

Wisconsin Medicaid and SeniorCare Preferred Drug List - Quick Reference

(Revised 09/18/06)

| ACE Inhibitors | | Angiotensin Receptor Blockers | | Antifungals, Oral | | Agents for BPH | |
|--|--------|--|--------|---|--------|---|--------|
| benazepril, HCTZ | P | Avapro, Avalide | P | clotrimazole | P | doxazosin | P |
| captopril, HCTZ | P | Benicar, HCT | P | fluconazole | P | finasteride | P |
| enalapril, HCTZ | P | Cozaar, Hyzaar | P | griseofulvin | P | terazosin | P |
| fosinopril, HCTZ | P | Diovan, HCT | P | itraconazole | P | Avodart | P |
| lisinopril, HCTZ | P | Micardis, HCT | P | ketocoazole | P | Flomax | P |
| quinapril, HCTZ | P | Atacand, HCT | NP | nystatin | P | Uroxatral | SCN P |
| Aceon | NP | Teveten, HCT | NP | Gris-Peg | P | Cardura XL | NP |
| Altace | NP | Anticoagulants, Injectables | | Lamisil | P | Beta Blockers | |
| Mavik | NP | Arixtra | P | Mycostatin | P | acebutolol | P |
| Univasc/Uniretic | NP | Fragmin | P | Vfend | P | atenolol | P |
| ACE Inhibitors/CCB Combinations | | Lovenox | SCN P | Ancobon | NP | betaxolol | P |
| Lotrel | P | Innohep | NP | Grifulvin V Tablets | NP | bisoprolol | P |
| Tarka | P | Anticonvulsants | | Sporanox (liquid) | NP | labetalol | P |
| Lexxel | NP | carbamazepine | P | Antifungals, Topical | | metoprolol | P |
| Acne Agents | | clonazepam | P | ciclopirox cream, suspension | P | nadolol | P |
| benzoyl peroxide | P | ethosuximide | P | clotrimazole/betamethasone | P | pindolol | P |
| clindamycin | P | gabapentin | P | econazole nitrate | P | propranolol | P |
| erythromycin, benzoyl peroxide | P | lamotrigine 25 mg | P | ketocoazole | P | sotalol | P |
| tretinoin | P | mephobarbital | P | nystatin | P | timolol | P |
| Akne-mycin | P | phenobarbital | P | nystatin/triamcinolone | P | Coreg | P |
| Azelex | P | phenytoin | P | Exelderm | P | Tropol XL | P |
| Nuox | SCN P | primidone | P | Loprox gel, shampoo | SCN P | Cartrol | NP |
| Retin-A micro | P | valproic acid | P | Ertaczo | NP | Inderal LA | NP |
| Tazorac | P | zonisamide | P | Mentax | NP | Innopran XL | NP |
| Benzamycinpak | SCN NP | Carbatrol | P | Naftin | NP | Levatol | NP |
| Brevoxyl creamy wash, gel | NP | Celontin | P | Oxistat | NP | Bladder Relaxant Preparations | |
| Clinac BPO | NP | Depakote, ER, sprinkle | P | Penlac | SCN NP | oxybutynin | P |
| Clindagel | SCN NP | Diastat | P | Antihistamines, Nonsedating | | Ditropan XL | P |
| Differin | SCN NP | Equetro | P | loratadine tab, syrup, -D | P | Enablex | P |
| Evoclin | NP | Felbatol | P | fexofenadine (Allegra, -D) | NP | Oxytrol | P |
| Inova | NP | Gabitril | P | Clarinox, Clarinox Syrup | SCN NP | Sanctura | SCN P |
| Klaron | SCN NP | Keppra | P | Zyrtec tab, syrup, -D | NP | VesiCare | P |
| Sulfoxy | NP | Lamictal | P | Antimigraine, Triptans | | Detrol, LA | NP |
| Triaz | SCN NP | Mebaral | SCN P | Axert | QL P | Bone Resorption Suppression | |
| Zaclir | NP | Peganone | P | Imitrex | QL P | Actonel | P |
| Zoderm | NP | Topamax | P | Maxalt, MLT | QL P | Fosamax, Plus D | P |
| Alzheimer's Agents | | Trileptal | P | Amerge | QL NP | Miacalcin | P |
| Aricept | P | Lyrica | NP | Frova | QL NP | Actonel with Calcium | NP |
| Exelon | P | Phenytek | NP | Relpax | QL NP | Boniva | NP |
| Namenda | SCN P | Tegretol XR | NP | Zomig, Nasal, ZMT | QL NP | Didronel | NP |
| Razadyne, ER | P | Antidepressants, Other | | Quantity Limits apply each month: 18 tablets, 6 sprays, 8 injections. | | | |
| Cognex | NP | bupropion, SR | P | Antiparkinson's Agents | | Bronchodilators, Anticholinergic | |
| Analgesics, Narcotics | | mirtazapine | P | benztropine | P | ipratropium | P |
| acetaminophen/codeine | P | trazodone | P | carbidopa/levodopa | P | Atrovent, HFA | P |
| aspirin/codeine | P | venlafaxine | P | pergolide | P | Combivent | P |
| butalbital/apap/codeine | P | Effexor XR | P | selegiline | P | Spiriva | P |
| butalbital/apap/codeine/caff | P | nefazodone | NP | trihexyphenidyl | P | Duoneb | NP |
| codeine | P | Cymbalta | NP | Comtan | P | Bronchodilators, Beta Agonists | |
| fantanyl | P | Emsam | SCN NP | Kemadrin | P | albuterol | P |
| hydrocodone/apap/ibuprofen | P | Wellbutrin XL* | NP | Mirapex | P | metaproterenol | P |
| hydromorphone | P | * Prior authorization is not required for recipients 18 and younger. | | Requip | P | terbutaline | P |
| levorphanol | P | Antidepressants, SSRI | | Stalevo | P | Maxair | SCN P |
| methadone | P | citalopram | P | Parcopa | NP | Serevent | P |
| morphine sulfate | P | fluoxetine | P | Tasmar | NP | Accuneb | NP |
| oxycodone ER | P | paroxetine | P | Zelapar | NP | Alupent | NP |
| oxycodone/apap | P | Zoloft | P | Antipsychotics, Atypical | | Foradil | NP |
| oxycodone/aspirin | P | sertraline | NP | clozapine | P | Ventolin HFA | NP |
| propoxyphene HCL, apap | P | Lexapro | SCN NP | Geodon | P | Vospire ER | NP |
| tramadol | P | Paxil CR | NP | Risperdal | P | Xopenex, HFA | SCN NP |
| tramadol/apap | P | Pexeva | NP | Seroquel | P | Calcium Channel Blocking Agents | |
| Kadian | P | Prozac Weekly | NP | Symbyax | NP | diltiazem, ER | P |
| Xodol | P | Antiemetics, Oral | | Zyprexa | NP | felodipine ER | P |
| meperidine | NP | Emend | P | Abilify | NP | nicardipine | P |
| pentazocine/apap | NP | Zofran, ODT | P | Fazaclo | SCN NP | nifedipine, ER | P |
| pentazocine/naloxone | NP | Anzemet | SCN NP | Antivirals, Influenza | | verapamil, SR | P |
| Actiq | NP | Kytril | NP | amantadine | P | Cardizem LA | P |
| Avinza | NP | Antivirals, Other | | rimantadine | P | Norvasc | P |
| Combunox | SCN NP | acyclovir | P | Relenza | P | Sular | P |
| Darvon-N | SCN NP | ganciclovir | P | Tamiflu | P | Verelan PM | P |
| Duragesic 12 mcg | NP | Valcyte | P | Antivirals, Other | | isradipine | NP |
| Lynox | SCN NP | Valtrex | P | Cardene SR | NP | Covera-HS | NP |
| Opana, ER | NP | Famvir | NP | Dynacirc, CR | NP | Nimotop | NP |
| Palladone | NP | | | | | | |
| Panlor DC, SS | NP | | | | | | |
| Synalgos-DC | NP | | | | | | |
| Ultram ER | NP | | | | | | |

Key:
 All lowercase letters = generic product P = Preferred product QL = Quantity Limits
 Leading capital letter = brand name product NP = Non-preferred product (requires PA) DR = Diagnosis Restriction

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(Revised 09/18/06)

| Cephalosporin and Related Agents | | Hypoglycemics, Insulins | | Multiple Sclerosis Agents | | Otics, Antibiotics | |
|--|-----------|--|--------|---|----------|--|-----------|
| amoxicillin/clavulanate | P | Humulin | P | Avonex | DR SCN P | neomycin/polymyxin/HC | P |
| amox tr-potassium clav 600 | P | Humalog | P | Betaseron | DR P | Ciprodex | P |
| cefaclor | P | Humalog Mix | P | Copaxone | DR SCN P | Coly-Mycin S | P |
| cefadroxil | P | Lantus | SCN P | Rebif | DR P | Floxin (singles and drops) | P |
| cefepodoxime | P | Apidra | SCN NP | NSAIDs | | Cipro HC | NP |
| cefuroxime | P | Byetta | NP | diclofenac, potassium, XL | P | Cortisporin-TC | NP |
| cephalexin | P | Exubera | NP | etodolac, XL | P | Phosphate Binders | |
| cefprozil | P | Levemir | NP | fenoprofen | P | Phoslo | SCN P |
| Cedax | P | Novolin | NP | flurbiprofen | P | Renagel | P |
| Omnicef | P | Novolog | NP | ibuprofen | P | Magnebind | NP |
| Spectracef | P | Novolog Mix | NP | indomethacin, SR | P | Fosrenol | NP |
| Suprax | P | Symlin | NP | ketoprofen | P | Platelet Aggregation Inhibitors | |
| Augmentin XR | NP | Hypoglycemics, Meglitinides | | ketorolac | P | clopidogrel | P |
| Lorabid | NP | Starlix | P | meclofenamate | P | dipyridamole | P |
| Panixine | NP | Prandin | NP | meloxicam | P | ticlopidine | P |
| Raniclol | NP | Hypoglycemics, Thiazolidinediones | | nabumetone | P | Aggrenox | P |
| Cytokine and CAM Antagonists | | Actos | P | naproxen | P | Proton Pump Inhibitors | |
| Enbrel [†] | SCN P | Avandamet | P | naproxen sodium, DS | P | Nexium | DR P |
| Humira [†] | P | Avandia | P | oxaprozin | P | Prevacid (caps, SoluTab, s) | DR P |
| Kineret [†] | P | Actoplus MET | NP | piroxicam | P | omeprazole* | DR NP |
| Raptiva [†] | SCN P | Avandaryl | NP | sulindac | P | Aciphex* | DR NP |
| Amevive | SCN NP | Intranasal Rhinitis Agents | | tolmetin, DS | P | Prilosec 40 mg* | DR NP |
| Orencia | NP | flunisolide | P | Arthrotec | NP | Protonix* | DR NP |
| Erythropoiesis Stimulating Proteins | | ipratropium | P | Celebrex | NP | Zegerid* | DR NP |
| Aranesp | DR P | Flonase | P | Nalfon 200, 300 mg | NP | * Requires the prior use and failure of Nexium and Prevacid. | |
| Procrit | DR P | Nasacort AQ | SCN P | Ponstel | NP | Sedative Hypnotics | |
| Epogen | DR NP | Nasonex | SCN P | Prevacid Naprapac | NP | chloral hydrate | P |
| Fluoroquinolones | | fluticasone | NP | Ophthalmics, Allergic Conjunctivitis | | estazolam | P |
| ciprofloxacin | P | Astelin | NP | cromolyn | P | flurazepam | P |
| ofloxacin | P | Beconase AQ | NP | ketotifen | P | temazepam | P |
| Avelox | P | Nasarel | NP | Acular | P | triazolam | P |
| Levaquin | P | Rhinocort Aqua | NP | Alrex | P | Ambien | SCN P |
| Cipro suspension, XR | NP | Leukotriene Modifiers | | Elestat | P | Lunesta | SCN P |
| Factive | SCN NP | Accolate | P | Patanol | P | Rozeren | P |
| Maxaquin | NP | Singulair | P | Alamast | NP | Ambien CR | SCN NP |
| Noroxin | NP | Lipotropics, Other | | Alocril | NP | Doral | NP |
| Proquin XR | SCN NP | cholestyramine | P | Alomide | NP | Restoril | NP |
| Tequin | NP | colestipol | P | Emadine | NP | Sonata | NP |
| Glucocorticoids, Inhaled | | gemfibrozil | P | Ophthalmics, Antibiotics | | Stimulants and Related Agents | |
| Advair Diskus | P | niacin | P | bacitracin/polymyxin | P | amphetamine salt combo | DR P |
| Aerobid, Aerobid-M | SCN P | Lofibra | P | ciprofloxacin solution | P | dextroamphetamine | DR P |
| Asmanex | SCN P | Niaspan | P | erythromycin | P | methylphenidate ER | DR P |
| Azmacort | SCN P | Tricor | P | gentamicin | P | Adderall XR | DR P |
| Flovent | P | Antara | NP | ofloxacin | P | Concerta | DR P |
| Pulmicort Respules | P | Omacor | NP | polymyxin/trimethoprim | P | Focalin, XR | DR P |
| Qvar | P | Triglide | NP | sulfacetamide | P | Metadate CD | DR P |
| Pulmicort Turbuhaler | NP | Welchol | NP | tobramycin | P | Ritalin LA | DR P |
| Growth Hormone | | Zetia | NP | triple antibiotic | P | pemoline (Cylert) | DR NP |
| Norditropin [†] | P | Lipotropics, Statins | | Zymar | P | Daytrana | DR NP |
| Nutropin AQ [†] | SCN P | lovastatin | P | Ciloxan Ointment | NP | Desoxyn | DR SCN NP |
| Saizen [†] | P | pravastatin | P | Quixin | NP | Provigil | DR NP |
| Tev-Tropin [†] | P | Advicor | P | Vigamox | NP | Strattera | DR NP |
| Genotropin | NP | Altoprev | P | Ophthalmics, Glaucoma Agents | | Topical Immunomodulators | |
| Humatrope | NP | Crestor | P | betaxolol | P | Elidel | P |
| Nutropin | SCN NP | Lescol, XL | P | brimonidine | P | Protopic | SCN P |
| Serostim | NP | Vytorin | P | carteolol | P | Ulcerative Colitis | |
| Hepatitis C Agents | | Zocor | P | dipivefrin | P | mesalamine | P |
| ribavirin | DR P | simvastatin | NP | levobunolol | P | sulfasalazine | P |
| Copegus | DR P | Caduet | NP | metipranolol | P | Asacol | P |
| Pegasys | DR P | Lipitor | NP | pilocarpine | P | Canasa | P |
| Peg-Intron, Redipen | DR SCN P | Pravachol 80 mg | NP | timolol | P | Dipentum | P |
| Rebetol | DR SCN P | Pravigard PAC | NP | Alphagan P | P | Pentasa | P |
| Infergen | DR SCN NP | Macrolides/Ketolides | | Azopt | P | Colazal | SCN NP |
| | | azithromycin | P | Betimol | P | | |
| | | clarithromycin | P | Betopic S | P | | |
| | | erythromycin | P | Cosopt | P | | |
| | | Biaxin XL | P | Lumigan | P | | |
| | | Ketek | SCN NP | Travatan | P | | |
| | | | | Trusopt | P | | |
| | | | | Istalol | NP | | |
| | | | | Xalatan | NP | | |

Key:

All lowercase letters = generic product
 Leading capital letter = brand name product

P = Preferred product
 NP = Non-preferred product (requires PA)

QL = Quantity Limits
 DR = Diagnosis Restriction

SCN = Wisconsin SeniorCare does not cover OTC drugs and also, for Levels 2b and 3, does not cover drugs that do not have a signed SeniorCare rebate agreement between the manufacturer and the DHFS. Providers should reference the SeniorCare Drug Search Tool for a complete listing of covered drugs at dhfs.wisconsin.gov/seniorcare.