucocorticoids, Inhaled		
budesonide respules		P
Advair Diskus	SCN	P
Advair HFA	SCN	P
Asmanex		P
Dulera		P
Flovent HFA	SCN	P
Pulmicort Flexhaler		P
Symbicort		P
fluticasone/salmeterol (Gen-Advair Diskus)	SCN	NP
fluticasone/salmeterol (Gen-Airduo Respiclick)		NP
Aerospan HFA Inhaler		NP
AirDuo Respiclick		NP
Alvesco Inhaler	SCN	NP
Armonair Respiclick		NP
Arnuity Ellipta	SCN	NP
Asmanex HFA		NP
Breo Ellipta Inhaler	SCN	NP
Flovent Diskus	SCN	NP
Qvar Redihaler		NP
Trelegy Ellipta	SCN	NP
Wixela Inhalation	SCN	NP
Glucocorticoids, Oral		
budesonide EC capsule		P
dexamethasone elixir		P
dexamethasone intensol		P
dexamethasone solution		P

Glucocorticoids, Oral (cont)		
dexamethasone tablet		P
hydrocortisone		P
methylprednisolone Dose PK		P
methylprednisolone tablet		P
prednisolone sod phosphate ODT	SCN	P
prednisolone sod phosphate solution 5mg/5ml		P
prednisolone sod phosphate solution 15mg/5ml		P
prednisolone sod phosphate solution 25mg/5ml		P
prednisone intensol		P
prednisone solution		P
prednisone Dose PK		P
prednisone tablet		P
cortisone		NP
dexamethasone Dose PK		NP
prednisolone sodium phosphate solution 10mg/5ml		NP
prednisolone sod phosphate solution 20mg/5ml		NP
Decadron	SCN	NP
Dexpak		NP
Dxevo tablet	SCN	NP
Emflaza	SCN	NP
Medrol tablet		NP
Millipred Dose Pack	SCN	NP
Millipred solution	SCN	NP
Millipred tablet	SCN	NP
Rayos tablet DR	SCN	NP
TaperDex	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

Gout Agents (cont)		
Colcrys		NP
Mitigare	SCN	NP
Uloric		NP
Growth Hormone		
Genotropin		P
Norditropin	SCN	P
Humatrope		NP
Nutropin AQ		NP
Omnitrope		NP
Saizen		NP
Serostim	SCN	NP
Zomacton	SCN	NP
Zorbtive	SCN	NP
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		P
lamivudine	SCN	P
Baraclude solution		P
Epivir HBV Soln	SCN	P
Hepsera		P
adefovir dipivoxal		NP
Vemlidy		NP
Hepatitis C Agents		
Epclusa		P
Harvoni		P
Mavyret		P
Zepatier		P
ledipasvir/sofosbuvir (Gen-Harvoni)	SCN	NP

Hepatitis C Agents (cont)		
sofosbuvir/velpatasvir (Gen-Epclusa)	SCN	NP
Daklinza		NP
Sovaldi		NP
Technivie		NP
Vosevi		NP
Hepatitis C Agents-Interferon		
Pegasy	SCN	P
Peg-Intron Redipen		P
Hepatitis C Agents-Ribavirin		
ribavirin		P
Moderiba		NP
Rebetol Solution		NP
Ribapak		NP
Ribapshere		NP
H. Pylori		
lansoprazole/amoxicillin/clarithromycin		P
Pylera		P
Omeclamox Pak	SCN	NP
Hypoglycemics, Alpha-Glucosidase Inhibitors		
acarbose		P
Glyset		P
miglitol		NP
Hypoglycemics, DPP-4 Inhibitors		
Glyxambi		P
Janumet		P
Janumet XR		P
Januvia		P
Jentadueto		P
Tradjenta		P
alogliptin		NP
alogliptin/metformin		NP
alogliptin/pioglitazone		NP
Jentadueto XR		NP
Kazano		NP
Kombiglyze XR		NP
Nesina		NP
Onglyza		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

Preliminary (Effective 07/01/2019)

Hypoglycemics, DPP-4 Inhibitors (cont)		
Oseni		NP
Hypoglycemics, GLP 1		
Bydureon Pen		P
Byetta		P
Trulicity		P
Victoza	SCN	P
Adlyxin		NP
Bydureon BCise		NP
Ozempic	SCN	NP
Hypoglycemics, GLP 1-Combinations		
Soliqua		NP
Xultophy	SCN	NP
Hypoglycemics, Insulins		
Humalog Mix		P
Humalog U-100 Cart/ Kwikpen/Vial		P
Humulin 70-30		P
Humulin N U-100 Kwikpen/ Vial		P
Humulin R U-100 Vial		P
Humulin R U-500 Vial		P
Novolog	SCN	P
insulin lispro U-100 Kwikpen / Vial (Gen-Humalog Kwikpen / Vial)	SCN	NP
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		P
Levemir	SCN	P
Basaglar		NP
Toujeo Solostar		NP
Toujeo Max Solostar		NP
Tresiba Flextouch	SCN	NP
Tresiba vial	SCN	NP

Hypoglycemics, Meglitinides		
repaglinide		P
nateglinide		NP
repaglinide/metformin		NP
Hypoglycemics, Other		
metformin		P
metformin ER (Gen-Glucophage ER)		P
Farxiga		P
Invokana		P
Jardiance		P
Welchol		P
colesevelam		NP
metformin ER (Gen-Glumetza ER)		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		P
glipizide		P
glipizide ER		P
glyburide		P
glyburide/metformin		P
chlorpropamide	SCN	NP
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
pimecrolimus cream	SCN	NP
tacrolimus		NP
Dupixent		NP
Eucrisa 2%	SCN	NP
Immunomodulators, Topical		
imiquimod		P
Zyclara		NP
Intranasal Rhinitis Agents		
azelastine (Gen-Astelin)		P
fluticasone RX		P
ipratropium		P
olopatadine		P
Beconase AQ	SCN	P
azelastine (Gen-Astepro)		NP
flunisolide		NP
mometasone furoate spray*		NP
Astepro		NP
Dymista		NP
Nasonex*		NP
Omnaris	SCN	NP
Qnasl		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

Leukotriene Modifiers (cont)		
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		NP
colestipol granules		NP
Colestid granules		NP
Lipotropics, Fibric Acids		
fenofibrate tab (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
fenofibrate (Gen-Triglide)	SCN	NP
fenofibric acid (Gen-Fibrocor)		NP
Antara	SCN	NP
Fenoglide		NP
Fibrocor	SCN	NP
Lipofen	SCN	NP
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

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

Preliminary (Effective 07/01/2019)

Lipotropics, Other (cont)		
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, CGRP Antagonists		
Emgality		P
Aimovig		NP
Ajovy	SCN	NP
Migraine Agents, Other		
rizatriptan		P
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 20mg		P
Copaxone 40mg		P
Gilenya		P
Rebif	SCN	P
Rebif Rebidose	SCN	P
glatiramer	SCN	NP
Extavia		NP
Glatopa		NP
Mavenclad	SCN	NP
Mayzent		NP
Plegridy	SCN	NP
Tecfidera	SCN	NP
Multiple Sclerosis Agents, Other		
dalfampridine ER	SCN	NP
Ampyra ER	SCN	NP
Neuropathic Pain		
duloxetine 20mg DR caps		P
duloxetine 30mg DR caps		P
duloxetine 60mg DR caps		P
gabapentin		P
Lyrica		P
duloxetine 40mg DR caps		NP
Gralise	SCN	DR
Horizant		DR
Lyrica CR		NP
NSAIDs		
celecoxib cap		P
diclofenac potassium		P
diclofenac sodium		P
diclofenac ER		P
flurbiprofen		P
ibuprofen Rx		P

NSAIDs (cont)		
ibuprofen OTC	SCN	P
indomethacin		P
ketoprofen		P
ketorolac		P
meloxicam tablets		P
napumetone		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
naproxen CR		NP
naproxen EC	SCN	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	SCN	NP
Naprelan CR		NP
Sprix	SCN	NP
Tivorbex	SCN	NP
Vimovo	SCN	NP
Vivlodex	SCN	NP
Qmiz	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 (Gen-Patanol)		P
Alaway OTC	SCN	P
Alrex		P
Pazeo		P
azelastine		NP
epinastine		NP
olopatadine 0.2% drops (Gen-Pataday)		NP
Alocril		NP
Alomide		NP
Bepreve		NP
Emadine		NP
Lastacaft		NP
Pataday		NP
Ophthalmics, Antibacterial		
ciprofloxacin solution		P
erythromycin		P
gentamicin drops		P
moxifloxacin (Gen-Vigamox)		P
ofloxacin		P
polymyxin/trimethoprim		P
sulfacetamide oint		P
sulfacetamide solution		P
tobramycin		P
Ciloxan ointment		P
Moxeza		P
Tobrex ointment		
bacitracin		NP
bacitracin/polymyxin		NP
gatifloxacin		NP
levofloxacin		NP
neomycin/bacitracin/polymyxin ointment		NP
neomycin/polymyxin/gramicidin		NP
triple antibiotic		NP
Azasite		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

Preliminary (Effective 07/01/2019)

Ophthalmics, Antibacterial (cont)		
Besivance		NP
Natacyn		NP
Zymaxid		NP
Ophthalmics, Antibiotic-Steroid Combinations		
neomycin/polymyxin/dexamethasone		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
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
loteprednol drops (Gen-Lotemax)		NP
omnipred		NP
Acuvail		NP

Ophthalmics, Anti-Inflammatories (cont)		
Bromsite		NP
FML Liquifilm		NP
Inveltys	SCN	NP
Lotemax gel		NP
Lotemax ointment		NP
Nevanac		NP
Prolensa		NP
Ophthalmics, Anti-Inflammatory / Immunomodulator		
Restasis	SCN	P
Cequa solution		NP
Restasis Multidose	SCN	NP
Xiidra		NP
Ophthalmics, Glaucoma-Beta Blockers		
carteolol		P
levobunolol		P
timolol (Gen-Timoptic/XE)		P
Betoptic S		P
betaxolol		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
lopidine		NP
Alphagan P 0.1%	SCN	NP
Cosopt PF		NP
Rocklatan		NP
Rhopressa	SCN	NP

Ophthalmics, Glaucoma-Prostaglandins			
latanoprost			P
Travatan Z			P
bimatoprost 0.03% 2.5ml			NP
bimatoprost 0.03% 5ml			NP
bimatoprost 0.03% 7.5ml			NP
Lumigan 0.01% 2.5ml	SCN		NP
Lumigan 0.01% 5ml	SCN		NP
Lumigan 0.01% 7.5ml	SCN		NP
Vyzulta solution			NP
Xelpros			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
*Policy for obtaining provider-administered drugs applies. Refer to topic #5697.			
Opioid Dependency Agents-Rescue Agent			
naloxone syringe			P
naloxone vial			P
Narcan spray		SCN	P
Opioid Dependency Agents-methadone			
methadone dispersible tab	DR		P
methadone concentrate	DR		P
Opioid Dependency and Alcohol Abuse / Dependency Agents			
naltrexone tab	DR		P
Vivitrol injection*	DR	SCN	P
*Policy for obtaining provider-administered drugs applies. Refer to topic #5697.			
Otics, Antibiotics			
neomycin/polymyxin/Hc			P
ofloxacin			P

Otics, Antibiotics (cont)		
Cipro HC		P
Coly-mycin S		P
ciprofloxacin	SCN	NP
Ciprodex*		NP
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
Pancreaze 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 tab		P
Phoslyra	SCN	P
Renagel		P
lanthanum carbonate		NP
sevelamer (Gen-Renagel)		NP
sevelamer (Gen-Renvela)		NP
Auryxia	SCN	NP
Eliphos	SCN	NP
Fosrenol		NP
Magnebind		NP
Renvela		NP
Velphoro	SCN	NP
Platelet Aggregation Inhibitors		
aspirin	SCN	P
clopidogrel		P
dipyridamole		P
prasugrel		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

Preliminary (Effective 07/01/2019)

Platelet Aggregation Inhibitors (cont)		
Aggrenox		P
Brilinta		P
aspirin/dipyridamole		NP
ticlopidine		NP
Yosprala	SCN	NP
Zontivity		NP
Prenatal Vitamins		
prenatal vitamin plus low iron	SCN	P
Completenate tablet chew	SCN	P
Elite-OB caplet	SCN	P
Folivane-OB capsule	SCN	P
M-Natal Plus tab	SCN	P
PNV 29-1 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
pantoprazole		P
Nexium Packet		P
Prilosec suspension		P
Protonix suspension		P

Proton Pump Inhibitors (cont)			
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
Addcirca	DR	SCN	P
Letairis			P
Opsumit			P
Tracleer tablet			P
ambrisentan tabs			NP
bosentan tabs			NP
tadalafil tablet	DR	SCN	NP
Adempas			NP
Alyq	DR		NP
Orenitram ER		SCN	NP
Revatio suspension	DR		NP
Tracleer suspension			NP
Tyvaso		SCN	NP
Upravi			NP
Ventavis			NP
Sedative Hypnotics			
estazolam			P
eszopiclone			P
temazepam 15mg			P
temazepam 30mg			P
triazolam			P
zaleplon			P
zolpidem			P
Rozerem			P
flurazepam		SCN	NP
temazepam 7.5mg			NP
temazepam 22.5mg			NP
zolpidem ER			NP
zolpidem SL			NP

Sedative Hypnotics (cont)		
Belsomra		NP
Edluar		NP
Intermezzo		NP
Silenor		NP
Zolpimist	SCN	NP
Skeletal Muscle Relaxants		
baclofen		P
chlorzoxazone 500mg tab		P
cyclobenzaprine tabs		P
dantrolene sodium		P
methocarbamol		P
tizanidine tablets		P
carisoprodol		NP
carisoprodol compound		NP
chlorzoxazone 375mg, 750 mg	SCN	NP
cyclobenzaprine 7.5mg tablet		NP
cyclobenzaprine ER capsule		NP
metaxalone		NP
orphenadrine		NP
tizanidine capsules		NP
Amrix		NP
Fexmid		NP
Lorzone	SCN	NP
Metaxall	SCN	NP
Norgesic Forte tabs	SCN	NP
Soma		NP
Steroids, Topical Low		
hydrocortisone		P
hydrocortisone OTC	SCN	P
Derma-Smoothe-FS	SCN	P
Scalpicin 1% liquid	SCN	P
alclometasone dipropionate cream/oint		NP
desonide cream/oint/lotion		NP
fluocinolone oil		NP
hydrocortisone acetate/urea		NP
hydrocortisone/min oil/pet oint		NP
Capex Shampoo	SCN	NP
Desonate		NP
Texacort	SCN	NP

Steroids, Topical Medium		
fluticasone cream/ointment		P
mometasone furoate		P
betamethasone valerate foam		NP
clococtolone		NP
flurandrenolide lotion/cream		NP
flurandrenolide ointment	SCN	NP
fluticasone lotion		NP
fluocinolone cream	SCN	NP
fluocinolone 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
Beser lotion	SCN	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
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

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

Preliminary (Effective 07/01/2019)

Steroids, Topical Very High			
clobetasol cream/oint/solution/gel/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	SCN	NP	
Bryhali lotion		NP	
Clobex spray	SCN	NP	
Lexette foam		NP	
Olux-E	SCN	NP	
Ultravate lotion	SCN	NP	
Stimulants			
dexamethylphenidate	DR	P	
methylphenidate tab (Gen-Ritalin)	DR	P	
methylphenidate CD	DR	P	
methylphenidate chew tab (Gen-Methylin chew)	DR	P	
methylphenidate ER tab (Gen-Metadate ER and Methylin ER)	DR	P	
methylphenidate LA capsule (Gen-Ritalin LA)	DR	P	
methylphenidate solution (Gen-Methylin solution)	DR	P	
Aptensio XR	DR	P	
Concerta	DR	P	
Daytrana	SCN	DR	P
Focalin	DR	P	
Focalin XR	DR	P	
Metadate ER tablet	DR	P	
Methylin solution	SCN	DR	P
Quillichew ER	SCN	DR	P
Quillivant XR	SCN	DR	P
Vyvanse*	DR	P	

Stimulants (cont)			
Vyvanse chewable*		DR	P
amphetamine salt combo*		DR	NP
amphetamine salt combo ER		DR	NP
amphetamine sulfate (Gen-Evekeo)*		DR	NP
dexamethylphenidate ER caps		DR	NP
dextroamphetamine *		DR	NP
dextroamphetamine ER		DR	NP
dextroamphetamine solution*	SCN	DR	NP
methylphenidate ER tablet (Gen-Concerta)		DR	NP
methylphenidate ER 72mg tab (Gen-Relexxii)	SCN	DR	NP
methamphetamine		DR	NP
Adzenys ER susp	SCN	DR	NP
Adzenys XR ODT	SCN	DR	NP
Cotempla XR	SCN	DR	NP
Dexedrine*	SCN	DR	NP
Dyanavel XR	SCN	DR	NP
Evekeo*		DR	NP
Jornay PM	SCN	DR	NP
Mydayis ER		DR	NP
Procentra*	SCN	DR	NP
Relexxii ER	SCN	DR	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)			
*Prior Authorization not required for members 6 years of age and younger.			
Stimulants-Related Agents			
atomoxetine			P
clonidine ER			P
guanfacine ER			P
Stimulants-Related Agents – armodafinil and modafinil			
armodafinil			P
modafinil			P

Ulcerative Colitis		
balsalazide		P
budesonide ER tablet		P
sulfasalazine		P
Apriso		P
Canasa		P
Lialda		P
Rowasa Kits	SCN	P
mesalamine DR caps		NP
mesalamine DR tabs		NP
mesalamine kits	SCN	NP
mesalamine rectal		NP
Asacol HD		NP
Delzicol		NP
Dipentum		NP
Giazo		NP
Pentasa		NP
Uceris foam		NP

Brand Name Drugs with Generic Copay	
Drug Name	Start Date
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
Humalog U-100 Kwikpen/Vial	07/01/2019
Retin-A (not micro)	07/01/2016
Tegretol tablet	01/01/2016
Tegretol suspension	01/01/2016
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