

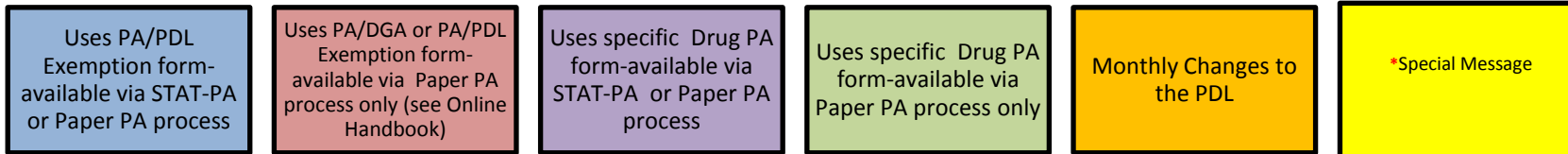
Wisconsin Medicaid, BadgerCare Plus Standard, and SeniorCare Preferred Drug List- Quick Reference

(Effective 03/01/2012)

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



- 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.
- The PDL policies do not apply to BadgerCare Plus Benchmark Plan or Basic Plan members. Providers may refer to the Product Lists on the Pharmacy page of the Providers area of the Portal.
- Providers may refer to the data tables on the Pharmacy page of the Providers area of the Portal for more information:
<https://www.forwardhealth.wi.gov/WIPortal/Tab/42/icscontent/provider/medicaid/pharmacy/resources.htm.spage>
- Prior Authorization forms are available at:
<https://www.forwardhealth.wi.gov/WIPortal/Content/provider/forms/index.htm.spage>

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

(Effective 03/01/2012)

Acne Agents		
benprox		P
benzoyl peroxide		P
clindamycin		P
erythromycin		P
tretinoin		P
Azelex		P
Differin		P
Retin-A micro		P
adapalene 0.1% cream		NP
adapalene 0.1% gel		NP
clindamycin/benzoyl peroxide		NP
erythromycin/benzoyl peroxide		NP
sulfacetamide		NP
sulfacetamide/sulfur		NP
Aczone		NP
Akne-mycin		NP
Atralin		NP
Benzaclin		NP
Benzafoam		NP
Clarifoam EF		NP
Clinac BPO		NP
Clindagel	SCN	NP
Clindareach		NP
Delos 3.5%	SCN	NP
Differin 0.1% lotion	SCN	NP
Differin 0.3%gel	SCN	NP
Epiduo		NP
Garimide	SCN	NP
Klaron		NP
Lavoclen		NP
Neobenz Micro 7% wash		NP
Nuox	SCN	NP
Tazorac		NP
Triaz	SCN	NP
Veltin		NP
Zaclir		NP
Ziana		NP

Acne Agents (cont)		
Zoderm		NP
Alzheimer's Agents		
donepezil 5mg		P
donepezil 10mg		P
donepezil 5mg ODT		P
donepezil 10mg ODT		P
Exelon		P
Exelon patch		P
Namenda		P
Aricept 23mg		NP
Exelon solution		NP
galantamine		NP
galantamine ER		NP
galantamine solution		NP
rivastigmine capsules		NP
Razadyne Solution		NP
Analgesics/Anesthetics, Topical		
capsaicin OTC	SCN	P
Voltaren		P
Flector		NP
Lidoderm		NP
Pennsaid 1.5% Solution		NP
Analgesics, Miscellaneous		
acetaminophen	SCN	P
aspirin	SCN	P
ibuprofen OTC	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
Orbivan		NP
Analgesics, Opioids Long-Acting		
fentanyl transdermal		P
methadone		P

Analgesics, Opioids Long-Acting (cont)		
morphine ER tablets		P
Kadian	SCN	P
morphine ER capsules		NP
oxycodone ER		NP
oxymorphone ER		NP
tramadol ER		NP
Avinza		NP
Butrans transdermal		NP
Conzip ER	SCN	NP
Embeda		NP
Exalgo ER		NP
Nucynta ER		NP
Opana ER		NP
Oxycontin		NP
Ryzolt ER		NP
Ultram ER 300mg		NP
Analgesics, Opioids Short-Acting		
codeine		P
codeine/apap		P
codeine/asa		P
hydromorphone		P
hydrocodone/apap		P
hydrocodone/ibuprofen		P
morphine		P
oxycodone		P
oxycodone/apap		P
tramadol		P
dihydrocodeine/apap/caffeine		NP
levorphanol		NP
meperidine		NP
oxycodone/asa		NP
oxycodone/ibuprofen		NP
oxymorphone		NP
pentazocine/apap		NP
pentazocine/naloxone		NP
tramadol/apap		NP

Analgesics, Opioids Short-Acting (cont)		
Cocet Plus		NP
Dilaudid Liquid		NP
Ibudone		NP
Lynox		NP
Magnacet		NP
Nucynta		NP
Oxecta		NP
Panlor DC		NP
Panlor SS		NP
Reprexain		NP
Rybix ODT		NP
Synalgos-DC		NP
Trezix		NP
Xodol		NP
Zamicet		NP
Zolvit		NP
Analgesics, Opioids Short-Acting-Fentanyl Mucosal Agents		
fentanyl citrate oral transmucosal lozenges		NP
Abstral	SCN	NP
Fentora		NP
Onsolis		NP
Androgenic Agents		
Androderm		P
Androgel		P
Axiron		NP
Fortesta		NP
Testim		NP
Angiotensin Modulators, ACE Inhibitors		
benazepril		P
benazepril/HCTZ		P
captopril		P
captopril/HCTZ		P
enalapril		P
enalapril/HCTZ		P
lisinopril		P

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

Uses PA/DGA or PA/PDL Exemption form available via Paper PA process only (see Online Handbook)

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

*Special Message

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

(Effective 03/01/2012)

Angiotensin Modulators, ACE Inhibitors (cont)		
lisinopril/HCTZ		P
quinapril		P
quinapril /HCTZ		P
ramipril		P
fosinopril		NP
fosinopril/HCTZ		NP
moexipril		NP
moexipril /HCTZ		NP
perindopril		NP
trandolapril		NP
Angiotensin Modulators, ARBs and DRIs		
losartan		P
losartan /HCTZ		P
Diovan		P
Diovan/HCTZ		P
eprosartan mesylate		NP
Atacand		NP
Atacand /HCTZ		NP
Avalide		NP
Avapro		NP
Benicar		NP
Benicar /HCTZ		NP
Edarbi		NP
Edarbyclor		NP
Micardis		NP
Micardis/HCTZ		NP
Tekturma		NP
Tekturma /HCTZ		NP
Teveten		NP
Teveten /HCTZ		NP
Angiotensin Modulators , Combination		
Azor		P
Exforge		P
Exforge /HCTZ		P
Tarka		P
Tribenzor		P
Valturna		P

Angiotensin Modulators , Combination (cont)		
amlodipine/benazepril		NP
trandolapril / verapamil		NP
Amturide		NP
Tekamlo		NP
Twynsta		NP
Antibiotics, Beta-Lactam		
amoxicillin		P
amoxicillin clavulanate		P
amoxicillin clavulanate 250mg susp		P
ampicillin		P
cefaclor		P
cefadroxil		P
cefdinir		P
cephalexin		P
cefprozil		P
cefuroxime		P
cefuroxime 125 susp		P
cefuroxime 250 susp		P
dicloxacillin		P
oxacillin		P
penicillin		P
Augmentin 125 susp		P
Augmentin 250 susp		P
Ceftin 125 susp	SCN	P
Ceftin 250 susp	SCN	P
Suprax		P
amoxicillin clavulanate XR		NP
cefditoren pivoxil	SCN	NP
cefpodoxime		NP
Cedax		NP
Spectracef		NP
Antibiotics, GI		
metronidazole		P
neomycin		P
Alinia	SCN	P
Tindamax		P

Antibiotics, GI (cont)		
Vancocin	SCN	P
Difucid	SCN	NP
Flagyl ER		NP
Xifaxan		NP
Antibiotics, Inhaled		
Tobi		P
Cayston		NP
Antibiotics, Vaginal		
clindamycin		P
metronidazole		P
Cleocin ovule		P
Vandazole		P
Clindesse		NP
Anticonvulsants		
carbamazepine		P
clonazepam tablets		P
divalproex		P
divalproex ER		P
ethosuximide		P
gabapentin		P
lamotrigine		P
lamotrigine dispers tabs		P
levetiracetam		P
levetiracetam solution		P
levetiracetam ER		P
mephobarbital		P
oxcarbazepine		P
oxcarbazepine susp		P
phenobarbital		P
phenytoin		P
primidone		P
topiragen		P
topiramate		P
topiramate sprinkle		P
valproic acid		P
zonisamide		P
Carbatrol		P
Celontin		P

Anticonvulsants (cont)		
Depakote Sprinkle		P
Diastat		P
Dilantin Infatab		P
Felbatol		P
Gabitril		P
Lamictal Starter Kits		P
Lyrica		P
Mebaral	SCN	P
Peganone		P
Tegretol XR		P
carbamazepine ER capsule		NP
carbamazepine XR 200mg		NP
carbamazepine XR 400mg		NP
clonazepam ODT		NP
diazepam rectal		NP
divalproex sprinkles		NP
felbamate		NP
felbamate susp		NP
Banzel		NP
Equetro		NP
Gralise ER	SCN	NP
Lamictal ODT	SCN	NP
Lamictal XR	SCN	NP
Onfi	DR SCN	NP
Phenytek		NP
Stavzor		NP
Sabril		NP
Vimpat		NP
Vimpat solution		NP
Antidepressants, Other		
bupropion		P
bupropion SR		P
mirtazapine		P
tranylcypromine sulfate		P
trazodone		P
venlafaxine		P
Effexor XR		P
Marplan		P

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

Uses PA/DGA or PA/PDL Exemption form available via Paper PA process only (see Online Handbook)

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

*Special Message

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

(Effective 03/01/2012)

Antidepressants, Other (cont)		
Nardil		P
Wellbutrin XL		P
bupropion XL		NP
nefazodone		NP
phenelzine		NP
venlafaxine ER capsules		NP
venlafaxine ER tablets		NP
Aplenzin		NP
Cymbalta		NP
Emsam	SCN	NP
Oleptro ER	SCN	NP
Pristiq		NP
Venlafaxine ER tablets		NP
Viibryd		NP
Antidepressants, SSRI		
citalopram		P
fluoxetine		P
fluvoxamine		P
paroxetine		P
sertraline		P
Paxil suspension		P
fluoxetine weekly		NP
paroxetine CR		NP
Lexapro		NP
Luvox CR		NP
Pexeva		NP
Antiemetics		
metoclopramide		P
ondansetron		P
ondansetron ODT		P
ondansetron solution	DR	P
prochlorperazine		P
prochlorperazine supp		P
trimethobenzamide caps		P
Emend		P
granisetron		NP
Anzemet		NP
Metozolv ODT		NP

Antiemetics (cont)		
Sancuso		NP
Zuplenz		NP
Antiemetics/Antivertigo		
dimenhydrinate OTC	SCN	P
meclizine		P
meclizine OTC	SCN	P
promethazine		P
promethazine supp		P
promethazine syrup		P
Transderm-Scop	SCN	P
Antiemetics, Cannabinoids		
Marinol		P
dronabinol		NP
Cesamet		NP
Antifungals, Oral		
fluconazole		P
griseofulvin		P
itraconazole	DR	P
ketoconazole tablets		P
nystatin		P
terbinafine	DR	P
Gris-Peg		P
clotrimazole troche		NP
flucytosine		NP
voriconazole 50mg		NP
voriconazole 200mg		NP
Ancobon		NP
Grifulvin V Tablets		NP
Lamisil granules	DR	NP
Noxafil		NP
Oravig		NP
Sporanox (liquid)	DR	NP
Antifungals, Topical		
clotrimazole OTC	SCN	P
clotrimazole Rx		P
clotrimazole/betamethasone		P
ketoconazole cream		P
ketoconazole shampoo		P

Antifungals, Topical (cont)		
miconazole OTC	SCN	P
nystatin		P
nystatin/triamcinolone		P
tolnaftate OTC	SCN	P
ciclopirox cream		NP
ciclopirox gel		NP
ciclopirox shampoo		NP
ciclopirox suspension		NP
econazole nitrate		NP
ketoconazole foam		NP
Bensal HP		NP
CNL 8		NP
Ertaczo		NP
Exelderm		NP
Extina		NP
Mentax		NP
Naftin		NP
Nuzole 2%	SCN	NP
Oxistat		NP
Vusion		NP
Xolegel		NP
Xolegel Duo		NP
Xolegal Corepak		NP
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
levocetirizine		NP
Allegra ODT		NP
Allegra Syrup		NP
Clarinx	SCN	NP
Clarinx D	SCN	NP
Clarinx Syrup	SCN	NP
Semprex-D		NP
Xyzal Syrup		NP

Antiparasitics, Topical (cont)			
permethrin OTC	SCN	P	
permethrin Rx		P	
malathion		NP	
Eurax		NP	
Lindane		NP	
Natroba	SCN	NP	
Ulesfia		NP	
Antiparkinson's Agents			
benztropine		P	
bromocriptine		P	
carbidopa/levodopa		P	
carbidopa/levodopa ODT		P	
pramipexole		P	
ropinirole		P	
selegiline		P	
trihexyphenidyl		P	
Stalevo		P	
Azilect	SCN	NP	
Comtan		NP	
Mirapex ER	DR	NP	
Neupro patches		NP	
Requip XL	DR	SCN	NP
Tasmar		NP	
Zelapar		NP	
Antipsychotics			
*PA required for children 6 years of age and younger. Use PA Drug Attachment for Antipsychotic Drugs for Children 6 Years of Age and Younger.			
amitriptyline/perphenazine*		P	
chlorpromazine*		P	
clozapine*		P	
fluphenazine*		P	
haloperidol*		P	
perphenazine*		P	
risperidone*		P	
thiothixene*		P	

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

Uses PA/DGA or PA/PDL Exemption form available via Paper PA process only (see Online Handbook)

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

*Special Message

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

(Effective 03/01/2012)

Antipsychotics (cont)		
trifluoperazine*		P
Geodon*		P
Orap*		P
Seroquel*		P
olanzapine*		NP
olanzapine ODT*		NP
thioridazine*		NP
Abilify*		NP
Fanapt*		NP
Fazaclo*	SCN	NP
Invega*		NP
Invega ER*		NP
Latuda*		NP
Saphris*		NP
Seroquel XR*		NP
Symbyax*		NP
Zyprexa*		NP
*PA required for children 6 years of age and younger. Use PA Drug Attachment for Antipsychotic Drugs for Children 6 Years of Age and Younger.		
Antithrombotic Agents, LMWHs and Xa Inhibitors		
Lovenox		P
Arixtra	SCN	P
Fragmin		P
enoxaparin		NP
fondaparinux		NP
Innohep		NP
Xarelto		NP
Antithrombotic Agents, Oral		
aspirin	SCN	P
warfarin		P
Pradaxa		NP
Antivirals, Influenza		
amantadine		P
rimantadine		P
Relenza	SCN	P

Antivirals, Influenza (cont)		
Tamiflu	SCN	P
Antivirals, other		
acyclovir		P
valacyclovir		P
famciclovir		NP
Antivirals, Topical		
Denavir		P
Zovirax Ointment		P
Xerese		NP
Zovirax Cream		NP
BPH Agents, alpha reductase inhibitors		
finasteride		P
Avodart	SCN	NP
Jalyn	SCN	NP
BPH Agents ,andrenergic		
doxazosin		P
tamsulosin		P
terazosin		P
alfuzosin		NP
Cardura XL		NP
Rapaflo		NP
Beta Blockers		
acebutolol		P
atenolol		P
atenolol/chlorthalidone		P
bisoprolol		P
bisoprolol/HCTZ		P
carvedilol		P
labetalol		P
metoprolol		P
metoprolol/HCTZ		P
nadolol, bendroflumethiazide		P
pindolol		P
propranolol		P
propranolol ER		P
propranolol/HCTZ		P
sotalol		P
timolol		P

Beta Blockers (cont)		
Toprol XL		P
betaxolol		NP
metoprolol ER		NP
Bystolic		NP
Coreg CR	SCN	NP
Dutoprol		NP
Innopran XL	SCN	NP
Levator		NP
Bile Salts		
ursodiol		P
Actigall		NP
Chenodal		NP
Urso		NP
Urso Forte		NP
Bladder Relaxant Preparations		
oxybutynin		P
oxybutynin syrup		P
Toviaz		P
VesiCare		P
oxybutynin ER*		NP
tropium		NP
Detrol, LA		NP
Enablex		NP
Gelnique		NP
Oxytrol		NP
Sanctura		NP
Sanctura XR		NP
* Prior Authorization not required for members age 18 and under		
Bone Resorption Suppression		
alendronate		P
calcitonin-salmon nasal		P
Miacalcin		P
etidronate		NP
Actonel		NP
Atelvia	SCN	NP
Boniva	SCN	NP
Didronel		NP

Bone Resorption Suppression (cont)		
Evista		NP
Fortical		NP
Fosamax solution		NP
Fosamax Plus D		NP
Bronchodilators, Beta Agonists		
albuterol		P
albuterol ER		P
albuterol (2.5mg/0.5ml)		P
albuterol (2.5mg/3ml)		P
terbutaline		P
Foradil		P
Maxair		P
Proair HFA		P
Proventil HFA		P
albuterol nebulizer low-dose (0.63mg/3ml)		NP
albuterol nebulizer low dose (1.25/3ml)*		NP
levalbuterol 1.25/0.5ml		NP
metaproterenol		NP
Arcapta		NP
Brovana		NP
Perforomist		NP
Serevent	SCN	NP
Ventolin HFA	SCN	NP
Xopenex		NP
Xopenex HFA		NP
*Prior Authorization not required for members age 12 and under		
Calcium Channel Blocking Agents		
amlodipine		P
diltiazem		P
diltiazem ER capsules		P
nicardipine		P
nifedipine ER		P
nimodipine		P
verapamil		P
verapamil ER		P

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

Uses PA/DGA or PA/PDL Exemption form available via Paper PA process only (see Online Handbook)

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

*Special Message

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

(Effective 03/01/2012)

Calcium Channel Blocking Agents (cont)		
verapamil SR		P
Dynacirc CR	SCN	P
diltiazem ER tablets		NP
felodipine ER		NP
isradipine		NP
nifedipine IR		NP
nisoldipine		NP
verapamil ER PM		NP
Cardene SR		NP
Cardizem LA		NP
Covera-HS		NP
Matzim LA		NP
Colony Stimulating Factors		
Neupogen		P
Leukine		NP
Neulasta		NP
COPD Agents		
ipratropium nebulizer		P
ipratropium/albuterol neb		P
Atrovent HFA		P
Combivent		P
Spiriva		P
Daliresp		NP
Cough and Cold –Narcotic Liquids		
brompheniramin / phenylephrine/ dihydrocodeine		P
brompheniramine/ pseudoephedrine/ dihydrocodeine		P
brompheniramine/ pseudoephedrine/ codeine		P
chlorpheniramine/ phenylephrine/ dihydrocodeine		P
guaifenesin/ codeine		P

Cough and Cold –Narcotic Liquids (cont)		
guaifenesin/ pseudoephedrine/ dihydrocodeine		P
phenylephrine/ promethazine/ codeine		P
promethazine/ codeine/		P
pseudoephedrine/ chlorpheniramine/ dihydrocodeine		P
brompheniramine/ codeine		NP
chlorpheniramine/ codeine		NP
chlorpheniramine/ pseudoephedrine/ codeine		NP
dexchlorpheniramine/ phenylephrine/ codeine		NP
diphenhydramine/ phenylephrine/ codeine		NP
guaifenesin/ dihydrocodeine		NP
hydrocodone/ chlorpheniramine		NP
hydrocodone/ homatropine		NP
phenylephrine/ codeine		NP
phenylephrine/ guaifenesin/ codeine		NP
phenylephrine/ dihydrocodeine		NP
pseudoephedrine / codeine		NP
pseudoephedrine / hydrocodone		NP

Cough and Cold –Narcotic Liquids (cont)		
pseudoephedrine/ guaifenesin/ codeine		NP
pyrilamine maleate/ phenylephrine/ codeine		NP
pyrilamine maleate/ codeine		NP
Centussin DHC		NP
Tussionex		NP
Cytokine and CAM Antagonists		
Cimzia		P
Enbrel	SCN	P
Humira		P
Kineret		NP
Orencia		NP
Simponi		NP
Epinephrine, Self Injected		
Epipen		P
Epipen JR		P
Twinject		P
Erythropoiesis Stimulating Proteins		
Aranesp	DR	P
Procrit	DR	P
Epogen	DR	NP
Fibromyalgia		
Lyrica		P
Savella		P
Cymbalta		NP
Fluoroquinolones		
ciprofloxacin		P
levofloxacin tablets		P
ciprofloxacin ER		NP
levofloxacin solution		NP
ofloxacin		NP
Avelox	SCN	NP
Cipro suspension		NP
Factive	SCN	NP

Fluoroquinolones (cont)		
Levaquin solution		NP
Noroxin		NP
Proquin XR	SCN	NP
Glucocorticoids, Inhaled		
Advair Diskus	SCN	P
Advair HFA	SCN	P
Aerobid	SCN	P
Aerobid M	SCN	P
Asmanex		P
Azmacort	SCN	P
Dulera		P
Flovent Diskus	SCN	P
Flovent HFA	SCN	P
Qvar		P
Symbicort		
budesonide respules 0.25mg/2ml**		NP
budesonide respules 0.5mg/2ml**		NP
Alvesco Inhaler		NP
Pulmicort Flexhaler		NP
Pulmicort Respules 0.25mg/2ml**		NP
Pulmicort Respules 0.5mg/2ml**		NP
Pulmicort Respules 1mg/2ml**		NP
**Prior authorization is not required for members age 8 and under		
Gout Agents		
allopurinol		P
indomethacin		P
naproxen Rx		P
probenecid		P
probenecid/colchicine		P
Colcrys		NP
Uloric		NP

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

Uses PA/DGA or PA/PDL Exemption form available via Paper PA process only (see Online Handbook)

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

*Special Message

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

(Effective 03/01/2012)

Growth Hormone			
Genotropin			P
Norditropin			P
Nutropin			P
Nutropin AQ			P
Nutropin AQ Nuspin			P
Humatrope			NP
Omnitrope			NP
Saizen			NP
Serostim			NP
Tev-Tropin			NP
Zorbtive			NP
Hepatitis B Agents			
Baraclude			P
Epivir HBV	SCN		P
Hepsera			P
Tyzeka			P
Hepatitis C Agents			
ribavirin	DR		P
Incivek	DR		P
Pegasys	DR		P
Peg-Intron Redipen	DR		P
Victrelis	DR		P
Infergen	DR	SCN	NP
Ribapak	DR		NP
Ribasphere	DR		NP
HIV-AIDS			
CCR5 Antagonist			
Selzentry			NP
Combination			
Atripla			P
Combivir			P
Complera			P
Epzicom			P
Kaletra			P
Trizivir			P
Truvada			P
lamivudine / zidovudine			NP

HIV-AIDS			
Fusion Inhibitor-(FI)			
Fuzeon			NP
Integrase Inhibitor			
ISENTRESS			P
Nucleoside Reverse Transcriptase Inhibitors(NRTIs)			
didanosine			P
stavudine			P
zidovudine			P
Emtriva			P
Epivir			P
Videx			P
Ziagen			P
lamivudine			NP
Nucleotide Reverse Transcriptase Inhibitor (NRTI)			
Viread			P
Non-Nucleoside Reverse Transcriptase Inhibitors (NNRTIs)			
Eduvant			P
Sustiva			P
Viramune			P
Intelence			NP
Rescriptor			NP
Protease Inhibitors (PIs)			
Crixivan			P
Invirase			P
Lexiva			P
Norvir			P
Prezista			P
Reyataz			P
Aptivus			NP
Viracept			NP
Hypoglycemics, Alpha-Glucosidase Inhibitors			
acarbose			P
Glyset			P

Hypoglycemics,DPP-4 Inhibitors			
Janumet			P
Januvia			P
Kombiglyze XR			P
Onglyza			P
Janumet XR			NP
Jentadueto			NP
Juvisync			NP
Tradjenta			NP
Hypoglycemics, GLP 1			
Bydureon	DR		NP
Byetta	DR		NP
Victoza	DR		NP
Hypoglycemics, Insulins			
Humalog Mix			P
Humalog			P
Humulin			P
Lantus			P
Apidra			NP
Levemir			NP
Novolin	SCN		NP
Novolog			NP
Novolog Mix			NP
Hypoglycemics, Meglitinides			
Prandin			P
nateglinide			NP
Prandimet			NP
Hypoglycemics, Other			
metformin			P
metformin ER			P
Fortamet			NP
Welchol			NP
Hypoglycemics, Sulfonylureas			
chlorpropamide			P
glimepiride			P
glipizide			P
glipizide/metformin			P
glyburide			P

Hypoglycemics, Sulfonylureas (cont)			
glyburide/metformin			P
tolazamide			P
tolbutamide			P
Hypoglycemics, Symlin			
Symlin	DR		NP
Symlin Pen	DR		NP
Hypoglycemics, Thiazolidinediones			
Actos			P
Actoplus MET			NP
Actoplus MET XR			NP
Avandamet			NP
Avandaryl	SCN		NP
Avandia			NP
Duetact			NP
Intranasal Rhinitis Agents			
fluticasone			P
ipratropium			P
Astelin			P
Astepro			P
Beconase AQ	SCN		P
Nasacort AQ			P
Nasonex			P
Patanase			P
azelastine			NP
flunisolide			NP
triamcinolone			NP
Omnaris			NP
Rhinocort Aqua			NP
Veramyst	SCN		NP
Leukotriene Modifiers			
Singulair			P
Singulair Gran Pack			NP
zafirlukast			NP
Zyflo CR			NP
Lipotropics, Bile Acid Sequestrants			
cholestyramine			P
colestipol			NP
Welchol			NP

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

Uses PA/DGA or PA/PDL Exemption form available via Paper PA process only (see Online Handbook)

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

*Special Message

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

(Effective 03/01/2012)

Lipotropics, Fibric Acids			
gemfibrozil			P
Tricor			P
Trilipix			P
fenofibrate			NP
fenofibric acid			NP
Antara			NP
Fenoglide			NP
Fibracor			NP
Lipofen			NP
Triglide			NP
Lipotropics, Lovaza			
Lovaza	SCN	DAPO	NP
Lipotropics, Niacin			
Niacor			P
Niaspan			P
Lipotropics, Other			
Vytorin			NP
Zetia			NP
Lipotropics, Statins			
lovastatin			P
pravastatin			P
simvastatin			P
Crestor			P
Lescol			P
Lescol XL			P
Lipitor			P
amlodipine / atorvastatin			NP
atorvastatin			NP
Advicor			NP
Altoprev			NP
Caduet			NP
Livalo			NP
Simcor			NP
Macrolides/Ketolides			
azithromycin			P
clarithromycin			P
erythromycin			P
Ery-Tab			P

Macrolides/Ketolides (cont)			
clarithromycin ER			NP
Ketek			NP
Zmax			NP
Migraine Agents, Other			
naratriptan			P
sumatriptan tablets			P
sumatriptan nasal spray			P
Axert			NP
Cambia			NP
Frova			NP
Maxalt			NP
Maxalt MLT			NP
Relpax			NP
Treximet	SCN		NP
Zomig			NP
Zomig Nasal			NP
Zomig ZMT			NP
Migraine Agents, Injectable			
sumatriptan injectable			P
Sumavel	SCN		NP
Multiple Sclerosis Agents, Immunomodulators			
Avonex	DR	SCN	P
Betaseron	DR		P
Copaxone	DR	SCN	P
Rebif	DR		P
Extavia	DR		NP
Gilenya	DR		NP
Multiple Sclerosis Agents, Other			
Ampyra ER	DR	SCN	NP
NSAIDs			
diclofenac potassium			P
diclofenac sodium			P
diclofenac ER			P
etodolac			P
flurbiprofen			P
ibuprofen Rx			P
indomethacin			P
indomethacin supp			P

NSAIDs (cont)			
ketoprofen			P
ketorolac			P
meloxicam tablets			P
oxaprozin			P
naproxen Rx			P
naproxen DS Rx			P
naproxen sodium Rx			P
piroxicam			P
sulindac			P
diflunisal			NP
etodolac XL			NP
fenoprofen			NP
indomethacin ER			NP
ketoprofen ER			NP
meclufenamate			NP
mefenamic acid			NP
meloxicam suspension			NP
nabumetone			NP
tolmetin			NP
tolmetin DS			NP
Arthrotec			NP
Celebrex			NP
Duexis	SCN		NP
Indocin suspension			NP
Ponstel			NP
Sprix	SCN		NP
Vimovo			NP
Zipsor			NP
Ophthalmics, Allergic Conjunctivitis			
cromolyn			P
Alrex			P
Optivar			P
Pataday			P
azelastine			NP
epinastine			NP
ketorolac			NP
Acular PF			NP
Alamast			NP

Ophthalmics, Allergic Conjunctivitis (cont)			
Alocril			NP
Alomide			NP
Bepreve			NP
Elestat			NP
Emadine			NP
Lastacaft			NP
Patanol			NP
Ophthalmics, Antibacterial			
ciprofloxacin solution			P
erythromycin			P
gentamicin			P
ofloxacin			P
polymyxin/trimethoprim			P
sulfacetamide			P
tobramycin			P
Besivance			P
Ciloxan ointment			P
Zymar			P
Tobrex ointment			P
Vigamox			P
bacitracin			NP
bacitracin/polymyxin			NP
levofloxacin			NP
neomycin/bacitracin/polymyxin ointment			NP
neomycin/polymyxin/gramicidin			NP
triple antibiotic			NP
Azasite			NP
Iquix			NP
Moxeza			NP
Natacyn			NP
Quixin			NP
Zymaxid			NP

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

Uses PA/DGA or PA/PDL Exemption form available via Paper PA process only (see Online Handbook)

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

*Special Message

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

(Effective 03/01/2012)

Ophthalmics, Antibiotic-Steroid Combinations		
neomycin/polymyxin/dexamethasone		P
sulfacetamide/prednisolone		P
Blephamide		P
Blephamide S.O.P.		P
Pred-G ointment		P
Pred-G drops		P
Tobradex suspension		P
Tobradex ointment		P
Zylet		P
neomycin/bacitracin/poly/Hc		NP
tobramycin/dexamethasone		NP
neomycin/polymyxin/Hc		NP
Tobradex ST		NP
Ophthalmics, Anti-inflammatories		
dexamethasone		P
diclofenac		P
fluorometholone		P
flurbiprofen		P
prednisolone acetate		P
Flarex		P
FML Forte		P
FML SOP		P
Lotemax solution		P
Maxidex		P
Pred Forte		P
Pred Mild		P
bromfenac		NP
ketorolac LS		NP
prednisolone sod phosphate		NP
Acuvail		NP
Bromday		NP
Durezol		NP
Lotemax ointment		NP
Nevanac		NP
Vexol		NP
Ophthalmics, Glaucoma-Beta Blockers		
betaxolol		P

Ophthalmics, Glaucoma-Beta Blockers (cont)			
carteolol		P	
levobunolol		P	
metipranolol		P	
timolol		P	
Betimol		P	
Betoptic S		P	
Istalol		NP	
Timoptic Ocudose		NP	
Ophthalmics, Glaucoma-Other			
brimonidine 0.2%		P	
dipivefrin		P	
dorzolamide		P	
dorzolamide w/ timolol		P	
pilocarpine		P	
Alphagan P 0.15%		P	
Azopt		P	
Combigan		P	
brimonidine tartrate 0.15%		NP	
Alphagan P 0.1%		NP	
lopidine		NP	
Ophthalmics, Glaucoma-Prostaglandins			
Travatan Z		P	
latanoprost		NP	
Lumigan 2.5 ml		NP	
Lumigan 5 ml		NP	
Lumigan 7.5 ml		NP	
Opioid Dependency Agents			
buprenorphine	DR	P	
Suboxone SL Film	DR	SCN	P
Suboxone tablets	DR	SCN	P
Otics, Antibiotics			
neomycin/polymyxin/hc		P	
ofloxacin		P	
Cipro HC		P	
Ciprodex		P	
Coly-mycin S		P	
Cetralax		NP	

Otics, Antibiotics (cont)		
Cortisporin TC		NP
Otics, Anti-Infectives & Anesthetics		
acetic acid		P
acetic acid HC		P
acetic acid/aluminum		P
antipyrine/benzocaine		P
Pinnacaine		P
Pramotic		P
Borofair		NP
Myoxin		NP
Neotic		NP
Otozin		NP
Otic Care		NP
PR Otic solution		NP
Treagan		NP
Trioxin		NP
Zinotic		NP
Zinotic ES		NP
Pancreatic Enzymes		
Pancrelipase 5,000 DR	SCN	P
Zenpep	SCN	P
Creon DR		NP
Creon EC		NP
Pancrease		NP
Phosphate Binders		
calcium acetate 667mg capsule		P
Eliphos		P
Fosrenol		P
Renagel		P
calcium acetate 667mg tablet		NP
Phoslyra	SCN	NP
Renvela		NP
Platelet Aggregation Inhibitors		
dipyridamole		P
Aggrenox		P
Plavix		P
ticlopidine		NP

Platelet Aggregation Inhibitors (cont)			
Brilinta		NP	
Effient		NP	
Proton Pump Inhibitors			
omeprazole RX		P	
pantoprazole		P	
Aciphex		P	
Prilosec susp		P	
Protonix susp		P	
lansoprazole		NP	
lansoprazole SoluTab 15mg*		NP	
lansoprazole SoluTab 30mg		NP	
Dexilant DR 30mg		NP	
Dexilant DR 60mg		NP	
Nexium		NP	
Nexium 10mg susp.		NP	
Nexium 20mg susp.		NP	
Nexium 40mg susp.		NP	
Prevacid SoluTab 15mg*		NP	
Prevacid SoluTab 30mg		NP	
*Prior authorization is not required for members age 12 and under.			
Pulmonary Arterial Hypertension			
Adcirca	DR	P	
Letairis	DR	P	
Tracleer	DR	P	
Ventavis	DR	SCN	P
Revatio	DR	NP	
Tyvaso	DR	SCN	NP
Sedative Hypnotics			
chloral hydrate		P	
estazolam		P	
temazepam 15mg		P	
temazepam 30mg		P	
zaleplon		P	
zolpidem		P	
Rozerem		P	
flurazepam		NP	
temazepam 7.5mg		NP	
temazepam 22.5mg		NP	

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

Uses PA/DGA or PA/PDL Exemption form available via Paper PA process only (see Online Handbook)

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

*Special Message

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

(Effective 03/01/2012)

Sedative Hypnotics (cont)		
triazolam		NP
zolpidem ER		NP
Zolpimist		NP
Doral		NP
Edluar		NP
Lunesta		NP
Silenor		NP
Somnote		NP
Skeletal Muscle Relaxants		
baclofen		P
chlorzoxazone		P
cyclobenzaprine		P
dantrolene sodium		P
methocarbamol		P
tizanidine tablets		P
carisoprodol		NP
carisoprodol compound		NP
cyclobenzaprine ER		NP
metaxalone		NP
orphenadrine		NP
orphenadrine compound		NP
tizanidine capsules		NP
Amrix		NP
Fexmid		NP
Lorzone	SCN	NP
Soma		NP
Zanaflex capsules		NP
Steroids, Topical Low		
desonide cream/oint		P
hydrocortisone		P
alclometasone dipropionate		NP
desonide lotion		NP
fluocinolone oil		NP
hydrocortisone acetate/urea		NP
hydrocortisone-aloe 2%		NP
Capex Shampoo	SCN	NP
Derma-Smoothe-FS		NP
Desonate		NP

Steroids, Topical Low (cont)		
Verdeso		NP
Steroids, Topical Medium		
hydrocortisone valerate		P
fluocinolone acetonide		P
fluticasone propionate		P
Cioderm		P
hydrocortisone butyrate		NP
mometasone furoate		NP
prednicarbate		NP
Cordran Tape		NP
Cutivate lotion		NP
Locoid Lipocream		NP
Luxiq		NP
Momexin		NP
Pandel		NP
Steroids, Topical High		
betamethasone valerate		P
fluocinonide		P
fluocinonide-e		P
fluocinonide emollient		P
triamcinolone acetonide cream/oint		P
amcinonide		NP
betamethasone dipropionate		NP
desoximetasone		NP
diflorasone diacetate		NP
triamcinolone acetonide lotion		NP
Halog		NP
Kenalog aerosol spray		NP
Vanos		NP
Steroids, Topical Very High		
clobetazol cream/oint/solution		P
halobetasol propionate		P
Apexicon E		P
clobetazol lotion		NP
clobetazol shampoo		NP
clobetazol propionate foam		NP

Steroids, Topical Very High (cont)		
Clobex		NP
Halac	SCN	NP
Halonate		NP
Halonate Pac		NP
Olux-E		NP
Olux-E Pack		NP
Stimulants and Related Agents		
amphetamine salt combo	DR	P
dexmethylphenidate	DR	P
dextroamphetamine	DR	P
methylphenidate	DR	P
methylphenidate ER 10mg tablet	DR	P
methylphenidate ER 20mg tablet	DR	P
Adderall	DR	P
Adderall XR	DR	P
Concerta	DR	P
Daytrana	DR	P
Focalin XR	DR	P
Metadate CD	DR	P
Methylin tablets	DR	P
Methylin chewable	DR	P
Ritalin SR 20mg	DR	P
Vyvanse	DR	P
amphetamine salt combo ER	DR	NP
methamphetamine	DR	NP
methylphenidate liquid	DR	NP
methylphenidate ER capsule	DR	NP
methylphenidate ER 18mg	DR	NP
methylphenidate ER 27mg	DR	NP
methylphenidate ER 36mg	DR	NP
methylphenidate ER 54mg	DR	NP
Desoxyn	DR	NP
Intuniv	DR	NP
Kapvay	DR	NP
Methylin solution	DR	NP
Nuvigil		NP

Stimulants and Related Agents (cont)			
Procentra	DR		NP
Provigil			NP
Ritalin LA	DR		NP
Strattera	DR		NP
Tetracyclines			
doxycycline hyclate			P
minocycline capsules			P
tetracycline			P
demeclocycline			NP
doxycycline hyclate DR			NP
doxycycline monohydrate			NP
minocycline tablets			NP
minocycline ER			NP
vibramycin suspension			NP
Adoxa CK			NP
Adoxa TT			NP
Doryx			NP
Morgidox capsule	SCN		NP
Oracea			NP
Solodyn 55mg			NP
Solodyn 65mg			NP
Solodyn 80mg			NP
Solodyn 105mg			NP
Solodyn 115mg			NP
Topical, Anti-Infectives			
bacitracin oint. OTC		SCN	P
bacitracin/polymyxin B oint. OTC		SCN	P
gentamicin cream			P
gentamicin oint			P
mupirocin ointment	DR		P
neomycin/bacitracin/z inc/ polymyxin B oint OTC		SCN	P
neomycin/bacitracin/z inc/ polymyxin B/ pramoxine oint OTC		SCN	P
Altanax	DR	SCN	NP

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

Uses PA/DGA or PA/PDL Exemption form available via Paper PA process only (see Online Handbook)

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

*Special Message

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

(Effective 03/01/2012)

Topical, Anti-Infectives (cont)			
Bactroban cream	DR	SCN	NP
Centany	DR		NP
Topical Immunomodulators			
Elidel	DR		NP
Protopic	DR	SCN	NP
Ulcerative Colitis			
balsalazide			P
sulfasalazine			P
Apriso			P
Asacol		SCN	P
Canasa			P
mesalamine			NP
Asacol HD			NP
Dipentum			NP
Lialda			NP
Pentasa			NP
Rowasa			NP
SF Rowasa			NP
Preferred Brand Name Drugs with Generic Copay/Dispensing Fees			
Drug Name	Start Date	End Date	
Adderall XR	01/01/2012		
Alphagan P 0.15%	01/01/2012		
Astelin	01/01/2012		
Depakote Sprinkles	01/01/2012		
Differin Cream	01/01/2012		
Differin 0.1% gel	01/01/2012		
Effexor XR	01/01/2012		
Exelon capsules	01/01/2012		
Lovenox	01/01/2012		
Marinol	01/01/2012		
Miacalcin	10/01/2009		

Preferred Brand Name Drugs with Generic Copay/Dispensing Fees (cont)		
Drug Name	Start Date	End Date
Optivar	01/01/2012	
Tegretol XR 200mg	01/01/2012	
Tegretol XR 400mg	01/01/2012	
Tobradex suspension	01/01/2012	
Toprol XL	07/01/2011	
Wellbutrin XL	01/01/2012	

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

Uses PA/DGA or PA/PDL Exemption form available via Paper PA process only (see Online Handbook)

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

*Special Message