

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

Revised 02/24/2020 (Effective 03/01/2020)

## 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

Revised 02/24/2020 (Effective 03/01/2020)

Acne Agents, Topical		
benzoyl peroxide OTC 2.5%, 5%, 10%	SCN	P
clindamycin gel (Gen-Cleocin T)		P
clindamycin solution		P
erythromycin gel, solution		P
sodium sulfacetamide-sulfur cleanser/wash/susp		P
Azelex	SCN	P
Differin 0.1% cream	SCN	P
Differin 0.1% lotion	SCN	P
Differin 0.3% gel pump	SCN	P
Epiduo	SCN	P
Retin-A (not micro)		P
NOTE: Topical federal legend acne drugs not listed are either non-preferred or noncovered.		NP
Alzheimer's Agents		
donepezil 5mg, 10mg		P
donepezil ODT 5mg, 10mg		P
memantine solution, tablet, titration pack *		P
rivastigmine caps		P
Exelon patch		P
donepezil 23mg		NP
galantamine		NP
galantamine ER		NP
galantamine solution		NP
memantine ER caps *	DR	NP
rivastigmine patch		NP
Namenda XR *	DR	SCN
Namzaric capsule		NP
Namzaric dose pack		NP
*memantine products are not covered for members 17 years of age or younger		
Analgesics/Anesthetics, Topical		
capsaicin OTC	SCN	P
diclofenac 1% gel (Gen-Voltaren)		P
lidocaine 5% ointment		P
lidocaine 5% trans patch		P

Analgesics/Anesthetics, Topical (cont)		
diclofenac 1.3% patch (Gen-Flector)		NP
diclofenac 1.5% solution (Gen-Pennsaid)		NP
Flector		NP
Pennsaid	SCN	NP
Ztildo	SCN	NP
Analgesics, Miscellaneous		
acetaminophen	SCN	P
aspirin	SCN	P
ibuprofen OTC chewable, suspension, tablets	SCN	P
naproxen OTC	SCN	P
butalbital/apap		NP
butalbital/apap/caffeine		NP
butalbital/apap/caffeine/codeine		NP
butalbital/asa/caffeine		NP
butalbital/asa/caffeine/codeine		NP
Allzital	SCN	NP
Bupap	SCN	NP
Esgic		NP
Analgesics, Opioids Long-Acting		
fentanyl transdermal 12mcg, 25mcg, 50mcg, 75mcg, 100mcg		P
morphine ER tablets		P
tramadol ER tab (Gen-Ultram ER)		P
Butrans transdermal		P
Embeda ER		P
Hysingla ER		P
buprenorphine transdermal		NP
fentanyl transdermal 37.5mcg, 62.5mcg, 87.5mcg		NP
hydrocodone ER (Gen-Zohydro ER)		NP
hydromorphone ER		NP
methadone tablet, solution		NP
morphine ER capsules		NP
oxycodone ER		NP
oxymorphone ER		NP
tramadol ER cap (Gen-Conzip)	SCN	NP

Analgesics, Opioids Long-Acting (cont)		
tramadol ER tab (Gen-Ryzolt)		NP
Arymo ER	SCN	NP
Belbuca Film		NP
Conzip	SCN	NP
Exalgo ER		NP
Kadian		NP
Morphabond ER		NP
Nucynta ER		NP
Oxycontin		NP
Xartemis XR		NP
Xtampza ER	SCN	NP
Zohydro ER	SCN	NP
Analgesics, Opioids Short-Acting		
codeine/apap		P
codeine/asa		P
hydromorphone		P
hydrocodone/apap 325mg		P
hydrocodone/ibuprofen		P
morphine		P
oxycodone solution		P
oxycodone tablets		P
oxycodone/apap 325mg		P
tramadol 50mg tab		P
tramadol/apap 325mg		P
benzhydrocodone/apap tab		NP
butorphanol spray		NP
codeine		NP
dihydrocodeine/apap/caffeine		NP
dihydrocodeine/asa/caffeine		NP
levorphanol		NP
hydrocodone/apap*		NP
hydromorphone liquid		NP
hydromorphone suppository		NP
meperidine		NP
oxycodone/apap*		NP
oxycodone/asa		NP
oxycodone capsules		NP
oxycodone conc		NP
oxycodone/ibuprofen		NP
oxymorphone		NP
pentazocine/naloxone		NP
tramadol 100mg tab		NP

Analgesics, Opioids Short-Acting (cont)		
Capital w-codeine		NP
Dilaudid Liquid		NP
Ibudone		NP
Nalocet	SCN	NP
Nucynta		NP
Oxaydo	SCN	NP
Primlev		NP
Reprexain	SCN	NP
Roxybond		NP
Synalgos-DC		NP
Vicodin 5/300		NP
Vicodin 7.5/300		NP
Vicodin 10/300		NP
Xodol		NP
Zamiset		NP
*Combination products containing any other strength of apap besides 325 mg.		
Analgesics, Opioids Short-Acting – Fentanyl Mucosal Agents		
fentanyl citrate oral transmucosal lozenges		NP
Abstral	SCN	NP
Fentora		NP
Lazanda	SCN	NP
Subsys	SCN	NP
Androgenic Agents		
testosterone gel/pump (Gen-Vogelxo)		P
AndroGel gel/pump		P
testosterone gel/pump (Gen-AndroGel)		NP
testosterone pump (Gen-Axiron and Fortesta)		NP
Androderm		NP
Axiron		NP
Fortesta		NP
Testim	SCN	NP
Vogelxo		NP
Androgenic Agents, Injectable		
testosterone cypionate*		P
testosterone enanthate*		P
Depo-testosterone*		P

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

Revised 02/24/2020 (Effective 03/01/2020)

Androgenic Agents, Injectable (cont)		
Xyosted		NP
* Policy for obtaining provider-administered drugs applies. Refer to topic #5697.		
Angiotensin Modulators, ACE Inhibitors		
benazepril		P
captopril		P
enalapril		P
enalapril/HCTZ		P
fosinopril		P
lisinopril		P
lisinopril/HCTZ		P
ramipril		P
benazepril/HCTZ		NP
captopril/HCTZ	SCN	NP
fosinopril/HCTZ		NP
moexipril		NP
moexipril/HCTZ		NP
perindopril		NP
quinapril		NP
quinapril/HCTZ		NP
trandolapril		NP
Epaned *	SCN	NP
Qbrelis solution	SCN	NP
Prestalia	SCN	NP
*Prior Authorization is not required for members 12 years of age and younger.		
Angiotensin Modulators, ARBs and DRIs		
losartan		P
losartan/HCTZ		P
valsartan		P
valsartan/HCTZ		P
Entresto		P
aliskiren tabs (Gen-Tekturma)	SCN	NP
candesartan tablets		NP
candesartan/HCTZ		NP
eprosartan mesylate	SCN	NP
irbesartan		NP
irbesartan/HCTZ		NP
olmesartan		NP
olmesartan/HCTZ		NP
telmisartan		NP
telmisartan/HCTZ		NP

Angiotensin Modulators, ARBs and DRIs (cont)		
Benicar		NP
Benicar/HCTZ		NP
Edarbi		NP
Edarbyclor		NP
Micardis		NP
Micardis/HCTZ		NP
Tekturma		NP
Tekturma/HCTZ		NP
Angiotensin Modulators, Combination		
amlodipine/benazepril		P
amlodipine/olmesartan		P
amlodipine/olmesartan/HCTZ		P
amlodipine/valsartan		P
amlodipine/valsartan/HCTZ		P
telmisartan/amlodipine		NP
trandolapril/verapamil		NP
Amturnide		NP
Byvalson		NP
Tarka		NP
Tekamlo		NP
Twynsta		NP
Antibiotics, Beta-Lactam		
amoxicillin		P
amoxicillin clavulanate		P
amoxicillin clavulanate 250mg suspension		P
ampicillin		P
cefaclor caps		P
cefadroxil caps, susp		P
cefdinir		P
cephalexin caps, susp		P
cephalexin 750mg	SCN	P
cefprozil	SCN	P
cefuroxime		P
dicloxacillin		P
penicillin		P
Augmentin 125mg susp		P
Ceftin 125mg, 250mg susp	SCN	P
Suprax caps/chew tab/tabs/susp	SCN	P
amoxicillin clavulanate XR		NP

Antibiotics, Beta-Lactam (cont)		
cefaclor tab ER		NP
cefadroxil tablet		NP
cefixime capsule	SCN	NP
cefixime suspension		NP
cefepodoxime		NP
cephalexin tabs		NP
Daxbia	SCN	NP
Spectracef		NP
Antibiotics, GI		
metronidazole tablets		P
neomycin		P
tinidazole		P
vancomycin capsule		P
Firvaq 50mg/ml	SCN	P
Xifaxan		P
metronidazole capsule		NP
Dificid		NP
Flagyl ER		NP
Solosec	SCN	NP
vancomycin 50mg/ml (Gen-Firvaq)	SCN	NP
Antibiotics, Inhaled		
Bethkis	SCN	P
Kitabis Pak	SCN	P
tobramycin		NP
Cayston		NP
Tobi		NP
Tobi Podhaler		NP
Antibiotics, Macrolides/Ketolides		
azithromycin		P
clarithromycin susp, tab		P
erythromycin caps, tabs, granule, suspension		P
E.E.S. filmtab, granules		P
Eryped		P
Ery-Tab DR		P
Erythrocin		P
PCE		P
clarithromycin ER tab		NP
erythromycin filmtab		NP
Antibiotics, Tetracyclines		
doxycycline hyclate capsule		P

Antibiotics, Tetracyclines (cont)		
doxycycline hyclate 20mg tablets		P
doxycycline monohydrate 50mg, 100mg capsules		P
doxycycline monohydrate tablets		P
minocycline caps		P
demeclocycline		NP
doxycycline hyclate DR		NP
doxycycline hyclate tabs		NP
doxycycline monohydrate susp		NP
doxycycline monohydrate 75mg, 150mg capsules		NP
minocycline tabs		NP
minocycline ER		NP
tetracycline		NP
Doryx DR		NP
Minolira ER	SCN	NP
Morgidox caps	SCN	NP
Nuzyra	SCN	NP
Oracea		NP
Solodyn 55mg, 65mg, 80mg, 105mg, 115mg		NP
Vibramycin syrup, suspension		NP
Ximino ER	SCN	NP
Antibiotics, Topical		
bacitracin ointment OTC	SCN	P
bacitracin/polymyxin B oint. OTC	SCN	P
mupirocin ointment		P
neomycin/bacitracin zinc/polymyxin B oint OTC	SCN	P
neomycin/bacitracin zinc/polymyxin B/pramoxine oint. OTC	SCN	P
gentamicin cream, ointment		NP
mupirocin cream		NP
Bactroban nasal	SCN	NP
Centany	SCN	NP
Antibiotics, Vaginal		
clindamycin		P
metronidazole		P
Cleocin ovule		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

Revised 02/24/2020 (Effective 03/01/2020)

Antibiotics, Vaginal (cont)		
Clindesse		P
Nuversa	SCN	P
Vandazole		P
Anticoagulants		
enoxaparin		P
warfarin		P
Eliquis		P
Eliquis Dose Pack		P
Pradaxa		P
Xarelto		P
Xarelto Dose Pack		P
fondaparinux		NP
Arixtra	SCN	NP
Fragmin		NP
Savaysa		NP
Anticonvulsants		
carbamazepine chew tabs		P
carbamazepine ER cap/tab		P
clobazam susp/tabs		P
clonazepam tablets		P
diazepam rectal		P
divalproex tabs		P
divalproex ER tabs		P
divalproex sprinkles		P
ethosuximide		P
felbamate		P
gabapentin caps/tabs		P
lamotrigine		P
lamotrigine dispertabs		P
levetiracetam		P
levetiracetam solution		P
levetiracetam ER		P
oxcarbazepine		P
oxcarbazepine suspension		P
phenobarbital		P
phenytoin		P
pregabalin (Gen-Lyrica)		P
primidone		P
topiramate		P
topiramate sprinkle		P
valproic acid		P
zonisamide		P

Anticonvulsants (cont)		
Celontin		P
Dilantin 30mg cap		P
Dilantin Infatab		P
Gabitril	SCN	P
Lamictal Starter Kits	SCN	P
Peganone		P
Roweepra	SCN	P
Roweepra XR	SCN	P
Sabril	SCN	P
Tegretol tab		P
Tegretol suspension		P
carbamazepine suspension		NP
carbamazepine tab		NP
clonazepam ODT		NP
lamotrigine ER		NP
lamotrigine ODT		NP
tiagabine		NP
topiramate ER		NP
vigabatrin		NP
Aptiom	SCN	NP
Banzel		NP
Briviact		NP
Diacomit	SCN	NP
Epidiolex	SCN	NP
Equetro		NP
Felbatol		NP
Fycompa		NP
Lamictal ODT	SCN	NP
Lamictal ODT Starter Kit	SCN	NP
Lamictal XR	SCN	NP
Lamictal XR Starter Kit	SCN	NP
Nayzilam nasal spray		NP
Oxtellar XR	SCN	NP
Phenytek	SCN	NP
Qudexy		NP
Spritam	SCN	NP
Sympazan	SCN	NP
Trileptal suspension		NP
Trokendi XR	SCN	NP
Vigadrone		NP
Vimpat		NP
Vimpat solution		NP

Antidepressants, Other		
bupropion		P
bupropion SR		P
bupropion XL (Gen-Wellbutrin)		P
desvenlafaxine ER (Gen-Pristiq)		P
duloxetine DR 20mg, 30mg, 60mg caps		P
mirtazapine		P
phenelzine		P
tranylcypromine sulfate		P
trazodone		P
venlafaxine		P
venlafaxine ER capsules		P
Marplan		P
Nardil		P
bupropion XL (Gen-Forfivo XL)	SCN	NP
desvenlafaxine ER (No Brand)		NP
desvenlafaxine fumarate ER		NP
desvenlafaxine ER (Gen-Khedezla)		NP
duloxetine 40mg DR caps		NP
nefazodone		NP
venlafaxine ER tablets		NP
Aplenzin ER		NP
Drizalma sprinkle DR		NP
Emsam		NP
Fetzima		NP
Forfivo XL		NP
Khedezla ER tablets	SCN	NP
Trintellix		NP
Viibryd	SCN	NP
Antidepressants, SSRI		
citalopram		P
escitalopram		P
fluoxetine 10mg, 20mg, 40mg caps		P
fluoxetine solution		P
fluvoxamine		P
paroxetine		P
sertraline		P
Paxil suspension		P

Antidepressants, SSRI (cont)		
fluoxetine 90mg caps		NP
fluoxetine 10mg, 20mg, 60mg tablets		NP
fluvoxamine ER		NP
paroxetine 7.5mg cap (Gen-Brisdelle)		NP
paroxetine CR	SCN	NP
Brisdelle	SCN	NP
Peveva	SCN	NP
Sarafem	SCN	NP
Antiemetics		
granisetron		P
metoclopramide		P
ondansetron		P
ondansetron ODT		P
ondansetron solution		P
prochlorperazine		P
prochlorperazine suppository		P
trimethobenzamide caps		P
Emend capsules		P
aprepitant capsules		NP
metoclopramide ODT		NP
Akynzeo		NP
Anzemet		NP
Emend Powder Packet		NP
Sancuso	SCN	NP
Varubi	SCN	NP
Zuplenz		NP
Antiemetics/Antivertigo		
dimenhydrinate OTC	SCN	P
meclizine		P
meclizine OTC	SCN	P
promethazine		P
promethazine suppository		P
promethazine syrup		P
Diclegis	SCN	P
Transderm-Scop	SCN	P
doxylamine succinate/pyridoxine (Gen-Diclegis)		NP
scopolamine patch		NP
Bonjesta	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

Revised 02/24/2020 (Effective 03/01/2020)

Antiemetics, Cannabinoids		
dronabinol		NP
Cesamet		NP
Antifungals, Oral		
clotrimazole troche		P
fluconazole		P
griseofulvin suspension		P
griseofulvin ultra-microsize tabs		P
itraconazole		P
ketoconazole tablets		P
nystatin		P
terbinafine		P
Noxafil		P
Sporanox (liquid)		P
flucytosine		NP
griseofulvin microsize tablets		NP
itraconazole solution		NP
posaconazole (Gen-Noxafil)	SCN	NP
voriconazole suspension, tab		NP
Ancobon		NP
Cresamba		NP
Grifulvin V Tablets		NP
Onmel	DR	SCN
Oravig		NP
Tolsura		NP
Vfend		NP
Antifungals, Topical		
ciclopirox solution		P
clotrimazole OTC	SCN	P
clotrimazole Rx		P
clotrimazole/betamethasone cream		P
ketoconazole cream, shampoo		P
miconazole OTC	SCN	P
nystatin		P
tolnaftate OTC	SCN	P
Alevazol	SCN	P
ciclopirox cream/gel/shampoo/suspension		NP
clotrimazole/betamethasone lotion		NP

Antifungals, Topical (cont)		
econazole nitrate		NP
ketoconazole foam		NP
luliconazole cream		NP
miconazole/zinc/pet oint	SCN	NP
naftifine cream/gel		NP
nystatin/triamcinolone		NP
oxiconazole cream		NP
Bensal HP	SCN	NP
Ertaczo		NP
Exelderm	SCN	NP
Extina	SCN	NP
Jublia		NP
Kerydin	SCN	NP
Luzu cream		NP
Mentax	SCN	NP
Naftin	SCN	NP
Oxistat	SCN	NP
Vusion	SCN	NP
NOTE: Sprays and Kits are not covered.		
Antihistamines, Minimally Sedating		
cetirizine syrup, tablets	SCN	P
cetirizine D	SCN	P
loratadine syrup, tablets	SCN	P
loratadine D	SCN	P
desloratadine		NP
desloratadine ODT		NP
fexofenadine OTC	SCN	NP
levocetirizine		NP
Clarinet		NP
Clarinet D		NP
Clarinet Syrup		NP
Semprex-D	SCN	NP
Antihypertensives, Sympatholytics		
clonidine (oral)		P
guanfacine		P
methylodopa		P
Catapres-TTS		P
clonidine trans patch		NP
methylodopa/HCTZ	SCN	NP
Antiparasitics, Topical		
permethrin OTC	SCN	P
permethrin Rx		P

Antiparasitics, Topical (cont)		
Eurax Cream		P
Natroba		P
Sklice		P
malathion		NP
spinosad		NP
Crotan Lotion	SCN	NP
Eurax Lotion	SCN	NP
Lindane		NP
Antiparkinson's Agents		
amantadine		P
benztropine		P
bromocriptine		P
carbidopa/levodopa		P
carbidopa/levodopa ER		P
carbidopa/levodopa ODT		P
carbidopa/levodopa/entacapone		P
carbidopa 25mg tab		P
pramipexole		P
ropinirole		P
selegiline		P
trihexyphenidyl		P
entacapone		NP
pramipexole ER		NP
rasagiline		NP
ropinirole ER		NP
tolcapone		NP
Azilect		NP
Comtan		NP
Gocovri ER	SCN	NP
Inbrija	SCN	NP
Neupro patches		NP
Nourianz tablets	SCN	NP
Osmolex ER	SCN	NP
Rytary ER	SCN	NP
Stalevo		NP
Tasmar		NP
Xadago	SCN	NP
Zelapar		NP
Antipsoriatics, Oral		
acitretin		P
methoxsalen		NP

Antipsoriatics, Topical		
calcipotriene cream/ointment/solution		P
calcitrene		P
Taclonex susp		P
Vectical	SCN	P
calcipotriene/betamethasone dipropionate oint		NP
calcipotriene/betamethasone dipropionate susp (Gen-Taclonex)	SCN	NP
calcitriol oint		NP
tazarotene cream		NP
Duobrii lotion		NP
Enstilar	SCN	NP
Sorilux		NP
Tazorac	SCN	NP
Antipsychotics		
aripiprazole*		P
aripiprazole ODT*	SCN	P
amitriptyline/perphenazine*	SCN	P
chlorpromazine*		P
clozapine*		P
fluphenazine*	SCN	P
haloperidol*		P
loxapine*		P
olanzapine*		P
olanzapine ODT*		P
perphenazine*		P
pimozide*		P
quetiapine*		P
quetiapine fumarate ER*		P
risperidone*		P
thiothixene*	SCN	P
trifluoperazine*		P
ziprasidone capsules*		P
Latuda*	SCN	P
clozapine ODT*		NP
molindone tablets*		NP
olanzapine/fluoxetine*		NP
paliperidone ER tablets*		NP
thioridazine*		NP
Abilify MyCite*		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

Revised 02/24/2020 (Effective 03/01/2020)

Antipsychotics (cont)		
Adasuve*		NP
Fanapt*	SCN	NP
Fazaclor*	SCN	NP
Nuplazid*	SCN	NP
Rexulti*		NP
Saphris*		NP
Secuado patch*	SCN	NP
Symbyax*		NP
Versacloz*	SCN	NP
Vraylar*	SCN	NP
*PA required for children 8 years of age and younger. Use PA Drug Attachment for Antipsychotic Drugs for Children 8 Years of Age and Younger.		
Antipsychotics, Injectable		
fluphenazine decanoate *		P
haloperidol decanoate*		P
Abilify Maintena*		P
Aristada*	SCN	P
Aristada Initio ER*	SCN	P
Haldol Decanoate*		P
Invega Sustenna*		P
Invega Trinza*		P
Risperdal Consta*		P
Zyprexa Relprevv*		P
Perseis ER*	SCN	NP
*Policy for obtaining provider-administered drugs applies. Refer to topic #5697.		
Antivirals, Influenza		
oseltamivir		P
Relenza	SCN	P
rimantadine		NP
Tamiflu	SCN	NP
Xofluza		NP
Antivirals, Other		
acyclovir		P
valacyclovir		P
famciclovir		NP
Antivirals, Topical		
Zovirax Cream		P
Zovirax Ointment		P
acyclovir cream		NP

Antivirals, Topical (cont)		
acyclovir ointment		NP
Denavir	SCN	NP
Xerese		NP
Anxiolytics		
alprazolam ER		P
alprazolam intensol, tablet		P
buspirone		P
chlordiazepoxide		P
clorazepate		P
diazepam solution, tablet		P
lorazepam intensol, 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
silodosin capsule		NP
Cardura XL		NP
Rapaflo		NP
Beta Blockers		
atenolol		P
atenolol/chlorthalidone		P
bisoprolol		P
bisoprolol/HCTZ		P
carvedilol		P
labetalol		P
metoprolol		P
metoprolol ER		P
propranolol		P
propranolol ER		P
sotalol		P
acebutolol		NP
betaxolol		NP
carvedilol ER		NP

Beta Blockers (cont)		
metoprolol/HCTZ		NP
nadolol		NP
nadolol bendroflumethiazide		NP
pindolol		NP
propranolol/HCTZ	SCN	NP
timolol		NP
Bystolic	SCN	NP
Coreg CR	SCN	NP
Hemangeol	SCN	NP
Inderal XL		NP
Innopran XL		NP
Kapsargo sprinkles		NP
Levitol		NP
Lopressor HCT		NP
Sotylize		NP
Bile Salts		
ursodiol		P
Chenodal	SCN	NP
Cholbam	SCN	NP
Ocaliva	SCN	NP
Bladder Relaxant Preparations		
oxybutynin		P
oxybutynin ER		P
oxybutynin syrup		P
Enablex	SCN	P
Toviaz		P
VesiCare		
darifenacin ER		NP
solifenacin tabs		NP
tolterodine		NP
tolterodine ER		NP
tropium		NP
tropium ER		NP
Detrol, LA		NP
Gelnique		NP
Myrbetriq ER		NP
Oxytrol	SCN	NP
Bone Resorption Suppression		
alendronate		P
calcitonin-salmon nasal		P
alendronate sodium solution	SCN	NP
etidronate		NP

Bone Resorption Suppression (cont)		
ibandronate		NP
raloxifene		NP
risedronate		NP
Actonel	SCN	NP
Atelvia	SCN	NP
Binosto	SCN	NP
Boniva	SCN	NP
Forteo		NP
Fosamax Plus D		NP
Tymlos		NP
Bronchodilators, Beta Agonists		
albuterol		P
albuterol ER	SCN	P
albuterol neb (2.5mg/0.5ml)		P
albuterol neb (2.5mg/3ml)		P
albuterol neb (100mg/20ml)		P
albuterol neb low-dose (0.63mg/3ml)		P
albuterol neb low-dose (1.25mg/3ml)		P
terbutaline tablets		P
Proair HFA		P
Proventil HFA		P
Serevent	SCN	P
albuterol HFA		NP
levalbuterol nebulizer		NP
levalbuterol HFA		NP
metaproterenol		NP
Arcapta		NP
Brovana	SCN	NP
Perforomist	SCN	NP
ProAir Digihaler		NP
ProAir Respiclick		NP
Striverdi Respimat		NP
Ventolin HFA	SCN	NP
Xopenex HFA	SCN	NP
Calcium Channel Blocking Agents		
amlodipine		P
diltiazem		P
diltiazem ER capsules	SCN	P
nifedipine ER		P
nifedipine IR		P

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

Revised 02/24/2020 (Effective 03/01/2020)

Calcium Channel Blocking Agents (cont)		
nimodipine		P
verapamil tablets		P
verapamil ER tablet		P
verapamil SR tablet		P
diltiazem ER tablets	SCN	NP
felodipine ER		NP
isradipine		NP
nicardipine		NP
nisoldipine	SCN	NP
verapamil ER capsule	SCN	NP
verapamil SR capsule		NP
verapamil ER PM	SCN	NP
verapamil 360mg capsule		NP
Cardizem LA		NP
Katerzia suspension	SCN	NP
Matzim LA		NP
Nymalize solution		NP
COPD Agents		
ipratropium nebulizer		P
ipratropium/albuterol nebulizer		P
Atrovent HFA		P
Bevespi Aerosphere		P
Combivent Respimat		P
Spiriva		P
Stiolto Respimat		P
Anoro Ellipta	SCN	NP
Daliresp		NP
Duaklir Pressair	SCN	NP
Incruse Ellipta	SCN	NP
Lonhala Magnair Kits	SCN	NP
Seebri Neohaler		NP
Spiriva Respimat		NP
Trelegy Ellipta	SCN	NP
Tudorza Pressair		NP
Utibron Neohaler		NP
Yupelri	SCN	NP
Cough and Cold – Narcotic Liquids		
guaifenesin/codeine		P
phenylephrine/promethazine/codeine		P
promethazine/codeine		P

Cough and Cold – Narcotic Liquids (cont)		
<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>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		P
Humira		P
Otezla		P
Actemra	SCN	NP
Cosentyx		NP
Cimzia		NP
Kevzara		NP
Kineret		NP
Olumiant		NP
Orencia		NP
Rinvoq ER		NP
Silig		NP
Simponi		NP
Skyrizi		NP
Stelara		NP
Taltz		NP
Tremfya		NP
Xeljanz		NP
Xeljanz XR		NP
Epinephrine, Self Injected		
epinephrine auto inject (Gen-EpiPen)		P
epinephrine 0.15 MG (Gen-EpiPen JR)	SCN	P
epinephrine 0.3 MG (AG EpiPen)	SCN	P
epinephrine 0.15 MG (AG AdrenaClick)**		P
epinephrine 0.3 MG (AG AdrenaClick)**		P
EpiPen JR 0.15 MG**	SCN	P

Epinephrine, Self Injected (cont)		
EpiPen 0.3 MG **	SCN	P
Symjepi		NP
<b>** Products added as preferred temporarily due to shortage</b>		
Erythropoiesis Stimulating Proteins		
Aranesp		P
Epogen		P
Mircera	SCN	NP
Procrit		NP
Retacrit	SCN	NP
Fibromyalgia		
duloxetine DR 20mg, 30mg, 60mg caps		P
pregabalin (Gen-Lyrica)		P
Savella	SCN	P
duloxetine 40mg DR caps		NP
Fluoroquinolones		
ciprofloxacin		P
levofloxacin tablets		P
ciprofloxacin suspension		NP
ciprofloxacin ER	SCN	NP
levofloxacin solution		NP
moxifloxacin		NP
ofloxacin		NP
Avelox		NP
Baxdela tablet	SCN	NP
Cipro suspension		NP
GI Motility, Chronic – Constipation		
Amitiza		P
Linzess	SCN	P
Movantik		P
Motegrity		NP
Relistor tablet		NP
Symproic		NP
Trulance	SCN	NP
GI Motility, Chronic – Diarrhea		
Lotronex	SCN	P
Xifaxan 550mg		P
alosetron		NP
Viberzi	SCN	NP
Glucocorticoids, Inhaled		
budesonide respules		P

Glucocorticoids, Inhaled (cont)		
Advair Diskus	SCN	P
Advair HFA	SCN	P
Asmanex		P
Dulera		P
Flovent HFA	SCN	P
Pulmicort Flexhaler		P
Symbicort		P
budesonide/formoterol (Gen-Symbicort)	SCN	NP
fluticasone/salmeterol (Gen-Advair Diskus)	SCN	NP
fluticasone/salmeterol (Gen-Airduo Respiclick)		NP
Aerospan HFA Inhaler		NP
AirDuo Respiclick		NP
Alvesco Inhaler	SCN	NP
Armonair Respiclick		NP
Arnuity Ellipta	SCN	NP
Asmanex HFA		NP
Breo Ellipta Inhaler	SCN	NP
Flovent Diskus	SCN	NP
Qvar Redihaler		NP
Trelegy Ellipta	SCN	NP
Wixela Inhalation	SCN	NP
Glucocorticoids, Oral		
budesonide EC capsule		P
dexamethasone elixir		P
dexamethasone intensol		P
dexamethasone solution		P
dexamethasone tablet		P
hydrocortisone		P
methylprednisolone Dose PK		P
methylprednisolone tablet		P
prednisolone sod phosphate ODT	SCN	P
prednisolone sod phosphate solution 5mg/5ml		P
prednisolone sod phosphate solution 15mg/5ml		P
prednisolone sod phosphate solution 25mg/5ml		P
prednisone intensol		P

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

Revised 02/24/2020 (Effective 03/01/2020)

Glucocorticoids, Oral (cont)		
prednisone dose pack, solution, tablet		P
cortisone		NP
dexamethasone Dose PK		NP
prednisolone sodium phosphate solution 10mg/5ml		NP
prednisolone sodium phosphate solution 20mg/5ml		NP
Decadron	SCN	NP
Dexpak		NP
Dxevo tablet	SCN	NP
Emflaza	SCN	NP
Medrol tablet		NP
Millipred dose pack, solution, tablet	SCN	NP
Rayos tablet DR	SCN	NP
TaperDex	SCN	NP
Gout Agents		
allopurinol		P
colchicine cap (Gen-Mitigare)		P
indomethacin		P
naproxen Rx		P
Probenecid		P
Probenecid/colchicine		P
colchicine tablet (Gen-Colcrys)		NP
febuxostat tab (Gen-Uloric)	SCN	NP
naproxen suspension		NP
Colcrys		NP
Gloperba solution	SCN	NP
Mitigare	SCN	NP
Uloric		NP
Growth Hormone		
Genotropin		P
Norditropin	SCN	P
Humatrope		NP
Nutropin AQ		NP
Omnitrope		NP
Saizen		NP
Serostim	SCN	NP
Zomacton	SCN	NP
Zorbtive	SCN	NP

H2 Antagonists		
cimetidine solution, tablet		P
famotidine tablet		P
ranitidine syrup, tablet		P
famotidine suspension*		NP
nizatidine capsules, solution		NP
ranitidine capsules		NP
*Prior Authorization not required for members 18 years of age and younger		
Hepatitis B Agents		
entecavir tablet		P
lamivudine	SCN	P
Baraclude solution		P
Epivir HBV Soln	SCN	P
Hepsera		P
adefovir dipivoxal		NP
Vemlidy		NP
Hepatitis C Agents		
Epclusa		P
Harvoni		P
Mavyret		P
Zepatier		P
ledipasvir/sofosbuvir (Gen-Harvoni)	SCN	NP
sofosbuvir/velpatasvir (Gen-Epclusa)	SCN	NP
Daklinza		NP
Sovaldi		NP
Vosevi		NP
Hepatitis C Agents-Interferon		
Pegasys	SCN	P
Peg-Intron Redipen		P
Hepatitis C Agents-Ribavirin		
ribavirin		P
Moderiba		NP
Rebetol Solution		NP
Ribapak		NP
Ribapshere		NP
H. Pylori		
lansoprazole/amoxicillin/clarithromycin		P
Pylera		P
Omeclamox Pak	SCN	NP

Hypoglycemics, Alpha-Glucosidase Inhibitors		
acarbose		P
Glyset		P
miglitol		NP
Hypoglycemics, DPP-4 Inhibitors		
Glyxambi		P
Janumet		P
Janumet XR		P
Januvia		P
Jentadueto		P
Tradjenta		P
alogliptin		NP
alogliptin/metformin		NP
alogliptin/pioglitazone		NP
Jentadueto XR		NP
Kazano		NP
Kombiglyze XR		NP
Nesina		NP
Onglyza		NP
Oseni		NP
Hypoglycemics, GLP 1		
Bydureon Pen		P
Byetta		P
Trulicity		P
Victoza	SCN	P
Adlyxin		NP
Bydureon BCise		NP
Rybelsus tablets	SCN	NP
Ozempic	SCN	NP
Hypoglycemics, GLP 1-Combinations		
Soliqua		NP
Xultophy	SCN	NP
Hypoglycemics, Insulins		
Humalog Mix		P
Humalog U-100 Cart/ Kwikpen/Vial		P
Humulin 70-30		P
Humulin N U-100 Kwikpen / Vial		P
Humulin R U-100 Vial		P
Humulin R U-500 Vial		P
Novolog Mix	SCN	P

Hypoglycemics, Insulins (cont)		
Novolog U-100 Cartridge/ Pen/Vial	SCN	P
insulin aspart U-100 cartridge/ pen/ vial (Gen-Novolog)	SCN	NP
insulin aspart/protamine pen/ vial (Gen-Novolog Mix)	SCN	NP
insulin lispro U-100 Kwikpen / Vial (Gen-Humalog Kwikpen / Vial)	SCN	NP
Admelog		NP
Afrezza	SCN	NP
Apidra		NP
Fiasp	SCN	NP
Humalog Jr. Kwikpen		NP
Humalog U-200 Kwikpen		NP
Humulin R U-500 Kwikpen		NP
Novolin	SCN	NP
Hypoglycemics, Insulins Long-Acting		
Lantus		P
Levemir	SCN	P
Basaglar		NP
Toujeo Solostar		NP
Toujeo Max Solostar		NP
Tresiba Flextouch	SCN	NP
Tresiba vial	SCN	NP
Hypoglycemics, Meglitinides		
repaglinide		P
nateglinide		NP
repaglinide/metformin		NP
Hypoglycemics, Other		
metformin		P
metformin ER (Gen-Glucophage ER)		P
Farxiga		P
Invokana		P
Jardiance		P
Welchol		P
colessevelam (Gen-Welchol)		NP
metformin ER (Gen-Glumetza ER)		NP
metformin ER OSM-tab		NP
Cycloset		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

Revised 02/24/2020 (Effective 03/01/2020)

Hypoglycemics, Other (cont)		
Glumetza ER		NP
Invokamet		NP
Invokamet XR		NP
Qtern		NP
Riomet		NP
Riomet ER		NP
Segluromet		NP
Steglatro		NP
Steglujan		NP
Synjardy		NP
Synjardy XR		NP
Xigduo XR		NP
Hypoglycemics, Sulfonylureas		
glimepiride		P
glipizide		P
glipizide ER		P
glyburide		P
glyburide/metformin		P
chlorpropamide	SCN	NP
glipizide/metformin		NP
tolazamide	SCN	NP
tolbutamide	SCN	NP
Hypoglycemics, Symlin		
Symlin		P
Hypoglycemics, Thiazolidinediones		
pioglitazone		P
pioglitazone-glimepiride		NP
pioglitazone-metformin		NP
Actoplus MET		NP
Actoplus MET XR		NP
Avandia	SCN	NP
Immunomodulators, Atopic Dermatitis		
Elidel		P
Protopic	SCN	P
pimecrolimus cream	SCN	NP
tacrolimus		NP
Dupixent		NP
Eucrisa 2%	SCN	NP
Immunomodulators, Topical		
imiquimod 5% cream		P
imiquimod 3.75% cream	SCN	NP
Zyclara		NP

Intranasal Rhinitis Agents		
azelastine (Gen-Astelin)		P
fluticasone RX		P
ipratropium		P
Beconase AQ	SCN	P
azelastine (Gen-Astepro)		NP
flunisolide		NP
mometasone furoate spray*		NP
olopatadine		NP
Astepro		NP
Dymista		NP
Nasonex*		NP
Omnaris	SCN	NP
Qnasl		NP
Xhance	SCN	NP
Zetonna	SCN	NP
*Prior Authorization not required for members 6 years of age and younger.		
Leukotriene Modifiers		
montelukast chew tab, tabs		P
montelukast granules		NP
zafirlukast		NP
zileuton ER		NP
Zyflo	SCN	NP
Lipotropics, Apo-B Inhibitors		
Juxtapid	SCN	NP
Kynamro	SCN	NP
Lipotropics, Bile Acid Sequestrants		
cholestyramine		P
colestipol tablet		P
Welchol		P
colesevelam (Gen-Welchol)		NP
colestipol granules		NP
Colestid granules		NP
Lipotropics, Fibric Acids		
fenofibrate tab (Gen-Tricor)		P
fenofibric acid (Gen-Trilipix)		P
gemfibrozil		P
fenofibrate (Gen-Antara, Fenoglide, Lipofen, Lofibra)		NP
fenofibrate (Gen-Triglide)	SCN	NP
fenofibric acid (Gen-Fibrocor)		NP
Antara	SCN	NP

Lipotropics, Fibric Acids (cont)		
Fenoglide		NP
Fibracor	SCN	NP
Lipofen	SCN	NP
Triglide	SCN	NP
Lipotropics, Niacin		
niacin ER tabs (RX)		P
Niacor		P
Lipotropics, Omega-3 Acids		
omega-3 acid ethyl esters	DAPO	P
Vascepa	SCN DAPO	NP
Lipotropics, Other		
atorvastatin		P
ezetimibe		P
lovastatin		P
pravastatin		P
rosuvastatin		P
simvastatin		P
amlodipine/atorvastatin		NP
ezetimibe/simvastatin		NP
fluvastatin		NP
fluvastatin ER		NP
Altprev	SCN	NP
Caduet		NP
Ezallor sprinkles		NP
Lescol XL		NP
Livalo	SCN	NP
Vytorin		NP
Zypitamag	SCN	NP
Lipotropics, PCSK9 Inhibitors		
Praluent		NP
Repatha		NP
Methotrexate		
methotrexate tablet		P
methotrexate PF vial		P
methotrexate vial		P
Otrexup Auto Injector	SCN	NP
Rasuvo Auto Injector		NP
Trexall tablet	SCN	NP
Migraine Agents, CGRP Antagonists		
Emgality 100mg		P
Emgality 120mg		P
Aimovig		NP

Migraine Agents, CGRP Antagonists (cont)		
Ajovy	SCN	NP
Migraine Agents, Other		
rizatriptan		P
sumatriptan nasal spray, tabs		P
Relpax		P
almotriptan		NP
eletriptan		NP
frovatriptan		NP
naratriptan		NP
sumatriptan/naproxen tablets		NP
zolmitriptan tablets		NP
zolmitriptan ODT		NP
Cambia	SCN	NP
Onzetra	SCN	NP
Tosymra nasal spray	SCN	NP
Treximet	SCN	NP
Ubrelvy	SCN	NP
Zomig Nasal Spray	SCN	NP
Migraine Agents, Injectable		
sumatriptan injectable		P
Sumavel		NP
Zembrace	SCN	NP
Multiple Sclerosis Agents, Immunomodulators		
Aubagio		P
Avonex		P
Betaseron		P
Copaxone 20mg, 40mg		P
Gilenya		P
Rebif	SCN	P
Rebif Rebifose	SCN	P
glatiramer	SCN	NP
Extavia		NP
Glatopa		NP
Mavenclad	SCN	NP
Mayzent		NP
Plegridy	SCN	NP
Tecfidera	SCN	NP
Vumerity DR capsule	SCN	NP
Multiple Sclerosis Agents, Other		
dalfampridine ER	SCN	NP
Ampyra ER	SCN	NP

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

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

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

Revised 02/24/2020 (Effective 03/01/2020)

Neuropathic Pain			
duloxetine DR 20mg, 30mg, 60mg caps			P
gabapentin			P
pregabalin (Gen-Lyrica)			P
duloxetine 40mg DR caps			NP
Drizalma sprinkle DR			NP
Gralise	DR	SCN	NP
Horizant	DR		NP
Lyrica CR	DR		NP
NSAIDs			
celecoxib cap			P
diclofenac potassium			P
diclofenac sodium			P
diclofenac ER			P
flurbiprofen			P
ibuprofen Rx			P
ibuprofen OTC		SCN	P
indomethacin caps			P
ketoprofen			P
ketorolac			P
meloxicam tablets			P
nabumetone			P
naproxen Rx			P
naproxen DS Rx			P
naproxen OTC		SCN	P
sulindac			P
diclofenac sodium/misoprostol			NP
diclofenac solution			NP
diflunisal			NP
etodolac			NP
etodolac XL			NP
fenoprofen		SCN	NP
indomethacin ER			NP
ketoprofen ER caps		SCN	NP
meclufenamate		SCN	NP
mefenamic acid			NP
naproxen CR			NP
naproxen EC		SCN	NP
naproxen sodium Rx			NP
naproxen suspension		SCN	NP
oxaprozin			NP
piroxicam			NP

NSAIDs (cont)			
tolmetin			NP
Duexis		SCN	NP
Indocin suppository		SCN	NP
Indocin suspension		SCN	NP
Nalfon		SCN	NP
Naprelan CR			NP
Relafen DS		SCN	NP
Sprix		SCN	NP
Tivorbex		SCN	NP
Vimovo		SCN	NP
Vivlodex		SCN	NP
Qmiiz		SCN	NP
Zipsor		SCN	NP
Zorvolex		SCN	NP
Ophthalmics, Allergic Conjunctivitis			
cromolyn			P
ketorolac 0.5%			P
ketotifen OTC		SCN	P
olopatadine 0.1% drops (Gen-Patanol)			P
Alaway OTC		SCN	P
Alrex			P
Pazeo			P
azelastine			NP
epinastine			NP
olopatadine 0.2% drops (Gen-Pataday)			NP
Alocril			NP
Alomide			NP
Bepreve			NP
Emadine			NP
Lastacaft			NP
Pataday			NP
Ophthalmics, Antibacterial			
ciprofloxacin solution			P
erythromycin			P
gentamicin drops			P
moxifloxacin (Gen-Vigamox)			P
ofloxacin			P
polymyxin/trimethoprim			P
sulfacetamide oint, solution			P
tobramycin			P

Ophthalmics, Antibacterial (cont)			
Ciloxan ointment			P
Moxeza			P
Tobrex ointment			P
bacitracin			NP
bacitracin/polymyxin			NP
gatifloxacin			NP
levofloxacin			NP
neomycin/bacitracin/polymyxin ointment			NP
neomycin/polymyxin/gramicidin			NP
triple antibiotic			NP
Aziasite			NP
Besivance			NP
Natacyn			NP
Zymaxid			NP
Ophthalmics, Antibiotic-Steroid Combinations			
neomycin/polymyxin/dexamethasone			P
sulfacetamide/prednisolone			P
Blephamide		SCN	P
Pred-G drops, ointment			P
Tobradex ointment, suspension			P
neomycin/bacitracin/poly/LHC			NP
neomycin/polymyxin/LHC drops			NP
tobramycin/dexamethasone			NP
Blephamide S.O.P.		SCN	NP
Tobradex ST			NP
Zylet			NP
Ophthalmics, Anti-Inflammatories			
dexamethasone			P
fluorometholone			P
flurbiprofen			P
ketorolac LS 0.4%			P
prednisolone acetate			P
prednisolone sodium phosphate			P
Durezol			P
Flarex			P
FML Forte			P
Ilevro			P

Ophthalmics, Anti-Inflammatories (cont)			
Lotemax solution			P
Maxidex			P
Pred Mild		SCN	P
bromfenac			NP
diclofenac			NP
loteprednol drop (Gen-Lotemax)			NP
omnipred			NP
Acuvail			NP
Bromsite			NP
FML Liquifilm			NP
FML S.O.P.		SCN	NP
Inveltys		SCN	NP
Lotemax gel, ointment			NP
Nevanac			NP
Prolensa			NP
Ophthalmics, Anti-Inflammatory / Immunomodulator			
Restasis		SCN	P
Cequa solution			NP
Restasis Multidose		SCN	NP
Xiidra			NP
Ophthalmics, Glaucoma-Beta Blockers			
carteolol			P
levobunolol			P
timolol (Gen-Timoptic/XE)			P
Betoptol S			P
betaxolol			NP
Istalol			NP
timolol (Gen-Istalol)			NP
Timoptic Ocudose			NP
Ophthalmics, Glaucoma-Other			
brimonidine 0.2%			P
dorzolamide			P
dorzolamide w/timolol			P
pilocarpine			P
Alphagan P 0.15%		SCN	P
Azopt			P
Combigan		SCN	P
Isopto Carpine 2%			P
Simbrinza			P
apraclonidine			NP
brimonidine tartrate 0.15%			NP

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

Revised 02/24/2020 (Effective 03/01/2020)

Ophthalmics, Glaucoma-Other (cont)			
Alphagan P 0.1%	SCN		NP
Cosopt PF			NP
lopidine			NP
Rocklatan			NP
Rhopressa	SCN		NP
Ophthalmics, Glaucoma-Prostaglandins			
latanoprost			P
Travatan Z			P
bimatoprost 0.03% 2.5ml, 5ml			NP
bimatoprost 0.03% 7.5ml			NP
travoprost (Gen-Travatan Z)			NP
Lumigan 0.01% 2.5ml, 5ml	SCN		NP
Lumigan 0.01% 7.5ml	SCN		NP
Vyzulta solution			NP
Xelpros			NP
Zioptan			NP
Opioid Dependency Agents-Buprenorphine			
Suboxone Film	DR	SCN	P
Zubsolv	DR	SCN	P
buprenorphine tabs (without naloxone)	DR		NP
buprenorphine/naloxone film	DR		NP
buprenorphine/naloxone tab	DR		NP
Bunavail	DR	SCN	NP
Sublocade*	DR	SCN	NP
*Policy for obtaining provider-administered drugs applies. Refer to topic #5697.			
Opioid Dependency Agents-Rescue Agent			
naloxone syringe			P
naloxone vial			P
Narcan spray		SCN	P
Opioid Dependency Agents-methadone			
methadone dispersible tab	DR		P
methadone concentrate	DR		P
Opioid Dependency and Alcohol Abuse / Dependency Agents			
naltrexone tab	DR		P
Vivitrol injection*	DR	SCN	P
*Policy for obtaining provider-administered drugs applies. Refer to topic #5697.			

Otics, Antibiotics			
neomycin/polymyxin/HC solution/suspension			P
ofloxacin			P
Cipro HC			P
Coly-mycin S			P
ciprofloxacin	SCN		NP
ciprofloxacin/fluocinolone (Gen-Otovel)			NP
Ciprodex*			NP
Otovel			NP
*Prior Authorization not required for members 6 years of age and younger.			
Otics, Anti-Infectives & Anesthetics			
acetic acid			P
acetic acid HC			NP
Pancreatic Enzymes			
Zenpep DR	SCN		P
Creon DR			NP
Pancreaze DR			NP
Pertzye DR 4,000*			NP
Pertzye DR 8,000, 16,000, 24,000			NP
Viokace			NP
*Prior Authorization not required for members 1 year of age and younger.			
Phosphate Binders			
calcium acetate 667mg capsules/tablets			P
Phoslyra	SCN		P
Renagel			P
lanthanum carbonate			NP
sevelamer (Gen-Renagel)			NP
sevelamer (Gen-Renvela)			NP
Auryxia	SCN		NP
Eliphos	SCN		NP
Fosrenol			NP
Magnebind			NP
Renvela			NP
Velphoro	SCN		NP
Platelet Aggregation Inhibitors			
aspirin	SCN		P
clopidogrel			P

Platelet Aggregation Inhibitors (cont)			
dipyridamole			P
prasugrel			P
Aggrenox			P
Brilinta			P
aspirin/dipyridamole			NP
ticlopidine			NP
Yosprala	SCN		NP
Zontivity			NP
Prenatal Vitamins			
prenatal vitamin + low iron	SCN		P
Completenate tablet chew	SCN		P
Elite-OB caplet	SCN		P
Folvivene-OB capsule	SCN		P
M-Natal Plus tablet	SCN		P
PNV 29-1 tablet	SCN		P
Preplus CA-FE 27mg-FA 1mg tablet	SCN		P
Pretab 29mg-1mg tablet	SCN		P
SE-Natal 19 chewable tablet	SCN		P
SE-Natal 19 tablet	SCN		P
Taron-C DHA capsule	SCN		P
Thrivite 19 tablet	SCN		P
Trinatal RX 1 tablet	SCN		P
Virt-PN DHA softgel	SCN		P
Vol-Nate tablet	SCN		P
Vol-Plus tablet	SCN		P
Vol-Tab RX tablet	SCN		P
Zatean-PN DHA capsule	SCN		P
NOTE: Prenatal Vitamins listed are covered legend and OTC by active ingredient. Prenatal Vitamins not listed are either non-preferred or non-covered.			NP
Proton Pump Inhibitors			
esomeprazole magnesium			P
lansoprazole DR			P
omeprazole RX			P
pantoprazole			P
Nexium Packet			P
Prilosec suspension			P
Protonix suspension			P
esomeprazole strontium			NP
lansoprazole ODT (solutab)			NP

Proton Pump Inhibitors (cont)			
omeprazole-bicarb RX			NP
rabeprazole			NP
Dexilant DR 30mg, 60mg			NP
Prevacid Solutab			NP
Zegerid			NP
Pulmonary Arterial Hypertension			
sildenafil tablet	DR		P
Adcirca	DR	SCN	P
Letairis			P
Opsumit			P
Tracleer tablet			P
ambrisentan tabs			NP
bosentan tabs			NP
sildenafil susp	DR	SCN	NP
tadalafil tablet	DR	SCN	NP
Adempas			NP
Alyq	DR		NP
Orenitram ER		SCN	NP
Revatio suspension	DR		NP
Tracleer suspension			NP
Tyvaso		SCN	NP
Upravi			NP
Ventavis			NP
Sedative Hypnotics			
estazolam			P
eszopiclone			P
temazepam 15mg, 30mg			P
triazolam			P
zaleplon			P
zolpidem			P
Rozerem			P
doxepin tablet (Gen-Silenor)	SCN		NP
flurazepam	SCN		NP
ramelteon tab (Gen-Rozerem)			NP
temazepam 7.5mg, 22.5mg			NP
zolpidem ER			NP
zolpidem SL			NP
Belsomra			NP
Eduar			NP
Intermezzo			NP
Silenor			NP
Zolpimist	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

Revised 02/24/2020 (Effective 03/01/2020)

Skeletal Muscle Relaxants		
baclofen		P
chlorzoxazone 500mg tabs		P
cyclobenzaprine tabs		P
dantrolene sodium		P
methocarbamol		P
tizanidine tablets		P
carisoprodol		NP
carisoprodol compound		NP
chlorzoxazone 375mg, 750mg	SCN	NP
cyclobenzaprine 7.5mg tablet		NP
cyclobenzaprine ER capsule		NP
metaxalone		NP
orphenadrine		NP
tizanidine capsules		NP
Amrix		NP
Fexmid		NP
Lorzone	SCN	NP
Metaxall	SCN	NP
Norgesic Forte tabs	SCN	NP
Soma		NP
Steroids, Topical Low		
hydrocortisone		P
hydrocortisone OTC	SCN	P
Derma-Smoother-FS	SCN	P
Scalpicin 1% liquid	SCN	P
alclometasone dipropionate cream/oint		NP
desonide cream/oint/lotion		NP
fluocinolone oil		NP
hydrocortisone acetate/urea		NP
hydrocortisone/min oil/pet oint		NP
Capex Shampoo	SCN	NP
Desonate		NP
Texacort	SCN	NP
Steroids, Topical Medium		
fluticasone cream/ointment		P
mometasone furoate		P
betamethasone valerate foam		NP
clocortolone		NP
flurandrenolide lotion/cream		NP
flurandrenolide ointment	SCN	NP
fluticasone lotion		NP

Steroids, Topical Medium (cont)		
fluocinolone cream	SCN	NP
fluocinolone solution/ointment		NP
hydrocortisone butyrate cream/oint/lotion/solution		NP
hydrocortisone valerate		NP
prednicarbate cream	SCN	NP
prednicarbate ointment		NP
Beser lotion	SCN	NP
Cloderm		NP
Cordran Tape		NP
Cutivate lotion	SCN	NP
Dermatop		NP
Luxiq	SCN	NP
Pandel	SCN	NP
Synalar	SCN	NP
Steroids, Topical High		
betamethasone valerate		P
triamcinolone acetonide		P
amcinonide		NP
betamethasone dipropionate		NP
desoximetasone		NP
diflorasone diacetate		NP
fluocinonide		NP
halcinonide cream (Gen-Halog)	SCN	NP
Diprolene ointment		NP
Halog	SCN	NP
Kenalog aerosol spray		NP
Sernivo 0.05% spray	SCN	NP
Topicort 0.05% ointment		NP
Topicort 0.25% spray		NP
Trianex	SCN	NP
Steroids, Topical Very High		
clobetasol cream/oint/solution/gel/emollient		P
halobetasol prop oint, cream		P
Clobex lotion, shampoo	SCN	P
betamethasone dipropionate augmented		NP
clobetasol foam/lotion/shampoo/spray		NP
halobetasol propionate foam		NP
Apexicon E	SCN	NP

Steroids, Topical Very High (cont)			
Bryhali lotion		NP	
Clobex spray	SCN	NP	
Lexette foam		NP	
Olux-E	SCN	NP	
Ultravate lotion	SCN	NP	
Stimulants			
dexmethylphenidate	DR	P	
methylphenidate tab (Gen-Ritalin)	DR	P	
methylphenidate CD	DR	P	
methylphenidate chew tab (Gen-Methylin chew)	DR	P	
methylphenidate ER tab (Gen-Metadate ER and Methylin ER)	DR	P	
methylphenidate LA caps (Gen-Ritalin LA)	DR	P	
methylphenidate solution (Gen-Methylin solution)	DR	P	
Aptensio XR	DR	P	
Concerta	DR	P	
Daytrana	DR	SCN	P
Focalin	DR	P	
Focalin XR	DR	P	
Metadate ER tablet	DR	P	
Methylin solution	DR	SCN	P
Quillichew ER	DR	SCN	P
Quillivant XR	DR	SCN	P
Vyvanse	DR	P	
Vyvanse chewable	DR	P	
amphetamine ER susp (Gen-Adzenys ER susp)	DR	SCN	NP
amphetamine salt combo*	DR	NP	
amphetamine salt combo ER	DR	NP	
amphetamine sulfate (Gen-Evekeo)*	DR	NP	
dexmethylphenidate ER caps	DR	NP	
dextroamphetamine*	DR	NP	
dextroamphetamine ER	DR	NP	

Stimulants (cont)			
dextroamphetamine solution*	DR	SCN	NP
methylphenidate ER tablet (Gen-Concerta)	DR		NP
methylphenidate ER 72mg tab (Gen-Relexxii)	DR	SCN	NP
methamphetamine	DR		NP
Adhansia XR	DR	SCN	NP
Adzenys ER susp	DR	SCN	NP
Adzenys XR ODT	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
*Prior Authorization not required for members 6 years of age and younger.			
Stimulants, Related Agents			
atomoxetine			P
clonidine ER			P
guanfacine ER			P
Stimulants, Related Agents – Wake Promoting			
armodafinil			P
modafinil			P
Sunosi	SCN		NP
Ulcerative Colitis			
balsalazide			P
budesonide ER tablet			P
sulfasalazine			P
Apriso			P
Canasa			P
Lialda			P
Rowasa Kits	SCN		P
mesalamine DR caps/tabs			NP
mesalamine ER capsule (Gen-Apriso)	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

Revised 02/24/2020 (Effective 03/01/2020)

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

Brand Name Drugs with Generic Copay	
Drug Name	Start Date
Alphagan P 0.15%	01/01/2012
Catapres -TTS	01/01/2014
Concerta	01/01/2018
Differin 0.1% Cream	01/01/2012
Differin 0.3% gel pump	02/01/2017
Humalog U-100 Kwikpen/Vial	07/01/2019
Novolog Mix	01/01/2020
Novolog U-100 Pen/Vial	01/01/2020
Retin-A (not micro)	07/01/2016
Tegretol tablet	01/01/2016
Tegretol suspension	01/01/2016
Tobradex suspension	01/01/2012

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

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

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