

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

Revised 02/06/2018(Effective 02/01/2018)

## KEY:

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

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

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

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

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

Revised 02/06/2018 (Effective 02/01/2018)

Acne Agents, Topical		
benzoyl peroxide OTC 2.5%		P
benzoyl peroxide OTC 5%		P
benzoyl peroxide OTC 10%		P
clindamycin gel		P
clindamycin solution		P
erythromycin solution		P
Azelex		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		P
NOTE: Topical federal legend acne drugs not listed are either non-preferred or noncovered.		
Alzheimer's Agents		
donepezil 5mg		P
donepezil 10mg		P
donepezil 5mg ODT		P
donepezil 10mg ODT		P
memantine solution		P
memantine tablet		P
memantine Titr PK		P
rivastigmine capsules		P
Exelon patch		P
donepezil 23mg		NP
galantamine		NP
galantamine ER		NP
galantamine solution		NP
rivastigmine patch		NP
Namenda XR	DR	NP
Namzaric capsule		NP
Namzaric dose pack		NP
Analgesics/Anesthetics, Topical		
capsaicin OTC	SCN	P
lidocaine 5% ointment		P
lidocaine 5% trans patch		P
Voltaren		P

Analgesics/Anesthetics, Topical (cont)		
diclofenac 1% gel		NP
diclofenac 1.5% soln		NP
Flector		NP
Pennsaid	SCN	NP
Analgesics, Miscellaneous		
acetaminophen	SCN	P
aspirin	SCN	P
ibuprofen OTC chewable	SCN	P
ibuprofen OTC suspension	SCN	P
ibuprofen OTC tablets	SCN	P
naproxen OTC	SCN	P
butalbital/apap		NP
butalbital/apap/caffeine		NP
butalbital/apap/caffeine/codeine		NP
butalbital/asa/caffeine		NP
butalbital/asa/caffeine/codeine		NP
Bupap		NP
Analgesics, Opioids Long-Acting		
fentanyl transdermal 12mcg		P
fentanyl transdermal 25mcg		P
fentanyl transdermal 50mcg		P
fentanyl transdermal 75mcg		P
fentanyl transdermal 100mcg		P
morphine ER tablets		P
tramadol ER tab(Ultram ER)		P
Butrans transdermal		P
Embeda ER		P
Hysingla ER		P
Kadian		P
buprenorphine transdermal		NP
fentanyl transdermal 37.5mcg		NP
fentanyl transdermal 62.5mcg		NP
fentanyl transdermal 87.5mcg		NP
hydromorphone ER		NP
methadone tablet		NP

Analgesics, Opioids Long-Acting (cont)		
methadone solution		NP
morphine ER capsules		NP
oxycodone ER		NP
oxymorphone ER		NP
tramadol ER cap (Conzip)	SCN	NP
tramadol ER tab (Ryzolt)		NP
Arymo ER	SCN	NP
Belbuca Film		NP
Conzip	SCN	NP
Exalgo ER		NP
Morphabond ER		NP
Nucynta ER		NP
Oxycontin		NP
Xartemis XR	SCN	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
butorphanol spray		NP
codeine		NP
dihydrocodeine/apap/caffeine		NP
dihydrocodeine/asa/caffeine		NP
levorphanol		NP
hydrocodone/apap*		NP
hydromorphone liquid		NP

Analgesics, Opioids Short-Acting (cont)		
hydromorphone suppositories		NP
meperidine		NP
oxycodone/apap*		NP
oxycodone/asa		NP
oxycodone capsules		NP
oxycodone conc		NP
oxycodone/ibuprofen		NP
oxymorphone		NP
pentazocine/naloxone		NP
tramadol/apap		NP
Capital w-codeine		NP
Dilaudid Liquid		NP
Ibudone		NP
Nucynta		NP
Oxaydo	SCN	NP
Primlev		NP
Reprexain		NP
Synalgos-DC		NP
Vicodin 5/300		NP
Vicodin 7.5/300		NP
Vicodin 7.5/300		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		
AndroGel		P
testosterone gel		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

Revised 02/06/2018 (Effective 02/01/2018)

Androgenic Agents (cont)		
testosterone pump		NP
Androderm		NP
Axiron		NP
Fortesta		NP
Natesto		NP
Testim		NP
Vogelxo		NP
Angiotensin Modulators, ACE Inhibitors		
benazepril		P
captopril		P
enalapril		P
enalapril/HCTZ		P
fosinopril		P
lisinopril		P
lisinopril/HCTZ		P
ramipril		P
benazepril/HCTZ		NP
captopril/HCTZ		NP
fosinopril/HCTZ		NP
moexipril		NP
moexipril/HCTZ		NP
perindopril		NP
quinapril		NP
quinapril /HCTZ		NP
trandolapril		NP
Epaned *	SCN	NP
Qbrelis solution	SCN	NP
Prestalia	SCN	NP
*Prior Authorization is not required for members 12 years of age and younger.		
Angiotensin Modulators, ARBs and DRIs		
losartan		P
losartan /HCTZ		P
valsartan		P
valsartan/HCTZ		P
candesartan tablets		NP

Angiotensin Modulators, ARBs and DRIs (cont)		
candesartan HCTZ		NP
eprosartan mesylate		NP
irbesartan		NP
irbesartan/HCTZ		NP
olmesartan		NP
olmesartan/HCTZ		NP
telmisartan		NP
telmisartan/HCTZ		NP
Benicar		NP
Benicar /HCTZ		NP
Edarbi		NP
Edarbyclor		NP
Entresto		NP
Micardis		NP
Micardis/HCTZ		NP
Tekturna		NP
Tekturna /HCTZ		NP
Angiotensin Modulators, Combination		
amlodipine/benazepril		P
Amlodipine/valsartan		P
Azor		
Exforge /HCTZ		P
Tribenzor		
amlodipine/valsartan HCTZ		NP
olmesartan/amlodipine		NP
olmesartan/amlodipine/HCTZ		NP
telmisartan/amlodipine		NP
trandolapril/verapamil		NP
Amturnide		NP
Byvalson		NP
Tarka		NP
Tekamlo		NP
Twynsta		NP
Antibiotics, Beta-Lactam		
amoxicillin		P

Antibiotics, Beta-Lactam (cont)		
amoxicillin clavulanate		P
amoxicillin clavulanate 250mg suspension		P
ampicillin		P
cefaclor		P
cefadroxil		P
cefdinir		P
cephalexin		P
cefprozil		P
cefuroxime		P
dicloxacillin		P
penicillin		P
Augmentin 125 suspension		P
Ceftin 125 suspension	SCN	P
Ceftin 250 suspension	SCN	P
Suprax capsules		P
Suprax chew tab		P
Suprax tab		P
Suprax suspension		P
amoxicillin clavulanate XR		NP
amoxicillin ER 775 mg tab	SCN	NP
cefaclor tab ER		NP
cefixime suspension		NP
cefepodoxime		NP
ceftibuten capsule	SCN	NP
ceftibuten suspension	SCN	NP
Cedax capsule	SCN	NP
Cedax suspension	SCN	NP
Moxatag ER		NP
Spectracef		NP
Antibiotics, GI		
metronidazole tablets		P
neomycin		P
tinidazole		P
vancomycin		P
Alinia	SCN	P
Xifaxan	SCN	P

Antibiotics, GI (cont)		
metronidazole capsule		NP
Difidid		NP
Flagyl ER		NP
Solosec		NP
Antibiotics, Inhaled		
Bethkis		P
Kitabis Pak		P
tobramycin		NP
Cayston		NP
Tobi		NP
Tobi Podhaler		NP
Antibiotics, Macrolides/Ketolides		
azithromycin		P
clarithromycin susp		P
clarithromycin tab		P
erythromycin cap/tab		P
erythromycin granules		P
E.E.S. Granules		P
E.E.S. Filmtab		P
Eryped		P
Ery-Tab EC		P
Erythrocin		P
PCE		P
clarithromycin ER tab		NP
erythromycin filmtab		NP
Ketek		NP
Zmax		NP
Antibiotics, Tetracyclines		
doxycycline hyclate 20mg		P
doxycycline monohydrate 50mg capsules		P
doxycycline monohydrate 100mg capsules		P
doxycycline monohydrate tablets		P
minocycline capsules		P
demeclocycline		NP

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

Revised 02/06/2018 (Effective 02/01/2018)

Antibiotics, Tetracyclines (cont)		
doxycycline hyclate DR		NP
doxycycline hyclate		NP
doxycycline monohydrate suspension		NP
doxycycline monohydrate 75mg capsules		NP
doxycycline monohydrate 150mg capsules		NP
minocycline tablets		NP
minocycline ER		NP
tetracycline		NP
Doryx DR		NP
Morgidox capsule	SCN	NP
Oracea		NP
Solodyn 55mg	SCN	NP
Solodyn 65mg	SCN	NP
Solodyn 80mg	SCN	NP
Solodyn 105mg	SCN	NP
Solodyn 115mg	SCN	NP
Vibramycin Syr/ Susp		NP
Ximino ER	SCN	NP
Antibiotics, Topical		
<b>bacitracin oint. OTC</b>	SCN	P
<b>bacitracin/polymyxin B oint. OTC</b>	SCN	P
<b>mupirocin ointment</b>		P
<b>neomycin/bacitracin/zinc/polymyxin B oint OTC</b>	SCN	P
<b>neomycin/bacitracin/zinc/polymyxin B/ pramoxine oint OTC</b>	SCN	P
gentamicin cream		NP
gentamicin oint		NP
mupirocin cream		NP
Bactroban cream	SCN	NP
Bactroban nasal	SCN	NP
Centany		NP

Antibiotics, Vaginal		
clindamycin		P
metronidazole		P
Cleocin ovule		P
Clindesse		P
Vandazole		P
Nuversa		NP
Anticoagulants		
enoxaparin		P
warfarin		P
Eliquis		P
Pradaxa		P
Xarelto		P
Xarelto Dose Pack		P
fondaparinux		NP
Arixtra	SCN	NP
Fragmin		NP
Savaysa		NP
Anticonvulsants		
carbamazepine chew tabs		P
carbamazepine ER cap		P
clonazepam tablets		P
divalproex		P
divalproex ER		P
divalproex sprinkles		P
ethosuximide		P
felbamate		P
gabapentin		P
lamotrigine		P
lamotrigine dispertabs		P
levetiracetam		P
levetiracetam solution		P
levetiracetam ER		P
oxcarbazepine		P
oxcarbazepine suspension		P
phenobarbital		P
phenytoin		P

Anticonvulsants (cont)		
primidone		P
topiramate		P
topiramate sprinkle		P
valproic acid		P
zonisamide		P
Celontin		P
Diastat		P
Dilantin 30mg cap		P
Dilantin Infatab		P
Gabitril		P
Lamictal Starter Kits		P
Lyrica		P
Peganone		P
Tegretol tab		P
Tegretol suspension		P
Tegretol XR		P
carbamazepine ER tab		NP
carbamazepine suspension		NP
carbamazepine tab		NP
clonazepam ODT		NP
diazepam rectal		NP
lamotrigine ER		NP
lamotrigine ODT		NP
tiagabine		NP
topiramate ER		NP
vigabatrin pwdr pk		NP
Aptiom		NP
Banzel		NP
Briviact		NP
Equetro		NP
Felbatol		NP
Fycompa		NP
Lamictal ODT	SCN	NP
Lamictal XR	SCN	NP
Onfi	SCN	NP
Oxtellar XR	SCN	NP

Anticonvulsants (cont)		
Phenytek		NP
Potiga	SCN	NP
Qudexy		NP
Roweepra	SCN	NP
Sabril		NP
Spritam		NP
Trileptal suspension		NP
Trokendi XR	SCN	NP
Vimpat		NP
Vimpat solution		NP
Antidepressants, Other		
bupropion		P
bupropion SR		P
bupropion XL		P
desvenlafaxine ER (Pristiq)		P
duloxetine 20 mg DR caps		P
duloxetine 30 mg DR caps		P
duloxetine 60 mg DR caps		P
mirtazapine		P
phenelzine		P
tranylcypromine sulfate		P
trazodone		P
venlafaxine		P
venlafaxine ER capsules		P
Marplan		P
Nardil		P
desvenlafaxine ER (No Brand)		NP
desvenlafaxine fumarate ER		NP
desvenlafaxine ER (Khedezla)		NP
duloxetine 40 mg DR caps		NP
nefazodone		NP
venlafaxine ER tablets		NP
Aplenzin ER		NP
Emsam		NP
Fetzima		NP

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

Revised 02/06/2018 (Effective 02/01/2018)

Antidepressants, Other (cont)		
Forfivo XL	SCN	NP
Khedeza ER tablets		NP
Trintellix		NP
Viibryd		NP
Antidepressants, SSRI		
citalopram		P
escitalopram		P
fluoxetine 10mg, 20mg, 40mg caps		P
fluoxetine solution		P
fluvoxamine		P
paroxetine		P
sertraline		P
Paxil suspension		P
fluoxetine 90 mg caps		NP
fluoxetine 10 mg ,20mg tablets		NP
fluoxetine 60 mg tablets	SCN	NP
fluvoxamine ER	SCN	NP
paroxetine 7.5mg capsules		NP
paroxetine CR		NP
Brisdelle	SCN	NP
Pexeva		NP
Sarafem		NP
Antiemetics		
granisetron		P
metoclopramide		P
ondansetron		P
ondansetron ODT		P
ondansetron solution	DR	P
prochlorperazine		P
prochlorperazine supp		P
trimethobenzamide caps		P
Emend Capsules		
aprepitant capsules		NP
metoclopramide ODT		NP
Akynzeo		NP

Antiemetics (cont)		
Anzemet		NP
Emend Powder Packet		NP
Sancuso		NP
Varubi	SCN	NP
Zuplenz	SCN	NP
Antiemetics/Antivertigo		
dimenhydrinate OTC	SCN	P
meclizine		P
meclizine OTC	SCN	P
promethazine		P
promethazine supp		P
promethazine syrup		P
Diclegis	SCN	P
Transderm-Scop	SCN	P
scopolamine patch		NP
Antiemetics, Cannabinoids		
dronabinol		NP
Cesamet		NP
Syndros	SCN	NP
Antifungals, Oral		
clotrimazole troche		P
fluconazole		P
griseofulvin suspension		P
griseofulvin ultramicrosize		P
itraconazole		P
ketoconazole tablets		P
nystatin		P
terbinafine		P
Sporanox (liquid)		
flucytosine		NP
griseofulvin microsize		NP
voriconazole 50mg		NP
voriconazole 200mg		NP
voriconazole suspension		NP
Ancobon		NP
Cresamba		NP

Antifungals, Oral (cont)		
Grifulvin V Tablets		NP
Noxafil		NP
Onmel	DR	SCN
Oravig		NP
Vfend		NP
Antifungals, Topical		
ciclopirox solution		P
clotrimazole OTC	SCN	P
clotrimazole Rx		P
clotrimazole/ betamethasone cream		P
proconazole cream		P
ketoconazole shampoo		P
miconazole OTC	SCN	P
nystatin		P
tolnaftate OTC	SCN	P
Alevazol	SCN	P
ciclopirox cream		NP
ciclopirox gel		NP
ciclopirox shampoo		NP
ciclopirox suspension		NP
clotrimazole/betamethasone lotion		NP
econazole nitrate		NP
ketoconazole foam		NP
naftifine	SCN	NP
nystatin/triamcinolone		NP
oxiconazole cream		NP
Bensal HP		NP
Ertaczo		NP
Exelderm		NP
Extina		NP
Jublia		NP
Kerydin	SCN	NP
Luzu cream	SCN	NP
Mentax		NP
Naftin		NP

Antifungals, Topical (cont)		
Oxistat		NP
Vusion		NP
NOTE: Sprays and Kits are not covered.		
Antihistamines, Minimally Sedating		
cetirizine syrup	SCN	P
cetirizine tablets	SCN	P
cetirizine D	SCN	P
loratadine tablets	SCN	P
loratadine D	SCN	P
loratadine syrup	SCN	P
desloratadine		NP
desloratadine ODT		NP
fenofenadine OTC		NP
levocetirizine		NP
Clarinex		NP
Clarinex D		NP
Clarinex Syrup		NP
Semprex-D		NP
Xyzal Syrup		NP
Antihypertensives, Sympatholytics		
clonidine (oral)		P
guanfacine		P
methylodopa		P
Catapres-TTS		
clonidine trans patch		NP
clorpres		NP
methylodopa/HCTZ		NP
reserpine		NP
Antiparasitics, Topical		
permethrin OTC	SCN	P
permethrin Rx		P
Eurax Cream		
Natroba		P
SKlice	SCN	P
malathion		NP
spinosad	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

Revised 02/06/2018 (Effective 02/01/2018)

Antiparasitics, Topical (cont)		
Eurax Lotion		NP
Lindane		NP
Antiparkinson's Agents		
amantadine		P
benztropine		P
bromocriptine		P
carbidopa/levodopa		P
carbidopa/levodopa ER		P
carbidopa/levodopa ODT		P
carbidopa/levodopa/entacapone		P
carbidopa 25mg tab		P
pramipexole		P
ropinirole		P
selegiline		P
trihexyphenidyl		P
entacapone		NP
pramipexole ER	DR	NP
rasagiline	SCN	NP
ropinirole ER	DR	NP
tolcapone		NP
Azilect		NP
Comtan		NP
Gocovri ER	SCN	NP
Mirapex ER	DR	NP
Neupro patches		NP
Requip XL	DR	SCN
Rytary ER	SCN	NP
Stalevo		NP
Tasmar		NP
Xadago	SCN	NP
Zelapar		NP
Antipsoriatics, Oral		
acitretin		P
methoxsalen		NP
Oxsoralen-Ultra		NP

Antipsoriatics, Topical		
calcipotriene		P
calcitrene		P
Vectical	SCN	P
calcipotriene/betamethasone dipropionate oint		NP
calcitriol oint		NP
Enstilar	SCN	NP
Sorilux		NP
Antipsychotics		
aripiprazole*		P
amitriptyline/perphenazine*		P
chlorpromazine*		P
clozapine*		P
fluphenazine*		P
haloperidol*		P
loxapine*		P
olanzapine*		P
olanzapine ODT*		P
perphenazine*		P
quetiapine*		P
quetiapine fumarate ER*		P
risperidone*		P
thiothixene*		P
trifluoperazine*		P
ziprasidone capsules*		P
Latuda*	SCN	P
Orap*		P
clozapine ODT*		NP
molindone tablets*		NP
olanzapine/fluoxetine*		NP
paliperidone tablets*		NP
pimozide*		NP
thioridazine*		NP
Adasuve*		NP
Fanapt*		NP
Fazaclo*	SCN	NP

Antipsychotics (cont)		
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 *	SCN	P
haloperidol decanoate*		P
Abilify Maintena*		P
Aristada*	SCN	P
Haldol Decanoate*		P
Invega Sustenna*		P
Invega Trinza*		P
Risperdal Consta*		P
Zyprexa Relprevv*		P
*Policy for obtaining provider-administered drugs applies. Refer to topic #5697.		
Antivirals, Influenza		
oseltamivir phosphate capsules		P
oseltamivir suspension	SCN	P
rimantadine		P
Relenza	SCN	P
Tamiflu	SCN	P
Antivirals, other		
acyclovir		P
valacyclovir		P
famciclovir		NP
Sitavig	SCN	NP
Antivirals, Topical		
Zovirax Cream		P

Antivirals, Topical (cont)		
Zovirax Ointment		P
acyclovir ointment	SCN	NP
Denavir		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 , Andrenergic		
alfuzosin		P
tamsulosin		P
terazosin		P
doxazosin		NP
Cardura XL		NP
Rapaflo		NP
Beta Blockers		
atenolol		P
atenolol/chlorthalidone		P
bisoprolol		P
bisoprolol/HCTZ		P
carvedilol		P

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

Revised 02/06/2018 (Effective 02/01/2018)

Beta Blockers (cont)		
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		NP
timolol		NP
Bystolic		NP
Coreg CR	SCN	NP
Dutoprol		NP
Hemangeol	SCN	NP
Inderal XL		NP
Innopran XL		NP
Levatol		NP
Lopressor HCT		NP
Sotylize		NP
Bile Salts		
ursodiol		P
Chenodal		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

Bladder Relaxant Preparations (cont)		
darifenacin ER		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		NP
etidronate		NP
ibandronate		NP
raloxifene		NP
risedronate		NP
Actonel	SCN	NP
Atelvia		NP
Binosto		NP
Boniva	SCN	NP
Fosamax Plus D		NP
Tymlos		NP
Bronchodilators, Beta Agonists		
albuterol		P
albuterol ER		P
albuterol (2.5mg/0.5ml)		P
albuterol (2.5mg/3ml)		P
albuterol (100mg/20ml)		P
albuterol nebulizer low-dose(0.63mg/3ml)		P
albuterol nebulizer low-dose1.25mg/3ml)		P
terbutaline tablets		P
Foradil		P
Proair HFA		P
Proventil HFA		P

Bronchodilators, Beta Agonists (cont)		
Serevent	SCN	P
levalbuterol nebulizer		NP
levalbuterol HFA		NP
metaproterenol		NP
Arcapta		NP
Brovana	SCN	NP
Perforomist		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		P
nifedipine ER		P
nifedipine IR		P
nimodipine		P
verapamil		P
verapamil ER		P
verapamil SR		P
diltiazem ER tablets	SCN	NP
felodipine ER		NP
isradipine		NP
nicardipine		NP
nisoldipine		NP
verapamil ER PM		NP
verapamil 360 mg capsule		NP
Cardizem LA		NP
Matzim LA		NP
Nymalize solution		NP
COPD Agents		
ipratropium nebulizer		P
ipratropium/albuterol neb		P
Atrovent HFA		P
Bevespi Aerosphere		P

COPD Agents (cont)		
Combivent Respimat		P
Spiriva		P
Anoro Ellipta	SCN	NP
Daliresp		NP
Incruse Ellipta	SCN	NP
Seebri Neohaler		NP
Spiriva Respimat		NP
Stiolto Respimat		NP
Tudorza Pressair		NP
Utibron Neohaler		NP
Cough and Cold – Narcotic Liquids		
guaifenesin/codeine		P
phenylephrine/ promethazine/codeine		P
promethazine/codeine		P
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.		
<b>Note:</b> Coverage information for non-narcotic OTC cough and cold products can be found in the Over-the-Counter Drugs data tables on the Pharmacy page of the Providers area of the Portal.		
Cytokine and CAM Antagonists		
Enbrel Syr/Kit		P
Humira		P
Otezla		P
Actemra	SCN	NP
Cosentyx		NP
Cimzia		NP
Enbrel mini cartridge		NP
Kevzara		NP
Kineret		NP
Orencia		NP
Siliq		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

Revised 02/06/2018 (Effective 02/01/2018)

Cytokine and CAM Antagonists (cont)		
Simponi		NP
Stelara		NP
Taltz		NP
Tremfya		NP
Xeljanz		NP
Xeljanz XR		NP
Epinephrine, Self Injected		
epinephrine 0.15 MG (AG Epi-pen JR)		P
epinephrine 0.3 MG (AG Epi-pen)		P
epinephrine 0.15 MG (AG Adrenaclick)		NP
epinephrine 0.3 MG (AG Adrenaclick)		NP
Erythropoiesis Stimulating Proteins		
Aranesp		P
Procrit		P
Epogen		NP
Fibromyalgia		
duloxetine 20 mg DR caps		P
duloxetine 30 mg DR caps		P
duloxetine 60 mg DR caps		P
Lyrica		P
Savella		P
duloxetine 40 mg DR caps		NP
Fluoroquinolones		
ciprofloxacin		P
levofloxacin tablets		P
ciprofloxacin suspension		NP
ciprofloxacin ER		NP
levofloxacin solution		NP
moxifloxacin		NP
ofloxacin		NP
Avelox		NP
Baxdela tablet	SCN	NP
Cipro suspension		NP

GI Motility, Chronic-Constipation		
Amitiza		P
Linzess		P
Movantik		P
Relistor tablet	SCN	NP
Symproic		NP
Trulance	SCN	NP
GI Motility, Chronic-Diarrhea		
Lotronex		P
Xifaxan 550mg	SCN	P
alosetron		NP
Viberzi		NP
Glucocorticoids, Inhaled		
Advair Diskus	SCN	P
Asmanex		P
Dulera		P
Flovent HFA	SCN	P
Pulmicort Flexhaler		P
Pulmicort Respules		P
Qvar		P
Symbicort		P
budesonide respules		NP
fluticasone/salmeterol		NP
Advair HFA	SCN	NP
Aerospan HFA Inhaler		NP
AirDuo Respiclick		NP
Glucocorticoids, Inhaled (cont)		
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		NP
Glucocorticoids, Oral		
budesonide EC		P

Glucocorticoids, Oral (cont)		
dexamethasone elixir		P
dexamethasone intensol		P
dexamethasone solution		P
dexamethasone tablet		P
hydrocortisone		P
methylprednisolone Dose Pack		P
methylprednisolone tablet		P
prednisolone sod phosphate solution 5mg/5ml		P
prednisolone sod phosphate solution 15mg/5ml		P
prednisolone sod phosphate solution 25mg/5ml		P
prednisone intensol		P
prednisone solution		P
prednisone Dose Pack		P
prednisone tablet		P
Orapred ODT		P
cortisone		NP
prednisolone sod phosphate ODT		NP
prednisolone sod phosphate solution 10mg/5ml		NP
prednisolone sod phosphate solution 20mg/5ml		NP
Dexpak		NP
Emflaza	SCN	NP
Locort		NP
Medrol tablet		NP
Millipred Dose Pack		NP
Millipred solution		NP
Millipred tablet		NP
Pediapred	SCN	NP

Glucocorticoids, Oral (cont)		
Rayos tablet DR	SCN	NP
Veripred 20	SCN	NP
Zodex	SCN	NP
Gout Agents		
allopurinol		P
colchicine capsule		P
Indomethacin		P
naproxen Rx		P
Probenecid		P
probenecid/colchicine		P
colchicine tablet		NP
naproxen suspension		NP
Colcrys		NP
Duzallo	SCN	NP
Mitigare	SCN	NP
Uloric		NP
Zurampic	SCN	NP
Growth Hormone		
Genotropin		P
Norditropin	SCN	P
Humatrope		NP
Nutropin AQ		NP
Omnitrope		NP
Saizen		NP
Serostim		NP
Zomacton	SCN	NP
Zorbtive		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

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

Revised 02/06/2018 (Effective 02/01/2018)

H2 Antagonists (cont)		
ranitidine capsules		NP
*Prior Authorization not required for members 18 years of age and younger.		
Hepatitis B Agents		
lamivudine		P
Baraclude		P
Hepsera		P
Tyzeka		P
adefovir dipivoxal	SCN	NP
entecavir		NP
Vemlidy		NP
Hepatitis C Agents		
Epclusa		P
Harvoni		P
Mavyret		P
Viekira Pak/Viekira XR		P
Zepatier		P
Daklinza		NP
Olysio		NP
Sovaldi		NP
Technivie		NP
Vosevi		NP
Hepatitis C Agents-Interferon		
Pegasys		P
Peg-Intron Redipen		P
Hepatitis C Agents-Ribavirin		
ribavirin		P
Moderiba		NP
Rebetol Solution		NP
Ribapak		NP
omeclamox Pak	SCN	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		
Janumet		P
Janumet XR		P
Januvia		P
Jentadueto		P
Tradjenta		P
alogliptin		NP
alogliptin/metformin		NP
alogliptin/pioglitazone		NP
Glyxambi		NP
Jentadueto XR		NP
Kazano		NP
Kombiglyze XR		NP
Nesina		NP
Onglyza		NP
Oseni		NP
Hypoglycemics, GLP 1		
Bydureon Pen/Vial		P
Byetta		P
Victoza	SCN	P
Adlyxin		NP
Bydureon BCise		NP
Ozempic		NP
Soliqua		NP
Tanzeum	SCN	NP
Trulicity		NP
Xultophy	SCN	NP
Hypoglycemics, Insulins		
Humalog Mix		P
Humalog U-100 Cart/Kwikpen/Vial		P

Hypoglycemics, Insulins (cont)		
Humulin 70-30		P
Humulin U-100 Kwikpen/Vial		P
Humulin U-500 Vial		P
Novolog	SCN	P
Admelog		NP
Afrezza	SCN	NP
Apidra		NP
Fiasp	SCN	NP
Humalog Jr. Kwikpen		NP
Humalog U-200 Kwikpen		NP
Humulin R U-500 KwikPen		NP
Novolin	SCN	NP
Hypoglycemics, Insulins- Long- Acting		
Lantus		P
Levemir	SCN	P
Basaglar		NP
Toujeo Solostar		NP
Tresiba Flextouch	SCN	NP
Hypoglycemics, Meglitinides		
repaglinide		P
Prandin	SCN	P
nateglinide		NP
repaglinide/metformin		NP
Prandimet	SCN	NP
Hypoglycemics, Other		
metformin		P
metformin ER (Glucophage ER)		P
Farxiga		P
Invokana		P
Welchol		P
metformin ER (Glumetza)		NP
metformin ER OSM-tab		NP
Cycloset	SCN	NP
Glumetza ER		NP
Invokamet		NP

Hypoglycemics, Other (cont)		
Invokamet XR		NP
Jardiance		NP
Qtern		NP
Riomet	SCN	NP
Steglatro		NP
Synjardy		NP
Synjardy XR		NP
Xigduo XR		NP
Hypoglycemics, Sulfonylureas		
chlorpropamide		P
glimepiride		P
glipizide		P
glipizide ER		P
glyburide		P
glyburide/metformin		P
glipizide/metformin		NP
tolazamide		NP
tolbutamide		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		P
tacrolimus		NP
Dupixent		NP
Eucrisa 2%	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

Revised 02/06/2018 (Effective 02/01/2018)

Immunomodulators, Topical		
Aldara	SCN	P
imiquimod		NP
Zyclara		NP
Intranasal Rhinitis Agents		
azelastine (Astellin)		P
fluticasone RX		P
ipratropium		P
Beconase AQ	SCN	P
Patanase		P
budesonide RX		NP
flunisolide		NP
mometasone furoate		NP
olopatadine		NP
triamcinolone		NP
Astepro		NP
Dymista		NP
Nasonex*		NP
Omnaris	SCN	NP
Qnasl		NP
Veramyst	SCN	NP
Zetonna	SCN	NP
*Prior Authorization not required for members 6 years of age and younger.		
Leukotriene Modifiers		
montelukast chewable		P
montelukast tablet		P
montelukast granules		NP
zafirlukast		NP
zileuton ER		NP
Zyflo		NP
Lipotropics, Apo-B Inhibitors		
Juxtapid		NP
Kynamro		NP
Lipotropics, Bile Acid Sequestrants		
cholestyramine		P
colestipol tablet		P

Lipotropics, Bile Acid Sequestrants (cont)			
Welchol			P
colestipol granules			NP
Colestid granules			NP
Lipotropics, Fibrin Acids			
fenofibrate tablet (Gen-Tricor)			P
fenofibric acid (Gen-Trilipix)			P
gemfibrozil			P
fenofibrate (Gen-Antara)			NP
fenofibrate (Gen-Fenoglide)			NP
fenofibrate (Gen-Lipofen)			NP
fenofibrate (Gen Lofibra)			NP
fenofibric acid (Gen-Fibrocor)			NP
Antara			NP
Fenoglide			NP
Fibracor			NP
Lipofen			NP
Triglide			NP
Lipotropics, Niacin			
niacin ER tabs			P
Niacor			P
Lipotropics, Omega-3 Acids			
omega-3 acid ethyl esters	DAPO		P
Vascepa	SCN	DAPO	NP
Lipotropics, Other			
atorvastatin			P
lovastatin			P
pravastatin			P
rosuvastatin			P
simvastatin			P
Zetia			P
amlodipine / atorvastatin			NP
ezetimibe			NP
ezetimibe/simvastatin			NP
fluvastatin			NP
fluvastatin ER			NP

Lipotropics, Other (cont)		
Altoprev		NP
Caduet		NP
Lescol XL		NP
Livalo	SCN	NP
Vytorin		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		NP
Migraine Agents, Other		
rizatriptan		P
rizatriptan ODT		P
sumatriptan nasal spray		P
sumatriptan tablets		P
Relpax		P
almotriptan		NP
eletriptan		NP
frovatriptan		NP
naratriptan		NP
zolmitriptan tablets		NP
zolmitriptan ODT		NP
Cambia		NP
Onzetra	SCN	NP
Treximet	SCN	NP
Zomig Nasal Spray	SCN	NP
Migraine Agents, Injectable		
sumatriptan injectable		P
Alsuma	SCN	NP
Sumavel	SCN	NP
Zembrace	SCN	NP

Multiple Sclerosis Agents, Immunomodulators			
Aubagio			P
Avonex			P
Betaseron			P
Copaxone 20 mg			P
Copaxone 40 mg			P
Gilenya			P
Rebif			P
Rebif Rebidose			P
glatiramer			NP
Extavia			NP
Glatopa			NP
Plegridy			NP
Tecfidera			NP
Zinbryta			NP
Multiple Sclerosis Agents, Other			
Ampyra ER		SCN	NP
Neuropathic Pain			
duloxetine 20 mg DR caps			P
duloxetine 30 mg DR caps			P
duloxetine 60 mg DR caps			P
gabapentin			P
Lyrica			P
duloxetine 40 mg DR caps			NP
Gralise	SCN	DR	NP
Horizant	SCN	DR	NP
Lyrica CR			NP
NSAIDs			
celecoxib cap			P
diclofenac potassium			P
diclofenac sodium			P
diclofenac ER			P
flurbiprofen			P
ibuprofen Rx			P
indomethacin			P
ketoprofen			P
ketorolac			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

Revised 02/06/2018 (Effective 02/01/2018)

NSAIDs (cont)		
meloxicam tablets		P
nabumetone		P
naproxen Rx		P
naproxen DS Rx		P
sulindac		P
diclofenac sodium/misoprostol		NP
diclofenac solution		NP
diflunisal		NP
etodolac		NP
etodolac XL		NP
fenoprofen		NP
indomethacin ER		NP
ketoprofen ER		NP
meclofenamate		NP
mefenamic acid		NP
meloxicam suspension		NP
naproxen CR	SCN	NP
naproxen sodium Rx		NP
naproxen suspension		NP
oxaprozin		NP
piroxicam		NP
tolmetin		NP
tolmetin DS		NP
Duexis	SCN	NP
Indocin suppository	SCN	NP
Indocin suspension		NP
Nalfon 400mg cap	SCN	NP
Naprelan CR	SCN	NP
Sprix	SCN	NP
Tivorbex	SCN	NP
Vimovo		NP
Vivlodex	SCN	NP
Zipsor	SCN	NP
Zorvolex	SCN	NP
Ophthalmics, Allergic Conjunctivitis		
<b> cromolyn</b>		<b> P</b>

Ophthalmics, Allergic Conjunctivitis (cont)		
ketorolac 0.5%		P
ketotifen		P
olopatadine 0.1% drops (Patanol)		P
Alaway		P
Alrex		P
Pazeo		P
azelastine		NP
epinastine		NP
olopatadine 0.2% drops (Pataday)		NP
Alocril		NP
Alomide		NP
Bepreve		NP
Emadine		NP
Lastacaft		NP
Pataday		NP
Ophthalmics, Antibacterial		
ciprofloxacin solution		P
erythromycin		P
gentamicin		P
ofloxacin		P
polymyxin/trimethoprim		P
sulfacetamide oint		P
sulfacetamide solution		P
tobramycin		P
Ciloxan ointment		P
Moxeza		P
Tobrex ointment		P
Vigamox		P
bacitracin		NP
bacitracin/polymyxin		NP
gatifloxacin		NP
levofloxacin		NP
moxifloxacin (Vigamox)		NP
neomycin/bacitracin/polymyxin ointment		NP

Ophthalmics, Antibacterial (cont)		
neomycin/polymyxin/gramicidin		NP
triple antibiotic		NP
Azasite		NP
Besivance		NP
Natacyn		NP
Zymaxid		NP
Ophthalmics, Antibiotic-Steroid Combinations		
neomycin/polymyxin/dexamethasone		P
sulfacetamide/prednisolone		P
Blephamide		P
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.		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.		P
Ilevro		P
Lotemax solution		P
Maxidex		P

Ophthalmics, Anti-Inflammatories (cont)		
<b>Pred Mild</b>		<b>P</b>
bromfenac		NP
diclofenac		NP
omnipred		NP
Acuvail		NP
Bromsite		NP
FML Liquifilm		NP
Lotemax gel		NP
Lotemax ointment		NP
Nevanac		NP
Prolensa		NP
Vexol		NP
Ophthalmics, Anti-Inflammatory / Immunomodulator		
Restasis		P
Restasis Multidose		P
Xiidra		NP
Ophthalmics, Glaucoma-Beta Blockers		
carteolol		P
levobunolol		P
timolol (Gen-Timoptic/XE)		P
Betoptic S		P
betaxolol		NP
metipranolol		NP
Istalol		NP
timolol (Gen-Istalol)		NP
Timoptic Ocudose		NP
Ophthalmics, Glaucoma-Other		
brimonidine 0.2%		P
dorzolamide		P
dorzolamide w/ timolol		P
pilocarpine		P
Alphagan P 0.15%		P
Azopt		P
Combigan		P
Isopto Carpine 2%		P
Simbrinza		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

Revised 02/06/2018 (Effective 02/01/2018)

Ophthalmics, Glaucoma-Other (cont)			
apraclonidine			NP
brimonidine tartrate 0.15%			NP
Alphagan P 0.1%			NP
Cosopt PF			NP
lopidine			NP
Ophthalmics, Glaucoma-Prostaglandins			
latanoprost			P
Travatan Z			P
bimatoprost 0.03% 2.5ml			NP
bimatoprost 0.03% 5 ml			NP
bimatoprost 0.03%7.5 ml			NP
travoprost			NP
Lumigan 0.01% 2.5 ml			NP
Lumigan 0.01% 5 ml			NP
Lumigan 0.01% 7.5 ml			NP
Vyzulta solution			NP
Zioptan			NP
Opioid Dependency Agents-Buprenorphine			
Suboxone Film	DR	SCN	P
Zubsolv	DR	SCN	P
buprenorphine	DR		NP
buprenorphine-naloxone tab	DR		NP
Bunavail	DR	SCN	NP
Opioid Dependency Agents-Rescue Agent			
naloxone syringe			P
naloxone vial			P
Narcan spray			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

Opioid Dependency and Alcohol Abuse/Dependency Agents (cont)			
Vivitrol injection*	DR	SCN	P
*Policy for obtaining provider-administered drugs applies. Refer to topic #5697.			
Otics, Antibiotics			
neomycin/polymyxin/HC			P
ofloxacin			P
Cipro HC			P
Coly-mycin S			P
ciprofloxacin			NP
Ciprodex*			NP
Cortisporin TC			NP
Otovel			NP
*Prior Authorization not required for members 6 years of age and younger.			
Otics, Anti-Infectives & Anesthetics			
acetic acid			P
acetic acid/aluminum			NP
acetic acid HC			NP
Pancreatic Enzymes			
Pancrelipase 5,000 DR	SCN		P
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 tablet			P
Eliphos			P
Phoslyra	SCN		P

Phosphate Binders (cont)			
Renegel			P
calcium acetate 667mg capsule			NP
lanthanum carbonate			NP
sevelamer powder pack			NP
sevelamer tab			NP
Auryxia	SCN		NP
Fosrenol			NP
Magnebind			NP
Renvela			NP
Velphoro	SCN		NP
Platelet Aggregation Inhibitors			
aspirin	SCN		P
clopidogrel			P
dipyridamole			P
Aggrenox			P
Brilinta			P
aspirin/dipyridamole			NP
ticlopidine			NP
Durlaza	SCN		NP
Effient			NP
prasugrel			NP
Yospala	SCN		NP
Zontivity			NP
Proton Pump Inhibitors			
lansoprazole RX			P
omeprazole RX			P
pantoprazole			P
Nexium			P
Prilosec suspension			P
Protonix suspension			P
esomeprazole DR			NP
omeprazole-bicarb RX			NP
rabeprazole			NP
Aciphex Sprinkle DR caps			NP
Dexilant DR 30mg			NP
Dexilant DR 60mg			NP

Proton Pump Inhibitors (cont)			
Prevacid SoluTab 15mg			NP
Prevacid SoluTab 30mg			NP
Zegerid			NP
Pulmonary Arterial Hypertension			
sildenafil	DR		P
Adcirca	DR	SCN	P
Letairis			P
Tracleer tablet			P
Adempas			NP
Opsumit			NP
Orenitram ER		SCN	NP
Revatio suspension	DR		NP
Tracleer suspension			NP
Tyvaso		SCN	NP
Uptravi			NP
Ventavis		SCN	NP
Sedative Hypnotics			
estazolam			P
eszopiclone			P
temazepam 15mg			P
temazepam 30mg			P
triazolam			P
zaleplon			P
zolpidem			P
Rozerem			P
flurazepam			NP
temazepam 7.5mg			NP
temazepam 22.5mg			NP
zolpidem ER			NP
zolpidem SL			NP
Belsomra			NP
Edluar			NP
Intermezzo			NP
Silenor			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

Revised 02/06/2018 (Effective 02/01/2018)

Skeletal Muscle Relaxants		
baclofen		P
chlorzoxazone		P
cyclobenzaprine		P
dantrolene sodium		P
methocarbamol		P
tizanidine tablets		P
carisoprodol		NP
carisoprodol compound		NP
cyclobenzaprine 7.5mg tablet		NP
metaxalone		NP
orphenadrine		NP
tizanidine capsules		NP
Amrix		NP
Dantrium		NP
Fexmid		NP
Lorzone	SCN	NP
Soma		NP
Steroids, Topical Low		
fluocinolone oil		P
hydrocortisone		P
Scalpicin 1% liquid		
alclometasone dipropionate cream		NP
alclometasone dipropionate oint		NP
desonide cream/oint		NP
desonide lotion		NP
hydrocortisone acetate/urea		NP
hydrocortisone-aloe 2%		NP
Capex Shampoo	SCN	NP
Derma-Smothe-FS		NP
Desonate		NP
Texacort		NP
Steroids, Topical Medium		
fluticasone cream/ointment		P
mometasone furoate		P
betamethasone valerate foam		NP

Steroids, Topical Medium (cont)		
clocortolone		NP
flurandrenolide lotion		NP
flurandrenolide ointment		NP
fluticasone lotion		NP
fluocinolone acetonide		NP
fluocinolone 0.01% soln		NP
hydrocortisone butyrate lipid cream	SCN	NP
hydrocortisone butyrate		NP
hydrocortisone valerate		NP
prednicarbate		NP
Cloderm		NP
Cordran Tape		NP
Cutivate lotion		NP
Dermatop		NP
Luxiq		NP
Pandel		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
fluocinolone-e		NP
Diprolene ointment		NP
Halog		NP
Kenalog aerosol spray		NP
Sernivo 0.05% spray	SCN	NP
Topicort 0.05% ointment		NP
Topicort 0.25% spray		NP
Trianex		NP
Steroids, Topical Very High		
clobetasol cream/foam/oint/solution/gel/emollient		P

Steroids, Topical Very High (cont)		
halobetasol propionate		P
Clobex Lotion	SCN	P
Clobex Shampoo	SCN	P
betamethasone dipropionate aug		NP
clobetasol lotion		NP
clobetasol shampoo		NP
clobetasol spray		NP
Apexicon E		NP
Clobex spray		NP
Olux-E		NP
Ultravate lotion	SCN	NP
Stimulants		
dexmethylphenidate	DR	P
methylphenidate tab	DR	P
methylphenidate CD	DR	P
methylphenidate chew tab	DR	P
methylphenidate ER tab (Gen-Metadate ER)	DR	P
methylphenidate ER capsule	DR	P
methylphenidate solution	DR	P
Aptensio XR	DR	P
Concerta	DR	P
Daytrana	DR	P
Focalin	DR	P
Focalin XR	DR	P
Metadate CD	DR	P
Metadate ER tablet	DR	P
Methylin solution	DR	P
Quillichew ER	DR	P
Quillivant XR	DR	P
Vyvanse*	DR	P
Vyvanse chewable*	DR	P
amphetamine salt combo*	DR	NP
amphetamine salt combo ER	DR	NP
dexmethylphenidate ER Cap	DR	NP

Stimulants (cont)			
dextroamphetamine *	DR	NP	
dextroamphetamine ER	DR	NP	
dextroamphetamine solution*	SCN	DR	NP
methylphenidate ER tablet (Gen-Concerta)	DR	NP	
methamphetamine	DR	NP	
Adderall XR	DR	NP	
Adzenys XR ODT	SCN	DR	NP
Cotempla XR	DR	NP	
Dexedrine*	DR	NP	
Dyanavel XR	SCN	DR	NP
Evekeo*	DR	NP	
Mydayis ER	DR	NP	
Procentra*	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 tab	SCN	P	
guanfacine ER		P	
Kapvay		P	
armodafinil		NP	
modafinil		NP	
Nuvigil		NP	
Ulcerative Colitis			
balsalazide		P	
sulfasalazine		P	
Apriso	SCN	P	
Canasa		P	
Lialda		P	
Rowasa		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

Revised 02/06/2018 (Effective 02/01/2018)

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

Brand Name Drugs with Generic Copay	
Drug Name	Start Date
Adderall XR	01/01/2012
Aldara	01/01/2014
Alphagan P 0.15%	01/01/2012
Catapres -TTS	01/01/2014
Differin 0.1% Cream	01/01/2012
Concerta	01/01/2018
Differin 0.3% gel pump	02/01/2017
Nexium	07/01/2016
Pulmicort respules	01/01/2016
Retin-A	07/01/2016
Tegretol tablet	01/01/2016
Tegretol suspension	01/01/2016
Tegretol XR 100mg	04/06/2016
Tegretol XR 200mg	01/01/2012
Tegretol XR 400 mg	01/01/2012
Tobradex suspension	01/01/2012
Zetia	07/01/2017

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