

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

(Effective 06/01/2022)

## 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	Brand Before Generic Drug Refer to topic #20077	Uses specific Drug PA Form - available via STAT-PA or Paper PA process	Uses specific Drug PA Form - available via Paper PA process only	Uses PA/DGA Form/Sec. VII Paper PA process only Refer to topic #15937	Monthly Changes to the PDL
---	---	---	---	--	--	-------------------------------

- 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 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

(Effective 06/01/2022)

<b>Acne Agents, Topical</b>			<b>Analgesics/Anesthetics, Topical (cont)</b>			<b>Analgesics, Opioids Long-Acting (cont)</b>			<b>Analgesics, Opioids Short-Acting (cont)</b>		
benzoyl peroxide OTC 2.5%, 5%, 10%	SCN	P	lidocaine 5% trans patch		P	fenfentanyl transdermal 37.5mcg, 62.5mcg, 87.5mcg		NP	pentazocine/naloxone		NP
clindamycin/benzoyl peroxide (Gen-Duac)		P	diclofenac 1.3% patch (Gen-Flector)		NP	hydrocodone ER tablet (Gen-Hysingla ER)		NP	tramadol 100mg tab		NP
clindamycin gel (Gen-Cleocin T)		P	diclofenac 1.5% solution (Gen-Pennsaid solution)		NP	hydrocodone ER capsule		NP	Dilaudid Liquid		NP
clindamycin solution		P	diclofenac 2% pump (Gen-Pennsaid pump)		NP	hydrocodone ER capsule		NP	Nucynta		NP
erythromycin solution		P	Flector		NP	hydromorphone ER		NP	Oxaydo	SCN	NP
sodium sulfacetamide-sulfur cleanser & wash	SCN	P	Licart patch	SCN	NP	methadone tablet, solution		NP	Seglentis tablet	SCN	NP
sulfacetamide sodium suspension		P	Pennsaid pump	SCN	NP	morphine ER capsules		NP	*Combination products containing any other strength of apap besides 325 mg.		
Clindagel 1% gel	SCN	P	Ztlido	SCN	NP	oxycodone ER		NP	<b>Analgesics, Opioids Short-Acting – Fentanyl Mucosal Agents</b>		
Differin 0.1% cream, lotion	SCN	P	<b>Analgesics, Miscellaneous</b>			tramadol ER cap (Gen-Conzip)	SCN	NP	fenfentanyl citrate oral transmucosal lozenges		NP
Differin 0.3% gel pump	SCN	P	acetaminophen	SCN	P	tramadol ER tab (Gen-Ryzolt)		NP	Abstral	SCN	NP
Retin-A (not micro)		P	acetaminophen chew tab 80mg, 160mg*		P	Belbuca Film		NP	Fentora		NP
NOTE: Topical federal legend acne drugs not listed are either non-preferred or noncovered.			aspirin	SCN	P	Conzip	SCN	NP	<b>Androgenic Agents</b>		
			ibuprofen Rx		P	Kadian		NP	oxandrolone tablet		P
			ibuprofen OTC	SCN	P	Nucynta ER		NP	testosterone cypionate*		P
			ibuprofen OTC chew tab 100mg*		P	Oxycontin		NP	testosterone enanthate*		P
			naproxen Rx		P	Xtampza ER	SCN	NP	testosterone gel, pump (Gen-Vogelxo)		P
			naproxen OTC	SCN	P	Zohydro ER	SCN	NP	Androgel gel, pump		P
<b>Alzheimer's Agents</b>			butalbital/apap		NP	<b>Analgesics, Opioids Short-Acting</b>			Depo-testosterone*		P
donepezil 5mg, 10mg		P	butalbital/apap/caffeine		NP	codeine/apap		P	methyltestosterone capsule		NP
donepezil ODT 5mg, 10mg		P	butalbital/apap/caffeine/codeine		NP	hydromorphone		P	testosterone gel (Gen-Androgel)		NP
memantine solution, tablet, titration pack*		P	butalbital/asa/caffeine		NP	hydrocodone/apap 325mg		P	testosterone pump (Gen-Androgel)		NP
rivastigmine caps		P	butalbital/asa/caffeine/codeine		NP	hydrocodone/ibuprofen		P	testosterone pump (Gen-Testim)	SCN	NP
Exelon patch		P	Allzital	SCN	NP	morphine		P	testosterone pump (Gen-Axiron and Fortesta)		NP
donepezil 23mg		NP	Bupap	SCN	NP	hydrocodone solution, tablets		P	Androderm		NP
galantamine tablets		NP	Esgic		NP	oxycodone/apap 325mg		P	Android capsule		NP
galantamine ER caps		NP	Vtol LQ solution	SCN	NP	tramadol 50mg tab		P	Fortesta		NP
galantamine solution		NP	* Products are only covered for members 12 years of age or younger			tramadol/apap 325mg		P	Jatenzo capsule	SCN	NP
memantine ER caps (Gen-Namenda XR)*	DR	NP	<b>Analgesics, Opioids Long-Acting</b>			benzhydrocodone/apap tab		NP	Methitest tablet		NP
rivastigmine patch		NP	fenfentanyl transdermal 12mcg, 25mcg, 50mcg, 75mcg, 100mcg		P	butorphanol spray		NP	Natesto nasal spray	SCN	NP
Namzaric capsule		NP	morphine ER tablets		P	codeine		NP	Tlando capsule		NP
Namzaric dose pack		NP	tramadol ER tab (Gen-Ultram ER)		P	dihydrocodeine/apap/caffeine		NP	Testim	SCN	NP
*memantine products are not covered for members 17 years of age or younger			Butrans transdermal		P	levorphanol		NP	Testred capsule		NP
<b>Analgesics/Anesthetics, Topical</b>			Hysingla ER		P	hydrocodone/apap*		NP	Vogelxo		NP
capsaicin OTC	SCN	P	buprenorphine film (Gen-Belbuca Film)		NP	hydromorphone liquid, suppository		NP	Xyosted		NP
diclofenac 1% gel (Gen-Voltaren RX)		P	buprenorphine transdermal		NP	mepredine		NP	* Policy for obtaining provider-administered drugs applies. Refer to topic #5697.		
diclofenac sodium 1% gel OTC (Gen-Voltaren OTC)		P				oxycodone/apap*		NP	<b>Angiotensin Modulators, ACE Inhibitors</b>		
lidocaine 5% ointment		P				oxycodone/asa		NP	benazepril		P
						oxycodone capsules, concentrate		NP			
						oxymorphone		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

Brand Before Generic Drug Refer to topic #20077

Uses specific Drug PA Form - available via STAT-PA or Paper PA process

Uses specific Drug PA Form - available via Paper PA process only

Uses PA/DGA Form/Sec. VII Paper PA process only Refer to topic #15937

Monthly Changes to the PDL

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

(Effective 06/01/2022)

Angiotensin Modulators, ACE Inhibitors (cont)			Angiotensin Modulators, ARBs and DRIs (cont)			Antibiotics, GI (cont)			Antibiotics, Tetracyclines (cont)		
captopril		P	Tekturma		NP	Aemcolo DR		NP	Morgidox caps	SCN	NP
enalapril		P	Tekturma/HCTZ		NP	Dificid tablet, suspension		NP	Nuzyra	SCN	NP
enalapril/HCTZ		P	<b>Angiotensin Modulators, Combination</b>			Solosec	SCN	NP	Oracea		NP
fosinopril		P	amlodipine/benazepril		P	vancomycin 50mg/ml (Gen-Firvang)	SCN	NP	Solodyn ER 55mg, 65mg, 80mg, 105mg, 115mg		NP
lisinopril		P	amlodipine/olmesartan		P	<b>Antibiotics, Inhaled</b>			Vibramycin syrup, suspension		NP
lisinopril/HCTZ		P	amlodipine/olmesartan/HCTZ		P	<b>Bethkis</b>	SCN	P	Ximino ER	SCN	NP
ramipril		P	amlodipine/valsartan		P	<b>Kitabis Pak</b>	SCN	P	<b>Antibiotics, Topical</b>		
benazepril/HCTZ		NP	amlodipine/valsartan/HCTZ		P	tobramycin (Gen-Tobi)		NP	bacitracin ointment OTC	SCN	P
captopril/HCTZ	SCN	NP	telmisartan/amlodipine		NP	tobramycin (Gen-Bethkis)		NP	bacitracin/poly.B oint. OTC	SCN	P
enalapril solution (Gen-Epaned)*	SCN	NP	trandolapril/verapamil		NP	tobramycin pak (Gen-Kitabis)		NP	mupirocin ointment		P
fosinopril/HCTZ		NP	Tarka		NP	Cayston		NP	neomycin/bacitracin zinc/ polymyxin B oint OTC	SCN	P
moexipril		NP	<b>Antibiotics, Beta-Lactam</b>			Tobi		NP	neomycin/bacitracin zinc/ polymyxin B/pramoxine oint. OTC	SCN	P
perindopril		NP	amoxicillin		P	Tobi Podhaler		NP	gentamicin cream, ointment		NP
quinapril		NP	amoxicillin clavulanate chew tabs, tablets, suspension		P	<b>Antibiotics, Macrolides/Ketolides</b>			mupirocin cream		NP
quinapril/HCTZ		NP	ampicillin		P	azithromycin		P	Centany	SCN	NP
trandolapril		NP	cefaclor caps		P	clarithromycin susp, tablets		P	Xepi 1% cream	SCN	NP
Qbrelis solution	SCN	NP	cefadroxil caps, susp		P	erythromycin capsule, tablet, granule, suspension		P	<b>Antibiotics, Vaginal</b>		
Prestalia	SCN	NP	cefdinir		P	E.E.S. filmtab, granules		P	clindamycin		P
*Prior Authorization is not required for members 12 years of age and younger.			cefixime capsule	SCN	P	Eryped		P	Cleocin 2% cream		P
<b>Angiotensin Modulators, ARBs and DRIs</b>			cefixime suspension		P	Ery-Tab DR		P	Cleocin ovule		P
irbesartan		P	cefprozil	SCN	P	Erythrocin		P	Clindesse		P
irbesartan/HCTZ		P	cefuroxime		P	clarithromycin ER tab		NP	Nuessa	SCN	P
losartan		P	cephalexin caps, susp		P	erythromycin filmtab		NP	Vandazole		P
losartan/HCTZ		P	cephalexin 750mg	SCN	P	<b>Antibiotics, Tetracyclines</b>			metronidazole		NP
olmesartan		P	dicloxacillin		P	doxycycline hyclate capsule		P	<b>Anticoagulants</b>		
olmesartan/HCTZ		P	penicillin		P	doxycycline hyclate 20mg tabs		P	enoxaparin		P
valsartan		P	Suprax capsule, chew tab, susp	SCN	P	doxycycline monohydrate 50mg, 100mg capsules		P	warfarin		P
valsartan/HCTZ		P	amoxicillin clavulanate XR		NP	doxycycline monohydrate tabs		P	Eliquis		P
Entresto		P	cefaclor susp	SCN	NP	minocycline caps		P	Eliquis Dose Pack		P
aliskiren tabs (Gen-Tekturma)	SCN	NP	cefaclor tab ER		NP	demeclocycline		NP	Pradaxa		P
candesartan tablets		NP	cefadroxil tablet		NP	doxycycline hyclate DR		NP	Xarelto suspension		P
candesartan/HCTZ		NP	cefpodoxime		NP	doxycycline hyclate tabs		NP	Xarelto tablets		P
eprosartan mesylate	SCN	NP	cephalexin tabs		NP	doxycycline monohydrate susp		NP	Xarelto Dose Pack		P
telmisartan		NP	<b>Antibiotics, GI</b>			doxycycline monohydrate 75mg, 150mg capsules		NP	fondaparinux		NP
telmisartan/HCTZ		NP	metronidazole tablets		P	minocycline tabs		NP	Arixtra	SCN	NP
Benicar		NP	neomycin		P	minocycline ER (Gen-Solodyn)		NP	Fragmin		NP
Benicar/HCTZ		NP	tinidazole		P	tetracycline		NP	Savaysa		NP
Edarbi		NP	vancomycin capsule		P	Doryx DR		NP	<b>Anticonvulsants</b>		
Edarbyclor		NP	Firvang 50mg/ml	SCN	P	Minolira ER	SCN	NP	carbamazepine chew tabs		P
Micardis		NP	Xifaxan		P						
Micardis/HCTZ		NP	metronidazole capsule		NP						
			nitazoxanide tablet (Gen-Alinia)		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

Brand Before Generic Drug Refer to topic #20077

Uses specific Drug PA Form - available via STAT-PA or Paper PA process

Uses specific Drug PA Form - available via Paper PA process only

Uses PA/DGA Form/Sec. VII Paper PA process only Refer to topic #15937

Monthly Changes to the PDL

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

(Effective 06/01/2022)

<b>Anticonvulsants (cont)</b>			<b>Anticonvulsants (cont)</b>			<b>Antidepressants, Other (cont)</b>			<b>Antiemetics (cont)</b>		
clobazam susp, tabs		P	divalproex sprinkle		NP	tranylcypromine sulfate		P	prochlorperazine tabs, supp.		P
clonazepam tablets		P	felbamate suspension, tablet		NP	trazodone		P	trimethobenzamide caps		P
divalproex tablets		P	lamotrigine ODT		NP	venlafaxine		P	Emend capsules		P
divalproex ER tablets		P	rufinamide (Gen-Banzel)   DR		NP	venlafaxine ER capsules		P	aprepitant capsules		NP
ethosuximide		P	tiagabine		NP	Marplan		P	metoclopramide ODT		NP
gabapentin caps, tabs		P	topiramate ER (Gen-Qudexy)		NP	Nardil		P	Akynzeo		NP
lacosamide tablets	SCN	P	vigabatrin		NP	bupropion XL (Gen-Forfivo XL)   SCN		NP	Emend Powder Packet		NP
lamotrigine tablets		P	Aptiom	SCN	NP	desvenlafaxine ER (No Brand)		NP	Gimoti nasal		NP
lamotrigine dispertabs		P	Banzel   DR		NP	duloxetine 40mg DR caps		NP	Sancuso	SCN	NP
lamotrigine Dose Pk		P	Briviact		NP	nefazodone		NP	Varubi	SCN	NP
lamotrigine ER tablets		P	Diacomit   DR	SCN	NP	venlafaxine ER tablets		NP	Zuplenz		NP
levetiracetam solution, tabs		P	Elepsia XR	SCN	NP	Aplenzin ER		NP	<b>Antiemetics/Antivertigo</b>		
levetiracetam ER tabs		P	Epidiolex   DR	SCN	NP	Drizalma sprinkle DR		NP	dimenhydrinate OTC	SCN	P
oxcarbazepine		P	Eprontia solution	SCN	NP	Emsam		NP	meclizine RX		P
oxcarbazepine suspension		P	Equetro		NP	Fetzima		NP	meclizine OTC	SCN	P
phenobarbital		P	Fintepla   DR		NP	Forfivo XL		NP	promethazine tablet, suppository, syrup		P
phenytoin		P	Fycompa		NP	Trintellix		NP	scopolamine patch		P
pregabalin (Gen-Lyrica)		P	Lamictal ODT	SCN	NP	Viibryd   SCN		NP	Diclegis	SCN	P
primidone		P	Lamictal ODT Starter Kit	SCN	NP	<b>Antidepressants, SSRI</b>			doxylamine succinate / pyridoxine (Gen-Diclegis)		NP
topiramate		P	Lamictal XR	SCN	NP	citalopram		P	Antivert 50mg tablet	SCN	NP
topiramate sprinkle		P	Lamictal XR Starter Kit	SCN	NP	escitalopram		P	Bonjesta	SCN	NP
valproic acid		P	Nayzilam nasal spray		NP	fluoxetine 10mg, 20mg, 40mg caps		P	Transderm-Scop	SCN	NP
zonisamide		P	Oxtellar XR	SCN	NP	fluoxetine solution		P	<b>Antiemetics, Cannabinoids</b>		
Carbatrol ER		P	Phenytek	SCN	NP	fluvoxamine		P	dronabinol		NP
Celontin		P	Qudexy		NP	paroxetine		P	<b>Antifungals, Oral</b>		
Depakote sprinkle		P	Spritam   SCN	NP		sertraline concentrate, tablets		P	clotrimazole troche		P
Diastat		P	Sympazan   DR	SCN	NP	Paxil suspension		P	fluconazole		P
Dilantin 30mg cap		P	Trileptal suspension		NP	citalopram 30mg capsule		NP	griseofulvin suspension		P
Dilantin Infatab		P	Trokendi XR	SCN	NP	fluoxetine 90mg caps		NP	griseofulvin ultra-microsize tablets		P
Felbatol suspension, tablet		P	Valtoco nasal spray	SCN	NP	fluoxetine 10mg, 20mg, 60mg tabs		NP	itraconazole		P
Gabitril	SCN	P	Vigadrone		NP	fluvoxamine ER		NP	ketoconazole tablets		P
Lamictal Starter Kits	SCN	P	Vimpat		NP	paroxetine 7.5mg (Gen-Brisdelle)		NP	nystatin		P
Lyrica		P	Vimpat solution		NP	paroxetine CR (Gen-Paxil CR)   SCN		NP	terbinafine		P
Peganone		P	Xcopri	SCN	NP	sertraline capsules		NP	Noxafil		P
Roweepra	SCN	P	<b>Antidepressants, Other</b>			Peveva	SCN	NP	Sporanox (liquid)		P
Sabril	SCN	P	bupropion		P	Sarafem	SCN	NP	flucytosine		NP
Tegretol tab		P	bupropion SR		P	<b>Antiemetics</b>			griseofulvin microsize tablets		NP
Tegretol suspension		P	bupropion XL (Gen-Wellbutrin)		P	granisetron		P	itraconazole solution		NP
Tegretol XR		P	desvenlafaxine ER (Gen-Pristiq)		P	metoclopramide		P	posaconazole (Gen-Noxafil)   SCN		NP
carbamazepine susp, tabs		NP	duloxetine DR 20mg, 30mg, 60mg caps		P	ondansetron tab, ODT, solution		P	voriconazole suspension, tab		NP
carbamazepine ER caps, tabs		NP	mirtazapine		P						
clonazepam ODT		NP	phenelzine		P						
diazepam rectal		NP									

<p>Uses PA/PDL Exemption Form - available via STAT-PA or Paper PA process</p>	<p>Uses PA/DGA Form/Sec. VI Paper PA process only Refer to topic #15937</p>	<p>Brand Before Generic Drug Refer to topic #20077</p>	<p>Uses specific Drug PA Form - available via STAT-PA or Paper PA process</p>	<p>Uses specific Drug PA Form - available via Paper PA process only</p>	<p>Uses PA/DGA Form/Sec. VII Paper PA process only Refer to topic #15937</p>	<p>Monthly Changes to the PDL</p>
---	---	--	---	---	--	-----------------------------------

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

(Effective 06/01/2022)

Antifungals, Oral (cont)			Antihistamines, Minimally Sedating			Antiparkinson's Agents (cont)			Antipsychotics (cont)		
Ancobon		NP	cetirizine syrup, tablets	SCN	P	trihexyphenidyl		P	amitriptyline/perphenazine*	SCN	P
Brexafemme	SCN	NP	cetirizine D	SCN	P	entacapone		NP	chlorpromazine*		P
Cresemba		NP	levocetirizine tablets		P	pramipexole ER		NP	clozapine*		P
Oravig		NP	loratadine syrup, tablets	SCN	P	rasagiline		NP	fluphenazine*	SCN	P
Tolsura		NP	loratadine D	SCN	P	ropinirole ER		NP	haloperidol*		P
Vfend		NP	desloratadine		NP	tolcapone		NP	loxapine*		P
<b>Antifungals, Topical</b>			desloratadine ODT		NP	Azilect		NP	olanzapine*		P
ciclopirox solution		P	fexofenadine OTC	SCN	NP	Comtan		NP	olanzapine ODT*		P
clotrimazole OTC	SCN	P	levocetirizine solution		NP	Dhivy tablet	SCN	NP	perphenazine*		P
clotrimazole Rx		P	Clarinox		NP	Gocovri ER	SCN	NP	pimozide*		P
clotrimazole/betamethasone cream		P	Clarinox D		NP	Inbrija	SCN	NP	quetiapine*		P
ketoconazole cream, shampoo		P	Semprex-D	SCN	NP	Kynmobi film	SCN	NP	quetiapine fumarate ER*		P
miconazole OTC	SCN	P	<b>Antihypertensives, Sympatholytics</b>			Neupro patches		NP	risperidone*		P
nystatin		P	clonidine (oral)		P	Nourianz tablets	SCN	NP	thiothixene*	SCN	P
nystatin/triamcinolone cream, ointment		P	guanfacine		P	Orgentys	SCN	NP	trifluoperazine*		P
tolnaftate OTC cream, powder	SCN	P	methylodopa		P	Osmolex ER	SCN	NP	ziprasidone capsules*		P
Alevazol	SCN	P	Catapres-TTS		P	Rytary ER	SCN	NP	Latuda*	SCN	P
ciclopirox cream, gel, shampoo, suspension		NP	clonidine trans patch		NP	Stalevo		NP	Vraylar*	SCN	P
clotrimazole/betamethasone lotion		NP	methylodopa/HCTZ	SCN	NP	Tasmar		NP	asenapine (Gen-Saphris)		NP
econazole nitrate		NP	<b>Antiparasitics, Topical</b>			Xadago	SCN	NP	clozapine ODT*		NP
ketoconazole foam		NP	permethrin OTC	SCN	P	Zelapar		NP	molindone tablets*		NP
luliconazole cream		NP	permethrin Rx		P	<b>Antipsoriatics, Oral</b>			olanzapine/fluoxetine*		NP
miconazole/zinc/pet ointment	SCN	NP	Eurax Cream		P	acitretin		P	paliperidone ER tablets*		NP
naftifine cream, gel		NP	Natroba		P	methoxsalen		NP	thioridazine*		NP
oxiconazole cream		NP	ivermectin lotion (Gen-Skllice)		NP	<b>Antipsoriatics, Topical</b>			Abilify MyCite*		NP
tavaborole solution (Gen-Kerydin)		NP	malathion		NP	calcipotriene cream, ointment, solution		P	Adasuve*		NP
Bensal HP	SCN	NP	spinosad		NP	Taclonex suspension		P	Caplyta*	SCN	NP
Ertaczo		NP	Crotan Lotion	SCN	NP	Vectical	SCN	P	Fanapt*	SCN	NP
Exelderm	SCN	NP	Eurax Lotion	SCN	NP	calcipotriene foam		NP	Fazaclo*	SCN	NP
Extina	SCN	NP	Lindane		NP	calcipotriene/betamethasone dipropionate ointment		NP	Lybalvi *		NP
Jublia		NP	<b>Antiparkinson's Agents</b>			calcipotriene/betamethasone dipropionate suspension (Gen-Taclonex suspension)	SCN	NP	Nuplazid*	SCN	NP
Kerydin	SCN	NP	amantadine		P	calcitriol ointment		NP	Rexulti*		NP
Luzu cream		NP	benztropine		P	tazarotene cream		NP	Saphris*		NP
Mentax	SCN	NP	bromocriptine		P	Duobrii lotion		NP	Secuado patch*	SCN	NP
Naftin	SCN	NP	carbidopa/levodopa		P	Enstilar	SCN	NP	Symbyax*		NP
Oxistat	SCN	NP	carbidopa/levodopa ER		P	Sorilux		NP	Versacloz*	SCN	NP
Thera Antifungal cream OTC	SCN	NP	carbidopa/levodopa ODT		P	<b>Antipsychotics</b>			*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.		
Vusion	SCN	NP	carbidopa/levodopa/entacapone		P	aripiprazole*		P	<b>Antipsychotics, Injectable</b>		
<b>NOTE: Sprays and Kits are not covered.</b>			carbidopa 25mg tab		P	aripiprazole ODT*	SCN	P	fluphenazine decanoate *		P
			pramipexole		P				haloperidol decanoate*		P
			ropinirole		P						
			selegiline		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

Brand Before Generic Drug Refer to topic #20077

Uses specific Drug PA Form - available via STAT-PA or Paper PA process

Uses specific Drug PA Form - available via Paper PA process only

Uses PA/DGA Form/Sec. VII Paper PA process only Refer to topic #15937

Monthly Changes to the PDL

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

(Effective 06/01/2022)

<b>Antipsychotics, Injectable (cont)</b>			<b>BPH Agents, Alpha Reductase Inhibitors</b>			<b>Bile Salts</b>			<b>Bronchodilators, Beta Agonists (cont)</b>		
Abilify Maintena*		P	dutasteride		P	ursodiol		P	albuterol neb (2.5mg/3ml)		P
Aristada*	SCN	P	finasteride		P	Bylway	SCN	NP	albuterol neb (100mg/20ml)		P
Aristada Initio ER*	SCN	P	dutasteride/tamsulosin	SCN	NP	Chenodal	SCN	NP	albuterol neb low-dose (0.63mg/3ml)		P
Haldol Decanoate*		P	<b>BPH Agents, Andrenergic</b>			Cholbam	SCN	NP	albuterol neb low-dose (1.25mg/3ml)		P
Invega Sustenna*		P	alfuzosin		P	Livmarli solution	SCN	NP	terbutaline tablets		P
Invega Trinza*		P	doxazosin		P	Ocaliva	SCN	NP	Proair HFA		P
Perseris ER*	SCN	P	tamsulosin		P	Reltone	SCN	NP	Serevent	SCN	P
Risperdal Consta*		P	terazosin		P	<b>Bladder Relaxant Preparations</b>			Ventolin HFA	SCN	P
Zyprexa Relprevv*		P	silodosin capsule		NP	oxybutynin tablet, ER tablet, syrup		P	arformoterol (Gen-Brovana)	SCN	NP
ziprasidone vial*		NP	Cardura XL		NP	solifenacin tablet		P	formoterol (Gen-Perforomist)		NP
Invega Hafyera*		NP	Rapaflo		NP	Toviaz		P	levalbuterol nebulizer		NP
*Policy for obtaining provider-administered drugs applies. Refer to topic #5697.			<b>Beta Blockers</b>			darifenacin ER		NP	levalbuterol HFA		NP
<b>Antivirals, Influenza</b>			acebutolol		P	tolterodine		NP	metaproterenol		NP
oseltamivir		P	atenolol		P	tolterodine ER		NP	Arcapta		NP
rimantadine		NP	atenolol/chlorthalidone		P	trospium		NP	Brovana	SCN	NP
Relenza	SCN	NP	bisoprolol		P	trospium ER		NP	Perforomist	SCN	NP
Tamiflu	SCN	NP	bisoprolol/HCTZ		P	Detrol		NP	ProAir Digihaler		NP
Xofluza		NP	carvedilol		P	Detrol LA		NP	ProAir Respiclick		NP
<b>Antivirals, Other</b>			labetalol		P	Gelnique		NP	Proventil HFA		NP
acyclovir		P	metoprolol		P	Gemtesa	SCN	NP	Striverdi Respimat		NP
valacyclovir		P	metoprolol ER		P	Myrbetriq ER		NP	Xopenex HFA	SCN	NP
famciclovir		NP	nadolol		P	Oxytrol	SCN	NP	* NOTE: Product added temporarily during the public health COVID-19 emergency		
<b>Antivirals, Topical</b>			propranolol		P	Vesicare LS		NP	<b>Calcium Channel Blocking Agents</b>		
acyclovir ointment		P	propranolol ER		P	<b>Bone Resorption Suppression</b>			amlodipine		P
Zovirax cream		P	sotalol		P	alendronate		P	diltiazem		P
acyclovir cream		NP	betaxolol		NP	calcitonin-salmon nasal		P	diltiazem ER capsules	SCN	P
Denavir	SCN	NP	carvedilol ER		NP	ibandronate		P	nifedipine ER		P
Xerese		NP	metoprolol/HCTZ		NP	teriparatide		P	nifedipine IR		P
<b>Anxiolytics</b>			metoprolol/HCTZ		NP	alendronate sodium solution	SCN	NP	nimodipine		P
alprazolam ER		P	nadolol bendroflumethiazide tabs		NP	raloxifene		NP	verapamil tablets		P
alprazolam intensol, tablet		P	nebivolol (Gen-Bystolic)		NP	risedronate		NP	verapamil ER tablet		P
buspirone		P	pindolol		NP	Actonel	SCN	NP	verapamil SR tablet		P
chlordiazepoxide		P	propranolol/HCTZ	SCN	NP	Atelvia	SCN	NP	diltiazem ER tablets	SCN	NP
diazepam solution, tablet		P	timolol		NP	Boniva	SCN	NP	felodipine ER		NP
lorazepam intensol, tablet		P	Bystolic	SCN	NP	Forteo		NP	isradipine		NP
alprazolam ODT		NP	Coreg CR	SCN	NP	Fosamax Plus D		NP	levamlodipine tablet	SCN	NP
clorazepate		NP	Hemangeol*	SCN	NP	Tymlos		NP	nicardipine		NP
diazepam intensol		NP	Inderal XL		NP	<b>Bronchodilators, Beta Agonists</b>			nisoldipine	SCN	NP
meprobamate		NP	Innopran XL		NP	albuterol		P	verapamil ER capsule	SCN	NP
oxazepam		NP	Kaspargo sprinkles		NP	albuterol ER	SCN	P			
Loreev XR		NP	Sotylize		NP	albuterol HFA*		P			
			*Prior Authorization not required for members under 1 year of age.			albuterol neb (2.5mg/0.5ml)		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

Brand Before Generic Drug Refer to topic #20077

Uses specific Drug PA Form - available via STAT-PA or Paper PA process

Uses specific Drug PA Form - available via Paper PA process only

Uses PA/DGA Form/Sec. VII Paper PA process only Refer to topic #15937

Monthly Changes to the PDL

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

(Effective 06/01/2022)

Calcium Channel Blocking Agents (cont)			Cytokine and CAM Antagonists (cont)			Fluoroquinolones (cont)			Glucocorticoids, Inhaled (cont)		
verapamil SR capsule		NP	<b>Orencia subQ</b>		P	<b>levofloxacin tablets</b>		P	budesonide/formoterol (Gen-Symbicort)	SCN	NP
verapamil ER PM	SCN	NP	<b>Otezla</b>		P	ciprofloxacin suspension		NP	fluticasone/salmeterol (Gen-Advair Diskus)	SCN	NP
verapamil 360mg capsule		NP	<b>Xeljanz tablets</b>		P	levofloxacin solution		NP	fluticasone/salmeterol (Gen-AirDuo Respick)		NP
Cardizem LA		NP	Actemra subQ	SCN	NP	moxifloxacin		NP	AirDuo Digihaler		NP
Katerzia suspension	SCN	NP	Cosentyx		NP	ofloxacin		NP	AirDuo Respick		NP
Matzim LA		NP	Cimzia		NP	Baxdela tablet	SCN	NP	Alvesco Inhaler	SCN	NP
<b>Norliqva solution</b>	<b>SCN</b>	NP	Enspryng	SCN	NP	Cipro suspension		NP	Armonair Digihaler	SCN	NP
Nymalize		NP	Kevzara		NP	<b>GI Motility, Chronic – Constipation</b>			Arnuity Ellipta	SCN	NP
<b>COPD Agents</b>			Kineret		NP	<b>Amitiza</b>		P	Asmanex HFA		NP
<b>ipratropium nebulizer</b>		P	Olumiant		NP	<b>Linzess</b>	SCN	P	Breo Ellipta Inhaler	SCN	NP
<b>ipratropium/albuterol nebulizer</b>		P	Rinvoq ER		NP	<b>Movantik</b>		P	Breztri Aerosphere HFA		NP
<b>Anoro Ellipta</b>	SCN	P	Siliq		NP	lubiprostone caps (Gen-Amitiza)	SCN	NP	Qvar Redihaler		NP
<b>Atrovent HFA</b>		P	Simponi subQ		NP	lbsrela	SCN	NP	Trelegy Ellipta	SCN	NP
<b>Combivent Respimat</b>		P	Skyrizi		NP	Motegrity		NP	Wixela Inhalation	SCN	NP
<b>Spiriva</b>		P	Stelara subQ		NP	Relistor tablet		NP	<b>Glucocorticoids, Oral</b>		
<b>Stiolto Respimat</b>		P	Taltz		NP	Symproic		NP	budesonide EC capsule		P
Bevespi Aerosphere		NP	Tremfya		NP	Trulance	SCN	NP	dexamethasone elixir, intensol, solution, tablet		P
Breztri Aerosphere HFA		NP	Xeljanz solution		NP	<b>GI Motility, Chronic – Diarrhea</b>			hydrocortisone		P
Daliresp		NP	Xeljanz XR		NP	<b>Lotronex</b>	SCN	P	methylprednisolone Dose PK		P
Duaklir Pressair	SCN	NP	<b>Epinephrine, Self-Injected</b>			<b>Xifaxan 550mg</b>		P	methylprednisolone tablet		P
Incruse Ellipta	SCN	NP	<b>epinephrine (AG EpiPen &amp; AG EpiPen JR)</b>	SCN	P	alosetron		NP	prednisolone solution 5mg/5ml	SCN	P
Lonhala Magnair Kits	SCN	NP	<b>EpiPen JR</b>	SCN	P	Viberzi	SCN	NP	prednisolone solution 15mg/5ml		P
Seebri Neohaler		NP	<b>EpiPen</b>	SCN	P	<b>Glucagon Agents</b>			prednisolone sodium phosphate ODT	SCN	P
Spiriva Respimat		NP	epinephrine (Gen-EpiPen & EpiPen JR)		NP	<b>glucagon 1mg hypokit &amp; vial</b>		P	prednisolone sodium phosphate solution 25mg/5ml		P
Trelegy Ellipta	SCN	NP	epinephrine (Gen-Adrenaclick)		NP	<b>glucagon 1mg emergency kit (Lilly)</b>		P	prednisone dose pack, intensol, solution, tablet		P
Tudorza Pressair		NP	Symjepi		NP	<b>Baqsimi nasal spray</b>		P	cortisone		NP
Utibron Neohaler		NP	<b>Erythropoiesis Stimulating Proteins</b>			<b>Proglycem suspension</b>	SCN	P	dexamethasone Dose PK		NP
Yupelri	SCN	NP	<b>Aranesp</b>		P	diazoxide suspension	SCN	NP	prednisolone solution 10mg/5ml (Gen-Millipred)		NP
<b>Cough and Cold – Narcotic Liquids</b>			<b>Epogen</b>		P	glucagon 1mg emergency kit (Fresenius)		NP	prednisolone solution 20mg/5ml (Gen-Veripred)		NP
<b>guaifenesin/codeine</b>		P	<b>Retacrit</b>	SCN	P	Gvoke	SCN	NP	Alkindi sprinkle	SCN	NP
<b>phenylephrine/promethazine/codeine</b>		P	Mircera	SCN	NP	Zegalogue	SCN	NP	Decadron	SCN	NP
<b>promethazine/codeine</b>		P	Procrit	SCN	NP	<b>Glucocorticoids, Inhaled</b>			Dexpak		NP
<b>NOTE:</b> 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>Fibromyalgia</b>			<b>budesonide respules</b>		P	Dxevo tablet	SCN	NP
<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.			<b>duloxetine DR 20mg, 30mg, 60mg caps</b>		P	<b>Advair Diskus</b>	SCN	P			
<b>Cytokine and CAM Antagonists</b>			<b>pregabalin (Gen-Lyrica)</b>		P	<b>Advair HFA</b>	SCN	P			
<b>Enbrel</b>		P	<b>Lyrica</b>		P	<b>Asmanex</b>		P			
<b>Humira</b>		P	<b>Savella</b>	SCN	P	<b>Dulera</b>		P			
			duloxetine 40mg DR caps		NP	<b>Flovent Diskus</b>	SCN	P			
			<b>Fluoroquinolones</b>			<b>Flovent HFA</b>	SCN	P			
			<b>ciprofloxacin</b>		P	<b>Pulmicort Flexhaler</b>		P			
						<b>Symbicort</b>		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

Brand Before Generic Drug Refer to topic #20077

Uses specific Drug PA Form - available via STAT-PA or Paper PA process

Uses specific Drug PA Form - available via Paper PA process only

Uses PA/DGA Form/Sec. VII Paper PA process only Refer to topic #15937

Monthly Changes to the PDL

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

(Effective 06/01/2022)

Glucocorticoids, Oral (cont)		
Emflaza	SCN	NP
Hemady	SCN	NP
Medrol tablet		NP
Millipred dose pack, solution, tabs	SCN	NP
Ortikos ER capsule	SCN	NP
Rayos tablet DR	SCN	NP
TaperDex	SCN	NP
Tarpeyo DR capsule	DR	SCN
<b>Gout Agents</b>		
allopurinol		P
indomethacin		P
naproxen Rx		P
probenecid		P
probenecid/colchicine		P
Colcrys		P
colchicine capsule (Gen-Mitigare)		NP
colchicine tablet (Gen-Colcrys)		NP
febuxostat tab (Gen-Uloric)	SCN	NP
naproxen suspension		NP
Gloperba solution	SCN	NP
Mitigare	SCN	NP
Uloric		NP
<b>Growth Hormone</b>		
Genotropin		P
Norditropin	SCN	P
Humatrope		NP
Nutropin AQ		NP
Omnitrope		NP
Saizen		NP
Serostim	SCN	NP
Skytrofa	SCN	NP
Zomacton	SCN	NP
Zorbtive	SCN	NP
<b>Headache Agents, Acute Treatment</b>		
Ubrelyv	SCN	P
Emgality 100mg*		NP
Nurtec ODT	SCN	NP
Reyvow		NP
* NOTE: Emgality 100mg strength only for cluster headaches		
<b>Headache Agents, Preventative Treatment</b>		
Ajovy		P
Emgality 120mg		P

Headache Agents, Preventative Treatment (cont)		
Aimovig		NP
Nurtec ODT	SCN	NP
Qulipta		NP
<b>Headache Agents, Triptans Injectable</b>		
sumatriptan injectable		P
Zembrace	SCN	NP
<b>Headache Agents, Triptans Non-Injectable</b>		
eletriptan		P
naratriptan		P
rizatriptan		P
sumatriptan tablets		P
zolmitriptan ODT, tablets		P
Imitrex nasal spray		P
Zomig nasal spray	SCN	P
almotriptan		NP
frovatriptan		NP
sumatriptan nasal spray (Gen-Imitrex nasal spray)		NP
sumatriptan/naproxen tablets		NP
zolmitriptan nasal spray (Gen-Zomig nasal spray)		NP
Onzetra	SCN	NP
Tosymra nasal spray	SCN	NP
Treximet	SCN	NP
<b>H. Pylori</b>		
lansoprazole/amoxicillin/clarithromycin		P
Pylera		P
Talicia		NP
Helildac	SCN	NP
Omeclamox Pak	SCN	NP
<b>Hepatitis B Agents</b>		
entecavir tablet		P
lamivudine	SCN	P
Epivir HBV	SCN	P
Hepsera		P
adefovir dipivoxal		NP
Baraclude solution		NP
Vemlidy		NP
<b>Hepatitis C Agents</b>		
sofosbuvir/velpatasvir (Gen-Epclusa)	SCN	P

Hepatitis C Agents (cont)		
Mavyret		P
ledipasvir/sofosbuvir (Gen-Harvoni)	SCN	NP
Epclusa		NP
Harvoni		NP
Sovaldi		NP
Vosevi		NP
Zepatier		NP
<b>Hepatitis C Agents-Interferon</b>		
Pegasyys	SCN	P
Peg-Intron Redipen		P
<b>Hepatitis C Agents-Ribavirin</b>		
ribavirin		P
<b>H2 Antagonists</b>		
cimetidine solution, tablet		P
famotidine RX tablet		P
famotidine RX suspension*		NP
nizatidine capsules, solution		NP
*Prior Authorization not required for members 18 years of age and younger		
<b>Hypoglycemics, Alpha-Glucosidase Inhibitors</b>		
acarbose		P
Glyset		P
miglitol		NP
<b>Hypoglycemics, DPP-4 Inhibitors</b>		
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
<b>Hypoglycemics, GLP 1</b>		
Byetta		P

Hypoglycemics, GLP 1 (cont)		
Trulicity		P
Victoza	SCN	P
Adlyxin		NP
Bydureon BCise		NP
Rybelsus tablets	SCN	NP
Ozempic	SCN	NP
<b>Hypoglycemics, GLP 1-Combinations</b>		
Soliqua		NP
Xultophy	SCN	NP
<b>Hypoglycemics, Insulins</b>		
insulin aspart U-100 cartridge/pen/vial (Gen-Novolog)	SCN	P
insulin aspart/protamine pen/vial (Gen-Novolog Mix)	SCN	P
insulin lispro Jr Kwikpen (Gen-Humalog Jr Kwikpen)		P
insulin lispro mix (Gen-Humalog Mix)		P
insulin lispro U-100 Kwikpen/Vial (Gen-Humalog Kwikpen/Vial)	SCN	P
Humalog Jr. Kwikpen		P
Humalog Mix		P
Humalog U-100 Cartridge/Kwikpen/Vial		P
Humulin 70-30		P
Humulin N U-100 Kwikpen/Vial		P
Humulin R U-100 Vial		P
Humulin R U-500 Kwikpen/Vial		P
Novolog Mix	SCN	P
Novolog U-100 Cartridge/Pen/Vial	SCN	P
Admelog		NP
Afrezza	SCN	NP
Apidra		NP
Fiasp	SCN	NP
Humalog U-200 Kwikpen		NP
Lyumjev		NP
Novolin	SCN	NP
<b>Hypoglycemics, Insulins Long-Acting</b>		
Lantus		P
Levemir	SCN	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

Brand Before Generic Drug Refer to topic #20077

Uses specific Drug PA Form - available via STAT-PA or Paper PA process

Uses specific Drug PA Form - available via Paper PA process only

Uses PA/DGA Form/Sec. VII Paper PA process only Refer to topic #15937

Monthly Changes to the PDL



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

(Effective 06/01/2022)

Hypoglycemics, Insulins Long-Acting (cont)			Hypoglycemics, Sulfonylureas (cont)			Intranasal Rhinitis Agents (cont)			Lipotropics, Other (cont)			
insulin glargine-yfgn U-100 vial & pen (Gen-Semglee(YFGN))	SCN	NP	<b>glipizide ER</b>		P	Omniaris	SCN	NP	<b>ezetimibe</b>		P	
Basaglar		NP	<b>glyburide</b>		P	Qnasl		NP	<b>lovastatin</b>		P	
Semglee U-100 vial & pen	SCN	NP	<b>glyburide/metformin</b>		P	Xhance	SCN	NP	<b>pravastatin</b>		P	
Semglee (YFGN) U-100 vial & pen	SCN	NP	glipizide/metformin		NP	Zetonna	SCN	NP	<b>rosuvastatin</b>		P	
Toujeo Solostar		NP	tolbutamide	SCN	NP	*Prior Authorization not required for members 6 years of age and younger.			<b>simvastatin</b>		P	
Toujeo Max Solostar		NP	<b>Hypoglycemics, Thiazolidinediones</b>			<b>Leukotriene Modifiers</b>			amlodipine/atorvastatin		NP	
Tresiba Flextouch	SCN	NP	<b>pioglitazone</b>		P	<b>montelukast chew tab, tablets</b>		P	ezetimibe/simvastatin		NP	
Tresiba vial	SCN	NP	pioglitazone-glimepiride		NP	montelukast granules		NP	fluvastatin		NP	
<b>Hypoglycemics, Meglitinides</b>			pioglitazone-metformin		NP	zafirlukast		NP	fluvastatin ER		NP	
<b>repaglinide</b>		P	Actoplus MET		NP	zileuton ER		NP	Altoprev	SCN	NP	
nateglinide		NP	Avandia	SCN	NP	Zyflo	SCN	NP	Caduet		NP	
repaglinide/metformin		NP	<b>Immunomodulators, Asthma</b>			<b>Lipotropics, ACL Inhibitors</b>			Ezallor sprinkles		NP	
<b>Hypoglycemics, Other</b>			<b>Fasenra</b>		P	Nexletol	SCN	NP	Lescol XL		NP	
<b>metformin</b>		P	<b>Xolair</b>	SCN	P	Nexlizet	SCN	NP	Livalo	SCN	NP	
<b>metformin ER(Gen-Glucophage)</b>		P	Nucala	SCN	NP	<b>Lipotropics, Apo-B Inhibitors</b>			Vytorin		NP	
<b>Farxiga</b>		P	<b>Immunomodulators, Atopic Dermatitis</b>			Juxtapid	SCN	NP	Zypitamag	SCN	NP	
<b>Invokamet</b>		P	<b>Elidel</b>		P	<b>Lipotropics, Bile Acid Sequestrants</b>			<b>Lipotropics, PCSK9 Inhibitors</b>			
<b>Invokana</b>		P	<b>Protopic</b>	SCN	P	<b>cholestyramine</b>		P	Praluent	SCN	NP	
<b>Jardiance</b>		P	pimecrolimus cream	SCN	NP	<b>colestipol tablet</b>		P	Repatha		NP	
<b>Symlin</b>		P	tacrolimus		NP	<b>Welchol</b>		P	<b>Methotrexate</b>			
<b>Synjardy</b>		P	Adbry		NP	colesevelam (Gen-Welchol)		NP	<b>methotrexate tablet</b>		P	
<b>Welchol</b>		P	Cibinqo		NP	colestipol granules		NP	<b>methotrexate PF vial</b>		P	
<b>Xigduo XR</b>		P	Dupixent		NP	Colestid granules		NP	<b>methotrexate vial</b>		P	
colesevelam (Gen-Welchol)		NP	Eucrisa 2%	SCN	NP	<b>Lipotropics, Fibric Acids</b>			Otrexup Auto Injector	SCN	NP	
metformin ER (Gen-Glucophage ER)		NP	Opzelura		NP	<b>fenofibrate tab (Gen-Tricor)</b>		P	Rasuvo Auto Injector		NP	
metformin ER OSM-tab		NP	Rinqoq ER 15mg, 30mg		NP	<b>fenofibric acid (Gen-Trilipix)</b>		P	Reditrex		NP	
metformin solution (Gen-Riomet solution)	SCN	NP	<b>Immunomodulators, Topical</b>			<b>gemfibrozil</b>		P	Trexall tablet	SCN	NP	
Cycloset		NP	<b>imiquimod 5% cream</b>		P	fenofibrate (Gen-Antara, Fenoglide, Lipofen, Lofibra)		NP	<b>Movement Disorders</b>			
Glumetza ER		NP	imiquimod 3.75% cream		NP	fenofibric acid (Gen-Fibracor)		NP	<b>tetrabenazine</b>	DR	P	
Invokamet XR		NP	Zyclara		NP	Antara	SCN	NP	<b>Austedo</b>	DR	P	
Qtern		NP	<b>Intranasal Rhinitis Agents</b>			Fenoglide		NP	<b>Ingrezza</b>	DR	SCN	P
Riomet solution		NP	<b>azelastine (Gen-Astelin)</b>		P	Lipofen	SCN	NP	<b>Multiple Sclerosis Agents</b>			
Riomet ER suspension		NP	<b>fluticasone RX</b>		P	<b>Lipotropics, Niacin</b>			<b>dalfampridine ER</b>	DR	SCN	P
Segluromet		NP	<b>ipratropium</b>		P	<b>niacin ER tabs (RX)</b>		P	<b>dimethyl fumarate DR caps (Gen-Tecfidera)</b>		SCN	P
Steglatro		NP	<b>Beconase AQ</b>	SCN	P	<b>Lipotropics, Omega-3 Acids</b>			<b>Aubagio</b>		P	
Steglujan		NP	azelastine (Gen-Astepro)		NP	<b>omega-3 acid ethyl esters</b>		P	<b>Avonex</b>		P	
Synjardy XR		NP	azelastine/fluticasone (Gen-Dymista)		NP	icosapent ethyl (Gen-Vascepa)		NP	<b>Betaseron</b>		P	
Trijardy XR		NP	flunisolide		NP	Vascepa	SCN	NP	<b>Copaxone 20mg, 40mg</b>		P	
<b>Hypoglycemics, Sulfonylureas</b>			mometasone furoate spray*		NP	<b>Lipotropics, Other</b>			<b>Gilenya</b>		P	
<b>glimepiride</b>		P	olopatadine nasal spray		NP	<b>atorvastatin</b>		P	<b>Rebif</b>	SCN	NP	
<b>glipizide</b>		P	Astepro		NP				glatiramer	SCN	NP	
			Dymista		NP				Bafiertam DR capsule	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

Brand Before Generic Drug Refer to topic #20077

Uses specific Drug PA Form - available via STAT-PA or Paper PA process

Uses specific Drug PA Form - available via Paper PA process only

Uses PA/DGA Form/Sec. VII Paper PA process only Refer to topic #15937

Monthly Changes to the PDL

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

(Effective 06/01/2022)

<b>Multiple Sclerosis Agents (cont)</b>				<b>NSAIDs (cont)</b>				<b>Ophthalmics, Allergic Conjunctivitis (cont)</b>				<b>Ophthalmics, Antibiotic-Steroid Combinations (cont)</b>			
Extavia				diclofenac solution				olopatadine 0.1% RX (Gen-Patanol)				Blephamide			
Glatopa				diflunisal				Alaway OTC				Pred-G drops			
Kesimpta				etodolac				Alrex				Tobradex ointment, suspension			
Mavenclad				etodolac XL				Pazeo				neomycin/bacitracin/polymyxin/HC			
Mayzent				fenoprofen				azelastine				neomycin/polymyxin/HC drops			
Plegridy				ibuprofen-famotidine (Gen-Duexis)				bepotastine drops (Gen-Bepreve)				tobramycin/dexamethasone			
Ponvory				indomethacin ER				epinastine				Blephamide S.O.P.			
Vumerity DR capsule				ketoprofen				olopatadine 0.2% RX (Gen-Pataday)				Pred-G ointment			
Zeposia capsule				ketoprofen ER caps				Alocril				Tobradex ST			
<b>Neuropathic Pain</b>				ketorolac nasal spray (Gen-Sprix)				Alomide				Zylet			
duloxetine DR 20mg, 30mg, 60mg caps				meclofenamate				Bepreve				<b>Ophthalmics, Anti-Inflammatories</b>			
				mefenamic acid				Lastacaft				dexamethasone			
gabapentin				meloxicam capsule (Gen-Vivlodex)				Zerviate drops				diclofenac eye drop			
pregabalin (Gen-Lyrica)				naproxen CR				<b>Ophthalmics, Antibacterial</b>				fluorometholone			
Lyrica				naproxen/esomeprazole DR (Gen-Vimovo)				ciprofloxacin solution				flurbiprofen			
duloxetine 40mg DR caps				naproxen EC				erythromycin				ketorolac LS 0.4%			
pregabalin ER (Gen-Lyrica CR)				naproxen sodium Rx				gentamicin drops				prednisolone acetate			
Drizalma sprinkle DR				naproxen suspension				moxifloxacin (Gen-Vigamox)				Durezol			
Gralise				oxaprozin				ofloxacin				Flarex			
Horizant				piroxicam				polymyxin/trimethoprim				FML Forte			
Lyrica CR				tolmetin				sulfacetamide solution				Ilevro			
<b>NSAIDs</b>				Cambia				tobramycin				Lotemax suspension			
celecoxib cap				Duexis				Ciloxan ointment				Maxidex			
diclofenac potassium 50mg tab				Elyxyb solution				Tobrex ointment				Pred Mild			
diclofenac sodium				Indocin suppository, suspension				bacitracin				bromfenac			
diclofenac ER				Lofena 25mg tablet				bacitracin/polymyxin				difluprednate (Gen-Durezol)			
flurbiprofen				Nalfon				gatifloxacin				loteprednol (Gen-Lotemax)			
ibuprofen Rx				Naprelan CR				levofloxacin				omnipred			
ibuprofen OTC chew tab 100mg*				Relafen DS				moxifloxacin (Gen-Moxeza)				prednisolone sodium phosphate			
ibuprofen OTC				Sprix				neomycin/bacitracin/poly. oint				Acuvail			
indomethacin caps				Tivorbex				neomycin/polymyxin/gramicidin				Bromsite			
ketorolac				Vimovo				sulfacetamide ointment				FML Liquifilm			
meloxicam tablets				Vivlodex				triple antibiotic				FML S.O.P.			
nabumetone				Qmiiz				Azasite				Inveltys			
naproxen Rx				Zipsor				Besivance				Lotemax			
naproxen DS Rx				Zorvolex				Moxeza				Nevanac			
naproxen OTC				* Products are only covered for members 12 years of age or younger				Natacyn				Prolensa			
sulindac				<b>Ophthalmics, Allergic Conjunctivitis</b>				Zymaxid				<b>Ophthalmics, Anti-Inflammatory / Immunomodulator</b>			
diclofenac potassium 25 mg cap (Gen-Zipsor)				cromolyn				<b>Ophthalmics, Antibiotic-Steroid Combinations</b>				Restasis			
diclofenac sodium/misoprostol tablet				ketorolac 0.5%				neomycin/polymyxin/dexameth.				cyclosporine eye emulsion (Gen-Restasis)			
				ketotifen OTC				sulfacetamide/prednisolone							

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

Brand Before Generic Drug Refer to topic #20077

Uses specific Drug PA Form - available via STAT-PA or Paper PA process

Uses specific Drug PA Form - available via Paper PA process only

Uses PA/DGA Form/Sec. VII Paper PA process only Refer to topic #15937

Monthly Changes to the PDL

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

(Effective 06/01/2022)

<b>Ophthalmics, Anti-Inflammatory / Immunomodulator (cont)</b>				<b>Ophthalmics, Glaucoma-Prostaglandins (cont)</b>				<b>Otics, Antibiotics (cont)</b>				<b>Prenatal Vitamins (cont)</b>					
Cequa solution		NP		Lumigan 0.01% 2.5ml, 5ml	SCN	NP		ciprofloxacin/dexamethasone suspension (Gen-Ciprodex)			NP	Completenate tablet chew	SCN	P			
Eysuvis eye drops	SCN	NP		Lumigan 0.01% 7.5ml	SCN	NP		suspension (Gen-Ciprodex)			NP	Elite-OB caplet	SCN	P			
Restasis Multidose	SCN	NP		Vyzulta solution		NP		ciprofloxacin/fluocinolone (Gen-Otovel)			NP	Folivane-OB capsule	SCN	P			
Tyrvaya nasal spray	SCN	NP		Xelpros		NP		Otovel			NP	M-Natal Plus tablet	SCN	P			
Xiidra		NP		Zioptan		NP		<b>Otics, Anti-Infectives &amp; Anesthetics</b>				PNV 29-1 tablet	SCN	P			
<b>Ophthalmics, Glaucoma-Beta Blockers</b>				<b>Opioid Dependency Agents-Buprenorphine</b>				<b>acetic acid</b>				Preplus CA-FE 27mg-FA 1mg tablet	SCN	P			
carteolol		P		buprenorphine/naloxone tab	DR		P	acetic acid HC			NP	Pretab 29mg-1mg tablet	SCN	P			
levobunolol		P		Sublocade*	DR	SCN	P	<b>Pancreatic Enzymes</b>				Purefe OB plus capsule	SCN	P			
timolol (Gen-Timoptic/XE)		P		Suboxone Film	DR	SCN	P	Zenpep DR		SCN	P	Purefe plus capsule	SCN	P			
Betoptic S		P		Zubsolv	DR	SCN	P	Creon DR			NP	SE-Natal 19 chewable tablet	SCN	P			
betaxolol		NP		buprenorphine tabs (without naloxone)	DR		NP	Pancreaze DR			NP	SE-Natal 19 tablet	SCN	P			
timolol (Gen-Istalol)		NP		buprenorphine/naloxone film	DR		NP	Pertzye DR 4,000*			NP	Taron-C DHA capsule	SCN	P			
timolol (Gen-Timoptic Ocodose)		NP		Bunavail	DR	SCN	NP	Pertzye DR 8,000, 16,000, 24,000 Units			NP	Thrivite 19 tablet	SCN	P			
Istalol		NP		*Policy for obtaining provider-administered drugs applies. Refer to topic #5697.				<b>Phosphate Binders</b>				Thrivite RX tablet	SCN	P			
Timoptic Ocodose		NP		<b>Opioid Dependency Agents-Rescue Agent</b>				calcium acetate 667mg capsules, tablets			P	Tricare Prenatal tablet	SCN	P			
<b>Ophthalmics, Glaucoma-Other</b>				<b>naloxone syringe</b>							P	Trinatal RX 1 tablet	SCN	P			
brimonidine 0.2%		P		<b>naloxone vial</b>							P	Virt-C DHA softgel	SCN	P			
dorzolamide		P		<b>Narcain spray</b>					SCN	P		Virt-PN DHA softgel	SCN	P			
dorzolamide w/timolol		P		<b>naloxone nasal spray (Gen-Narcain spray)</b>							NP	Vol-Plus tablet	SCN	P			
pilocarpine		P		<b>Kloxxado spray</b>					SCN	NP		Zatean-PN DHA capsule	SCN	P			
Alphagan P 0.15%	SCN	P		<b>Zimhi syringe</b>					SCN	NP		NOTE: Prenatal Vitamins listed are covered legend and OTC by active ingredient. Prenatal Vitamins not listed are either non-preferred or non-covered.					
Azopt 1%		P		<b>Opioid Dependency Agents-methadone</b>				<b>Phoslyra</b>									
Combigan	SCN	P		<b>methadone dispersible tab</b>							P						
Isopto Carpine 2%		P		<b>methadone concentrate</b>							P						
Rhopressa	SCN	P		<b>Opioid Dependency and Alcohol Abuse / Dependency Agents</b>				<b>Renagel</b>									
Rocklatan		P		<b>naltrexone tab</b>					DR		P						
Simbrinza		P		<b>Vivitrol injection*</b>					DR	SCN	P						
apraclonidine		NP		*Policy for obtaining provider-administered drugs applies. Refer to topic #5697.				<b>Renvela</b>									
brimonidine tartrate 0.15%		NP		<b>Otics, Antibiotics</b>				<b>sevelamer (Gen-Renagel)</b>									
brimonidine tartrate-timolol (Gen-Combigan)		NP		<b>neomycin/polymyxin/HC solution/suspension</b>							NP						
brinzolamide 1% drops (Gen-Azopt)		NP		<b>ofloxacin</b>							NP						
Alphagan P 0.1%	SCN	NP		<b>Cipro HC</b>							P						
Cosopt PF		NP		<b>Ciprodex</b>							P						
lopidine		NP		<b>Coly-mycin S</b>							P						
<b>Ophthalmics, Glaucoma-Prostaglandins</b>				<b>ciprofloxacin</b>					SCN	NP							
latanoprost		P		<b>Prenatal Vitamins</b>				<b>prenatal vitamin plus low iron tablet</b>					SCN	P			
Travatan Z		P															
bimatoprost 0.03% 2.5ml, 5ml		NP															
bimatoprost 0.03% 7.5ml		NP															
travoprost (Gen-Travatan Z)		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

Brand Before Generic Drug Refer to topic #20077

Uses specific Drug PA Form - available via STAT-PA or Paper PA process

Uses specific Drug PA Form - available via Paper PA process only

Uses PA/DGA Form/Sec. VII Paper PA process only Refer to topic #15937

Monthly Changes to the PDL

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

(Effective 06/01/2022)

<b>Proton Pump Inhibitors (cont)</b>				<b>Sickle Cell Anemia</b>				<b>Steroids, Topical Medium</b>				<b>Steroids, Topical Very High (cont)</b>				
rabeprazole			NP	hydroxyurea			P	fluticasone cream, ointment			P	halobetasol propionate cream, ointment			P	
Dexilant DR 30mg, 60mg			NP	Droxia			P	mometasone furoate			P	Clobex shampoo		SCN	P	
Prevacid Solutab			NP	Endari		SCN	P	betamethasone valerate foam			NP	betamethasone dipropionate aug			NP	
Zegerid			NP	Siklos		SCN	P	clocortolone cream (Gen-Cloderm)			NP	clobetazol foam, lotion, shampoo, spray			NP	
<b>Pulmonary Arterial Hypertension</b>				Oxbryta		SCN	NP	flurandrenolide lotion, cream			NP	halobetasol propionate foam			NP	
<b>ambrisentan tablet</b>				<b>Skeletal Muscle Relaxants</b>				flurandrenolide ointment		SCN	NP	Apexicon E		SCN	NP	
sildenafil tablet		DR	P	baclofen			P	fluticasone lotion			NP	Bryhali lotion			NP	
tadalafil tablet		DR	SCN	chlorzoxazone 500mg tablet			P	fluocinolone cream		SCN	NP	Clobex spray			SCN	NP
Opsumit			P	cyclobenzaprine tablet			P	fluocinolone solution, ointment			NP	Impeklo lotion			SCN	NP
Tracleer tablet			P	dantrolene sodium			P	hydrocortisone butyrate cream, ointment, lotion, solution			NP	Lexette foam				NP
bosentan tablet (Gen-Tracleer tablet)			NP	methocarbamol			P	hydrocortisone valerate			NP	Olux-E			SCN	NP
sildenafil suspension		DR	SCN	tizanidine tablet			P	prednicarbate cream		SCN	NP	Ultravate lotion			SCN	NP
Adempas			NP	baclofen susp (Gen-Ozobax)		SCN	NP	prednicarbate ointment			NP	<b>Stimulants</b>				
Alyq		DR	NP	carisoprodol			NP	Beser lotion		SCN	NP	dexamethylphenidate		DR		P
Orenitram ER			SCN	carisoprodol compound			NP	Cloderm			NP	methylphenidate tab (Gen-Ritalin)		DR		P
Revatio suspension		DR	NP	chlorzoxazone 375mg,750mg tabs			NP	Cordran Tape			NP	methylphenidate CD		DR		P
Tracleer suspension			NP	cyclobenzaprine 7.5mg tablet			NP	Cutivate lotion		SCN	NP	methylphenidate chew tab (Gen-Methylin chew)		DR		P
Tyvaso			SCN	cyclobenzaprine ER capsule			NP	Dermatop			NP	methylphenidate ER tab (Gen-Metadate ER and Methylin ER)		DR		P
Uptravi			NP	metaxalone			NP	Luxiq		SCN	NP	methylphenidate LA caps (Gen-Ritalin LA)		DR		P
Ventavis			NP	orphenadrine			NP	Pandel		SCN	NP	methylphenidate solution (Gen-Methylin solution)		DR		P
<b>Sedative Hypnotics</b>				tizanidine capsule			NP	Synalar		SCN	NP	Apentis XR		DR		P
<b>eszopiclone</b>				Amrix			NP	<b>Steroids, Topical High</b>				Concerta		DR		P
<b>melatonin tablets</b>				Fexmid			NP	betamethasone valerate			P	Daytrana		DR	SCN	P
<b>temazepam 15mg, 30mg</b>				Flegsuvy suspension			NP	triamcinolone acetonide			P	Focalin		DR		P
<b>triazolam</b>				Lorzone		SCN	NP	aminonide			NP	Focalin XR		DR		P
<b>zaleplon</b>				Metaxall		SCN	NP	betamethasone dipropionate			NP	Methylin solution		DR	SCN	P
<b>zolpidem</b>				Norgesic Forte tablet		SCN	NP	desoximetasone			NP	Quillichew ER		DR	SCN	P
<b>Rozerem</b>				Soma			NP	diflorasone diacetate			NP	Quillivant XR		DR	SCN	P
doxepin tablet (Gen-Silenor)		SCN	NP	<b>Steroids, Topical Low</b>				fluocinonide			NP	Vyvanse		DR		P
estazolam			NP	hydrocortisone			P	halcinonide 0.1 % (Gen-Halog)		SCN	NP	Vyvanse chewable		DR		P
flurazepam		SCN	NP	hydrocortisone OTC		SCN	P	triamcinolone aerosol spray			NP	amphetamine ER susp (Gen-Adzenys ER susp)		DR	SCN	NP
ramelteon tablet (Gen-Rozerem)			NP	Derma-Smoothe-FS		SCN	P	Diprolene ointment			NP	dextroamphetamine-amphetamine*		DR		NP
temazepam 7.5mg, 22.5mg			NP	Scalpicin 1% liquid		SCN	P	Halog cream, ointment, solution			NP					
zolpidem ER			NP	alclometasone dipropionate cream, ointment			NP	Kenalog aerosol spray			NP					
zolpidem SL			NP	desonide cream, ointment, lotion			NP	Sernivo 0.05% spray		SCN	NP					
Belsomra			NP	fluocinolone oil			NP	Topicort 0.05% ointment			NP					
Dayvigo			NP	hydrocortisone acetate/urea			NP	Topicort 0.25% spray			NP					
Edluar			NP	hydrocortisone/min oil/pet ointment			NP	Trianax		SCN	NP					
Intermezzo			NP	Capex Shampoo		SCN	NP	<b>Steroids, Topical Very High</b>								
Quviviq tablet		SCN	NP	Desonate			NP	clobetasol cream, ointment, solution, gel, emollient			P					
Silenor			NP	Texacort		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

Brand Before Generic Drug Refer to topic #20077

Uses specific Drug PA Form - available via STAT-PA or Paper PA process

Uses specific Drug PA Form - available via Paper PA process only

Uses PA/DGA Form/Sec. VII Paper PA process only Refer to topic #15937

Monthly Changes to the PDL

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

(Effective 06/01/2022)

Stimulants (cont)			
dextroamphetamine-amphetamine ER	DR		NP
amphetamine sulfate (Gen-Evekeo)*	DR		NP
dexmethylphenidate ER caps	DR		NP
dextroamphetamine*	DR		NP
dextroamphetamine ER	DR		NP
dextroamphetamine sol*	DR	SCN	NP
methylphenidate ER caps (Gen-Aptensio XR)	DR		NP
methylphenidate ER tablet (Gen-Concerta)	DR		NP
methylphenidate ER 72mg tab (Gen-Relexxii)	DR	SCN	NP
methamphetamine	DR		NP
Adderall	DR	SCN	NP
Adderall XR	DR		NP
Adhansia XR	DR	SCN	NP
Adzenys ER susp	DR	SCN	NP
Adzenys XR ODT	DR	SCN	NP
Azstarys	DR	SCN	NP
Cotempla XR	DR	SCN	NP
Dexedrine*	DR	SCN	NP
Dyanavel XR	DR	SCN	NP
Evekeo*	DR		NP
Evekeo ODT*	DR		NP
Jornay PM	DR	SCN	NP
Mydayis ER	DR		NP
Relexxii ER	DR	SCN	NP
Ritalin LA	DR		NP
Zenzedi*	DR		NP

Ulcerative Colitis			
balsalazide			P
sulfasalazine			P
Apriso			P
Azulfidine			P
Canasa			P
Lialda			P
Rowasa Kits		SCN	P
Uceris ER			P
budesonide ER (Gen-Uceris ER)			NP
mesalamine DR cap (Gen-Delzicol)			NP
mesalamine DR tab (Gen-Lialda)			NP
mesalamine ER caps (Gen-Apriso)		SCN	NP
mesalamine kits		SCN	NP
mesalamine rectal			NP
Asacol HD			NP
Delzicol			NP
Dipentum			NP
Pentasa			NP
Uceris foam			NP
Zeposia capsule			NP

Brand Name Drugs with Generic Copay	
Drug Name	Start Date
Novolog U-100 Pen/Vial	01/01/2020
Retin-A (not micro)	07/01/2016
Suboxone film	07/01/2020
Tegretol suspension	01/01/2016
Tegretol tablet	01/01/2016
Tegretol XR	01/01/2021
Tobradex suspension	01/01/2012

Brand Name Drugs with Generic Copay	
Drug Name	Start Date
Adderall	01/01/2021
Adderall XR	01/01/2021
Alphagan P 0.15%	01/01/2012
Carbatrol ER	01/01/2021
Catapres-TTS	01/01/2014
Colcrys	01/01/2022
Concerta	01/01/2018
Depakote sprinkle	01/01/2021
Diastat	01/01/2022
Differin 0.1% cream	01/01/2012
Differin 0.3% gel pump	02/01/2017
Felbatol suspension	01/01/2021
Felbatol tablet	01/01/2021
Humalog Jr Kwikpen	05/01/2020
Humalog Mix	05/01/2020
Humalog U-100 Kwikpen/Vial	07/01/2019
Lantus	06/01/2022
Novolog Mix	01/01/2020

\*Prior Authorization not required for members 6 years of age and younger.

Stimulants, Related Agents			
atomoxetine			P
clonidine ER			P
guanfacine ER			P
Qelbree ER		SCN	NP
Stimulants, Related Agents – Wake Promoting			
armodafinil			P
modafinil			P
Sunosi		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

Brand Before Generic Drug Refer to topic #20077

Uses specific Drug PA Form - available via STAT-PA or Paper PA process

Uses specific Drug PA Form - available via Paper PA process only

Uses PA/DGA Form/Sec. VII Paper PA process only Refer to topic #15937

Monthly Changes to the PDL