

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

Revised 05/29/2025 Effective 05/01/2025

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 (BBG) 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 05/29/2025 Effective 05/01/2025

| Acne Agents, Topical | | | Analgesics/Anesthetics, Topical (cont) | | | Analgesics, Opioids Long-Acting (cont) | | | Androgenic Agents (cont) | | |
|--------------------------------------------------------------------------------------------|-----|----|--------------------------------------------------------------------|-----|----|-----------------------------------------------------------------------------|-----|----|-----------------------------------------------------------------------------------|-----|----|
| adapalene 0.1% cream | | P | lidocaine 5% ointment | | P | oxycodone ER | | NP | Depo-testosterone* | | P |
| adapalene OTC 0.1% gel | | P | lidocaine 5% trans patch | | P | oxymorphone ER | | NP | methyltestosterone capsule | | NP |
| adapalene 0.3% gel | | P | diclofenac 1.3% patch (Gen-Flector) | | NP | tramadol ER cap (Gen-Conzip) | SCN | NP | testosterone gel packet (Gen-Androgel) | | NP |
| benzoyl peroxide OTC 2.5%, 5%, 10% | SCN | P | diclofenac 1.5% solution (Gen-Pennsaid solution) | | NP | tramadol ER tab (Gen-Ryzolt) | | NP | testosterone pump (Gen-Axiron and Fortesta) | | NP |
| clindamycin/benzoyl peroxide (Gen-Duac) | | P | diclofenac 2% pump (Gen-Pennsaid pump) | | NP | Belbuca Film | | NP | Azmiro* | | NP |
| clindamycin gel (Gen-Cleocin T) | | P | Flector | | NP | Conzip | SCN | NP | Jatenzo | SCN | NP |
| clindamycin solution | | P | Licart patch | SCN | NP | Oxycontin | | NP | Methitest tablet | | NP |
| erythromycin gel, solution | | P | Pennsaid pump | SCN | NP | Analgesics, Opioids Short-Acting | | | Natesto nasal spray | SCN | NP |
| sodium sulfacetamide-sulfur 10-5% cleanser | SCN | P | Ztildo | SCN | NP | codeine/apap | | P | Tlando capsule | | NP |
| sulfacetamide sodium susp | | P | Analgesics, Miscellaneous | | | hydrocodone/apap 325mg | | P | Testim | SCN | NP |
| Retin-A (not micro) | | P | acetaminophen | SCN | P | hydrocodone/ibuprofen | | P | Undecatrex capsule | SCN | NP |
| NOTE: Topical federal legend acne drugs not listed are either non-preferred or noncovered. | | | apap chew tab 80mg, 160mg* | | P | morphine | | P | Vogelxo | | NP |
| | | | aspirin | SCN | P | oxycodone solution, tablets | | P | Xyosted | | NP |
| | | | ibuprofen Rx | | P | oxycodone/apap 325mg | | P | * Policy for obtaining provider-administered drugs applies. Refer to topic #5697. | | |
| | | | ibuprofen OTC | SCN | P | tramadol 50mg tab | | P | | | |
| Alzheimer's Agents | | | ibuprofen OTC chew tab 100mg* | | P | tramadol/apap 325mg | | P | Angiotensin Modulators, ACE Inhibitors | | |
| donepezil 5mg,10mg | | P | naproxen Rx | | P | butorphanol spray | | NP | benazepril | | P |
| donepezil ODT 5mg, 10mg | | P | naproxen OTC | SCN | P | codeine | | NP | captopril | | P |
| memantine solution, tablet, titration pack* | | P | butalbital/apap | | NP | fenatnyl citrate oral transmucosal lozenges | | NP | enalapril solution (Gen-Epaned) | SCN | P |
| rivastigmine caps | | P | butalbital/apap/caffeine | | NP | levorphanol | | NP | enalapril tablet | | P |
| Exelon patch | | P | butalbital/apap/caffeine/codeine | | NP | hydrocodone/apap* | | NP | enalapril/HCTZ | | P |
| donepezil 23mg | | NP | butalbital/asa/caffeine | | NP | hydromorphone liquid, suppository | | NP | fosinopril | | P |
| galantamine tablets | | NP | butalbital/asa/caffeine/codeine | | NP | meperidine | | NP | lisinopril | | P |
| galantamine ER caps | | NP | Journavx tablets | | NP | oxycodone capsules, concentrate | | NP | lisinopril/HCTZ | | P |
| galantamine solution | | NP | * Products are only covered for members 12 years of age or younger | | | oxymorphone | | NP | quinapril | | P |
| memantine/donepezil ER caps (Gen-Namzaric) | | NP | Analgesics, Opioids Long-Acting | | | pentazocine/naloxone | | NP | ramipril | | P |
| memantine ER caps (Gen-Namenda XR)* | DR | NP | fenatnyl transdermal 12mcg, 25mcg, 50mcg, 75mcg, 100mcg | | P | tramadol HCL solution | | NP | benazepril/HCTZ | | NP |
| rivastigmine patch | | NP | morphine ER tablets | | P | tramadol 25mg, 75mg tablet | SCN | NP | captopril/HCTZ | SCN | NP |
| Adlarity patch | | NP | tramadol ER tab (Gen-Ultram ER) | | P | tramadol 100mg tablet | | NP | fosinopril/HCTZ | | NP |
| Namzaric capsule | | NP | Butrans transdermal | | P | Dilaudid Liquid | | NP | moexipril | | NP |
| Namzaric dose pack | | NP | Hysingla ER | | P | Fentora | | NP | perindopril | | NP |
| Zunveyl tablets | | NP | buprenorphine transdermal | | NP | Roxybond Tablet | SCN | NP | quinapril/HCTZ | | NP |
| *memantine products are not covered for members 17 years of age or younger | | | fenatnyl transdermal 37.5mcg, 62.5mcg, 87.5mcg | | NP | Seglantis tablet | SCN | NP | trandolapril | | NP |
| | | | hydrocodone ER tablet (Gen-Hysingla ER) | | NP | *Combination products containing any other strength of apap besides 325 mg. | | | Qbrexli solution | SCN | NP |
| | | | hydrocodone ER capsule (Gen-Zohydro ER) | | NP | Androgenic Agents | | | Angiotensin Modulators, ARBs and DRIs | | |
| | | | hydromorphone ER | | NP | oxandrolone tablet | | P | irbesartan | | P |
| Analgesics/Anesthetics, Topical | | | methadone tablet, solution | | NP | testosterone cypionate* | | P | irbesartan/HCTZ | | P |
| capsaicin OTC | SCN | P | morphine ER capsules | | NP | testosterone enanthate* | | P | losartan | | P |
| diclofenac 1% gel (Gen-Voltaren RX) | | P | | | | testosterone gel pump (Gen-Androgel) | | P | losartan/HCTZ | | P |
| diclofenac sodium 1% gel OTC (Gen-Voltaren OTC) | | P | | | | testosterone gel, pump (Gen-Vogelxo) | | P | olmesartan | | P |
| | | | | | | Androgel ael pump | | P | olmesartan/HCTZ | | P |
| | | | | | | | | | valsartan | | P |
| | | | | | | | | | valsartan/HCTZ | | 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 (BBG) 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 05/29/2025 Effective 05/01/2025

| Angiotensin Modulators, ARBs and DRIs (cont) | | | Antibiotics, GI | | | Antibiotics, Tetracyclines (cont) | | | Anticoagulants (cont) | | |
|-----------------------------------------------------------|-----|----|----------------------------------------------|-----|----|------------------------------------------------|-----|----|-------------------------------------------|-----|----|
| Entresto tablet | | P | metronidazole 250mg, 500mg tabs | | P | doxycycline hyclate DR | | NP | dabigatran capsule (Gen-Pradaxa) | SCN | NP |
| aliskiren tabs (Gen-Tektura) | SCN | NP | neomycin | | P | doxycycline hyclate tablets | | NP | fondaparinux | | NP |
| candesartan tablets | | NP | tinidazole | | P | doxycycline IR-DR 40mg capsule | SCN | NP | rivaroxaban tablets (Gen-Xarelto tablets) | SCN | NP |
| candesartan/HCTZ | | NP | vancomycin capsule | | P | doxycycline monohydrate susp | | NP | Arixtra | SCN | NP |
| telmisartan | | NP | vancomycin solution (Gen-Firvang) | | P | doxycycline monohydrate 75mg, 150mg capsules | | NP | Fragmin | | NP |
| telmisartan/HCTZ | | NP | Xifaxan | | P | minocycline tablets | | NP | Pradaxa Pellet Pack | | NP |
| valsartan solution | SCN | NP | metronidazole capsule | | NP | minocycline ER (Gen-Solodyn) | | NP | Savaysa | | NP |
| Benicar | | NP | metronidazole 125mg tablet | SCN | NP | tetracycline | | NP | Anticonvulsants | | |
| Benicar/HCTZ | | NP | nitazoxanide tablet (Gen-Alinia) | | NP | Doryx DR | | NP | carbamazepine chew tablet | | P |
| Edarbi | | NP | Aemcolo DR | | NP | Minolira ER | SCN | NP | clobazam suspension, tablets | | P |
| Edarbyclor | | NP | Difcid tablet, suspension | SCN | NP | Morgidox capsule | SCN | NP | clonazepam tablets | | P |
| Entresto sprinkles | | NP | Firvanq solution | SCN | NP | Nuzyra | SCN | NP | diazepam rectal | | P |
| Micardis | | NP | Likmez | SCN | NP | Oracea | SCN | NP | divalproex tablets | | P |
| Micardis/HCTZ | | NP | Solosec | SCN | NP | Solodyn ER 55mg, 65mg, 80mg, 105mg, 115mg | | NP | divalproex ER tablets | | P |
| Tektura | | NP | Vowst capsule | SCN | NP | Antibiotics, Topical | | | ethosuximide | | P |
| Angiotensin Modulators, Combination | | | Antibiotics, Inhaled | | | bacitracin ointment OTC | SCN | P | felbamate suspension, tablets | | P |
| amlodipine/benazepril | | P | Bethkis | SCN | P | bacitracin/poly.B oint. OTC | SCN | P | gabapentin | | P |
| amlodipine/olmesartan | | P | Kitabis Pak | SCN | P | gentamicin cream | | P | lacosamide tablets | | P |
| amlodipine/olmesartan/HCTZ | | P | tobramycin (Gen-Tobi) | | P | mupirocin ointment | | P | lacosamide solution | | P |
| amlodipine/valsartan | | P | tobramycin (Gen-Bethkis) | | NP | neomycin/bacitracin zinc/ polymyxin B oint OTC | SCN | P | lamotrigine tablets | | P |
| amlodipine/valsartan/HCTZ | | NP | tobramycin pak (Gen-Kitabis Pak) | | NP | gentamicin ointment | | NP | lamotrigine dispers tabs | | P |
| telmisartan/amlodipine | | NP | Cayston | | NP | mupirocin cream | | NP | lamotrigine Dose Pk | | P |
| trandolapril/verapamil | | NP | Tobi Podhaler | | NP | Centany | SCN | NP | lamotrigine ER tablets | | P |
| Antibiotics, Beta-Lactam | | | Antibiotics, Macrolides/Ketolides | | | Xepi 1% cream | SCN | NP | levetiracetam solution, tablets | | P |
| amoxicillin | | P | azithromycin | | P | Antibiotics, Vaginal | | | levetiracetam ER tablets | | P |
| amoxicillin clavulanate chew tablets, tablets, suspension | | P | clarithromycin susp, tabs | | P | metronidazole 0.75% gel (Gen-Vandazole gel) | | P | oxcarbazepine suspension, tablets | | P |
| ampicillin | | P | erythromycin suspension | | P | Cleocin 2% cream | | P | phenobarbital | | P |
| cefadroxil capsule, suspension | | P | erythromycin DR tablets | | P | Cleocin ovule | | P | phenytoin | | P |
| cefdinir | | P | E.E.S. 200mg suspension | | P | Nuversa gel | SCN | P | pregabalin (Gen-Lyrica) | | P |
| cefixime capsule | SCN | P | Eryped suspension | | P | clindamycin cream | | NP | primidone | | P |
| cefixime suspension | | P | Ery-Tab DR | | P | Clindesse cream | | NP | tiagabine | | P |
| cefprozil | SCN | P | clarithromycin ER tablet | | NP | Xaciat 2% gel | SCN | NP | topiramate | | P |
| cefuroxime | | P | erythromycin DR capsule | SCN | NP | Vandazole gel | | NP | topiramate sprinkle | | P |
| cephalexin capsule, suspension | | P | erythromycin tablet | | NP | Anticoagulants | | | valproic acid | | P |
| cephalexin 750mg | SCN | P | E.E.S. 400mg tablet | | NP | enoxaparin | | P | vigabatrin | | P |
| dicloxacillin | | P | Erythrocin | | NP | warfarin | | P | zonisamide | | P |
| penicillin | | P | Antibiotics, Tetracyclines | | | Eliguis | | P | Carbatrol ER | | P |
| amoxicillin clavulanate XR | | NP | doxycycline hyclate capsule | | P | Eliguis Dose Pack | | P | Celontin | | P |
| cefactor capsule, ER tablets | | NP | doxycycline hyclate 20mg tabs | | P | Pradaxa caps | | P | Depakote sprinkle | | P |
| cefactor suspension | SCN | NP | doxycycline monohydrate 50mg, 100mg capsules | | P | Xarelto suspension | | P | Dilantin 30mg cap | | P |
| cefadroxil tablet | | NP | doxycycline monohydrate tabs | | P | Xarelto tablets | | P | Dilantin Infatab | | P |
| cefpodoxime suspension | | NP | minocycline caps | | P | Xarelto Dose Pack | | P | Felbatol | | P |
| cefpodoxime tablet | | NP | demeclocycline | | NP | | | | Lamictal Starter Kits | SCN | P |
| cephalexin tabs | | NP | | | | | | | Lyrica | | 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 (BBG) 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 05/29/2025 Effective 05/01/2025

| Anticonvulsants (cont) | | | Anticonvulsants (cont) | | | Antidepressants, SSRI (cont) | | | Antifungals, Oral (cont) | | |
|--------------------------------------------|-----|-----|--------------------------------------|-----|-----|--------------------------------------------------|-----|----|--------------------------------------------------|-----|----|
| Nayzilam nasal spray | | P | Vigpoder | SCN | NP | citalopram 30mg capsule | | NP | nystatin suspension, tablet | | P |
| Roweepra | SCN | P | Vimpat | | NP | fluoxetine DR 90mg capsule | | NP | posaconazole tablets (Gen-Noxafil tablets) | | P |
| Sabril | SCN | P | Vimpat solution | | NP | fluoxetine 10mg, 20mg, 60mg tablets | | NP | terbinafine | | P |
| Tegretol tab | | P | Xcopri | SCN | NP | fluvoxamine ER capsule | | NP | Sporanox (liquid) | | P |
| Tegretol suspension | | P | Zonisade suspension | SCN | NP | paroxetine 7.5mg (Gen-Brisdelle) | | NP | flucytosine | | NP |
| Tegretol XR | | P | Ztalmey | DR | SCN | paroxetine CR (Gen-Paxil CR) | SCN | NP | griseofulvin microsize tablets | | NP |
| Valtoco nasal spray | SCN | P | Antidepressants, Other | | | paroxetine susp (Gen-Paxil susp) | SCN | NP | itraconazole solution | | NP |
| carbamazepine suspension, tabs | | NP | bupropion | | P | sertraline capsules | | NP | posaconazole suspension (Gen-Noxafil suspension) | | NP |
| carbamazepine ER caps, tabs | | NP | bupropion SR | | P | Antiemetics | | | voriconazole suspension, tablet | | NP |
| clonazepam ODT | | NP | bupropion XL (Gen-Wellbutrin) | | P | aprepitant capsules, pack | | P | Ancobon | | NP |
| divalproex sprinkle | | NP | desvenlafaxine ER (Gen-Pristiq) | | P | granisetron | | P | Brexafemme | SCN | NP |
| lamotrigine ODT | | NP | duloxetine DR 20mg, 30mg, 60mg caps | | P | metoclopramide | | P | Cresemba | | NP |
| levetiracetam 250mg tablet (Gen-Spritam) | SCN | NP | mirtazapine | | P | ondansetron 4mg & 8mg ODT, solution, tablets | | P | Noxafil powdermix suspension | SCN | NP |
| methsuximide | SCN | NP | phenelzine | | P | prochlorperazine supp., tablets | | P | Noxafil suspension | SCN | NP |
| oxcarbazepine ER tablets (Gen-Oxtellar XR) | | NP | tranylcypromine sulfate | | P | trimethobenzamide capsule | | P | Oravig | | NP |
| rufinamide (Gen-Banzel) | DR | NP | trazodone | | P | ondansetron 16mg ODT | SCN | NP | Tolsura | | NP |
| topiramate ER (Gen-Trokendi XR) | | NP | venlafaxine | | P | Akynzeo | | NP | Vfend | | NP |
| topiramate ER (Gen-Qudexy XR) | | NP | venlafaxine ER capsules | | P | Anzemet | | NP | Vivjoa | SCN | NP |
| Aptiom | SCN | NP | vilazodone tablet (Gen-Viibryd) | | P | Emend Powder Packet | SCN | NP | Antifungals, Topical | | |
| Banzel | DR | NP | Marplan | | P | Gimoti nasal | | NP | ciclopirox solution | | P |
| Briviact | | NP | bupropion XL (Gen-Forfivo XL) | SCN | NP | Sancuso | SCN | NP | clotrimazole OTC cream, sol. | | P |
| Diacomit | DR | SCN | desvenlafaxine ER (No Brand) | | NP | Antiemetics/Antivertigo | | | clotrimazole Rx cream, solution | | P |
| Elepsia XR | | SCN | duloxetine 40mg DR capsule | | NP | dimenhydrinate OTC | | P | clotrimazole/betamethasone cream | | P |
| Epidiolex | DR | SCN | nefazodone | | NP | meclizine RX 12.5mg, 25mg | | P | ketoconazole cream, shampoo | | P |
| Eprontia solution | | SCN | venlafaxine ER tablets | | NP | meclizine OTC 12.5mg, 25mg | SCN | P | miconazole OTC | SCN | P |
| Equetro | | NP | Aplenzin ER | | NP | promethazine tablet, suppository, syrup | | P | nystatin cream, ointment, powder | | P |
| Fintepla | DR | NP | Auvelity ER tablet | SCN | NP | Bonjesta | SCN | P | nystatin/triamcinolone cream, ointment | | P |
| Fycompa | | NP | Drizalma sprinkle DR | | NP | Diclegis | SCN | P | tolnaftate OTC cream, powder | SCN | P |
| Gabarone tablets | | NP | Emsam | | NP | Transderm-Scop | SCN | P | Alevazol | SCN | P |
| Lamictal ODT | | NP | Fetzima | | NP | doxylamine succinate / pyridoxine (Gen-Diclegis) | | NP | ciclopirox cream, gel, shampoo, suspension | | NP |
| Lamictal ODT Starter Kit | | NP | Forfivo XL | | NP | meclizine 50mg tablet | | NP | clotrimazole/betamethasone lotion | | NP |
| Lamictal XR | | NP | Nardil | | NP | scopolamine patch | | NP | econazole nitrate | | NP |
| Lamictal XR Starter Kit | | NP | Raldesy solution | | NP | Antivert | SCN | NP | ketoconazole foam | | NP |
| Libervant film | | NP | Trintellix | | NP | Antiemetics, Cannabinoids | | | luliconazole cream | | NP |
| Motpoly XR | | NP | Zuruvae capsule | DR | SCN | dronabinol | | NP | miconazole solution | SCN | NP |
| Oxtellar XR | | NP | Antidepressants, SSRI | | | Antifungals, Oral | | | miconazole/zinc/pet ointment | SCN | NP |
| Phenytek | | NP | citalopram solution, tablet | | P | clotrimazole troche | | P | naftifine cream, gel | | NP |
| Qudexy XR | | NP | escitalopram | | P | fluconazole | | P | oxiconazole cream | | NP |
| Spritam | | NP | fluoxetine 10mg, 20mg, 40mg capsules | | P | griseofulvin suspension | | P | tavaborole solution (Gen-Kerydin) | | NP |
| Sympazan | DR | NP | fluoxetine solution | | P | itraconazole | | P | Ertaczo | SCN | NP |
| Trileptal suspension | | NP | fluvoxamine | | P | ketoconazole tablets | | P | | | |
| Trokendi XR | | NP | paroxetine | | P | | | | | | |
| Vigadrone | | NP | sertraline concentrate, tablets | | P | | | | | | |
| Vigafyde | SCN | NP | Paxil suspension | | 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 (BBG) 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 05/29/2025 Effective 05/01/2025

| Antifungals, Topical (cont) | | | Antiparkinson's Agents (cont) | | | Antipsychotics (cont) | | | Antipsychotics, Injectable | | |
|-----------------------------------------------|-----|----|-------------------------------------------------------------------------------|-----|----|-----------------------------------------------------------------------------------------------------------------------------------------------|-----|----|----------------------------------------------------------------------------------|-----|----|
| Jublia | | NP | selegiline | | P | aripiprazole ODT* | SCN | P | fluphenazine decanoate * | | P |
| Luzu cream | | NP | trihexyphenidyl | | P | asenapine (Gen-Saphris)* | | P | haloperidol decanoate* | | P |
| Naftin | SCN | NP | entacapone | | NP | amitriptyline/perphenazine* | SCN | P | Abilify Asimtufii* | | P |
| Oxistat | SCN | NP | pramipexole ER | | NP | chlorpromazine* | | P | Abilify Maintena* | | P |
| Thera Antifungal OTC cream, powder | SCN | NP | rasagiline | | NP | clozapine* | | P | Aristada ER* | SCN | P |
| Vusion | SCN | NP | ropinirole ER | | NP | fluphenazine* | SCN | P | Aristada Initio ER* | SCN | P |
| NOTE: Sprays and Kits are not covered. | | | tolcapone | | NP | haloperidol* | | P | Haldol Decanoate* | | P |
| Antihistamines, Minimally Sedating | | | Azilect | | NP | loxapine* | | P | Invega Hafyera* | | P |
| cetirizine syrup, tablets | SCN | P | Comtan | | NP | lurasidone (Gen-Latuda)* | SCN | P | Invega Sustenna* | | P |
| cetirizine D | SCN | P | Crexont ER capsule | SCN | NP | olanzapine* | | P | Invega Trinza* | | P |
| levocetirizine tablets | | P | Dhivy tablet | SCN | NP | olanzapine ODT* | | P | Perseris ER* | SCN | P |
| loratadine syrup, tablets | SCN | P | Gocovri ER | SCN | NP | paliperidone ER tablets* | | P | Risperdal Consta* | | P |
| loratadine D | SCN | P | Inbrija | SCN | NP | perphenazine* | | P | Uzedy ER | | P |
| desloratadine | | NP | Kynmobi film | SCN | NP | pimozide* | | P | Zyprexa Relprevv* | | P |
| desloratadine ODT | | NP | Neupro patches | | NP | quetiapine* 25mg, 50mg, 100mg, 200mg, 300mg, 400mg tablets | | P | risperidone ER (Gen-Risperdal Consta)* | SCN | NP |
| fexofenadine OTC | SCN | NP | Nourianz tablets | SCN | NP | quetiapine fumarate ER* tablets | | P | ziprasidone vial* | | NP |
| levocetirizine solution | | NP | Ongentys | SCN | NP | risperidone* | | P | Erzofri* | SCN | NP |
| Clarinet | | NP | Osmolex ER | SCN | NP | risperidone ODT * | | P | Rykindo ER* | | NP |
| Clarinet D | | NP | Rytary ER | SCN | NP | thiothixene* | SCN | P | *Policy for obtaining provider-administered drugs applies. Refer to topic #5697. | | |
| Antihypertensives, Sympatholytics | | | Stalevo | | NP | trifluoperazine* | | P | Antivirals, Influenza | | |
| clonidine (oral) | | P | Tasmar | | NP | ziprasidone capsules* | | P | oseltamivir | | P |
| clonidine trans patch | | P | Xadago | SCN | NP | Vraylar * | SCN | P | rimantadine | | NP |
| guanfacine | | P | Zelapar | | NP | clozapine ODT* | | NP | Relenza | SCN | NP |
| methyldopa | | P | Antisporiatrics, Oral | | | molindone tablets* | | NP | Tamiflu | SCN | NP |
| clonidine HCL ER tablet | | NP | acitretin | | P | olanzapine/fluoxetine* | | NP | Xofluza | | NP |
| Nexiclon XR | SCN | NP | methoxsalen | | NP | quetiapine* 150mg tablet | | NP | Antivirals, Other | | |
| Antiparasitics, Topical | | | Antipsoriatics, Topical | | | thioridazine* | | NP | acyclovir | | P |
| permethrin OTC | | P | calcipotriene cream, ointment, solution | | P | Abilify MyCite* | | NP | valacyclovir | | P |
| permethrin Rx | | P | Taclonex suspension | | P | Adasuve* | | NP | famciclovir | | NP |
| Natroba | | P | calcipotriene foam | | NP | Caplyta* | SCN | NP | Antivirals, Topical | | |
| ivermectin OTC (Gen-Skllice OTC) | | NP | calcipotriene/betamethasone dipropionate ointment | | NP | Cobenfy* | | NP | acyclovir cream, ointment | | P |
| malathion | | NP | calcipotriene/betamethasone dipropionate suspension (Gen-Taclonex suspension) | SCN | NP | Fanapt* | SCN | NP | Denavir | SCN | P |
| spinosad | | NP | calcitriol ointment | | NP | Latuda* | SCN | NP | penciclovir | | NP |
| Crotan Lotion | SCN | NP | tazarotene cream, gel | | NP | Lybalvi * | | NP | Xerese | | NP |
| Antiparkinson's Agents | | | Duobrii lotion | | NP | Nuplazid* | SCN | NP | Zovirax cream | | NP |
| amantadine | | P | Enstilar | SCN | NP | Opipza film* | SCN | NP | Anxiolytics | | |
| benztropine | | P | Sorilux | | NP | Rexulti* | | NP | alprazolam ER | | P |
| bromocriptine | | P | Vectical ointment | SCN | NP | Secuado patch* | SCN | NP | alprazolam tablet | | P |
| carbidopa/levodopa | | P | Vtama 1% Cream | SCN | NP | Versacloz* | SCN | NP | buspirone | | P |
| carbidopa/levodopa ER | | P | Zoryve 0.3% Cream | 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. | | | chlordiazepoxide | | P |
| carbidopa/levodopa ODT | | P | Antipsychotics | | | | | | diazepam solution, tablet | | P |
| carbidopa/levodopa/entacapone | | P | aripiprazole* | | P | | | | lorazepam intensol, tablet | | P |
| carbidopa 25mg tablet | | P | | | | | | | alprazolam intensol | | NP |
| pramipexole | | P | | | | | | | alprazolam ODT | | NP |
| ropinirole | | 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 (BBG) 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 05/29/2025 Effective 05/01/2025

| Anxiolytics (cont) | | | Bile Salts (cont) | | | Bronchodilators, Beta Agonists (cont) | | | COPD Agents (cont) | | |
|----------------------------------------|-----|----|---------------------------------|-----|----|---------------------------------------|-----|----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| clorazepate | | NP | Chenodal | SCN | NP | albuterol solution, syrup, tablets | | P | Atrovent HFA | | P |
| diazepam intensol | | NP | Cholbam | SCN | NP | levalbuterol nebulizer | | P | Combivent Respimat | | P |
| meprobamate | | NP | Ctexli tablet | SCN | NP | terbutaline tablets | | P | Spiriva | | P |
| oxazepam | | NP | Iqirvo tablets | SCN | NP | ProAir Respiclick | | P | Stiolto Respimat | | P |
| Loreev XR | | NP | Livdelzi capsule | | NP | Serevent Diskus | SCN | P | tiotropium (Gen-Spiriva) | SCN | NP |
| BPH Agents, Alpha Reductase Inhibitors | | | Livmarli solution | SCN | NP | Ventolin HFA | SCN | P | umeclidinium/vilanterol (Gen-Anoro Ellipta) | SCN | NP |
| dutasteride | | P | Ocaliva | SCN | NP | Xopenex HFA | SCN | P | Bevespi Aerosphere | | NP |
| finasteride | | P | Reltone | SCN | NP | albuterol HFA (Gen-Proventil) | | NP | Breztri Aerosphere HFA | | NP |
| dutasteride/tamsulosin | SCN | NP | Bladder Relaxant Preparations | | | albuterol HFA (Gen-Ventolin) | | NP | Duaklir Pressair | SCN | NP |
| BPH Agents, Andrenergic | | | fesoterodine ER (Gen-Toviaz ER) | | P | arformoterol (Gen-Brovana) | SCN | NP | Incruse Ellipta | SCN | NP |
| alfuzosin | | P | oxybutynin solution, syrup | | P | formoterol (Gen-Perforomist) | | NP | Ohtuvayre | SCN | NP |
| doxazosin | | P | oxybutynin 5mg tablet | | P | formoterol fumarate nebulizer | SCN | NP | Spiriva Respimat | | NP |
| tamsulosin | | P | oxybutynin ER tablets | | P | levalbuterol HFA | | NP | Trelegy Ellipta | SCN | NP |
| terazosin | | P | solifenacin tablet | | P | Brovana | SCN | NP | Tudorza Pressair | | NP |
| silodosin capsule | | NP | darifenacin ER | | NP | Perforomist | SCN | NP | Yupelri | SCN | NP |
| Cardura XL | | NP | mirabegron ER(Gen-Myrbetriq ER) | | NP | Striverdi Respimat | | | Cough and Cold – Narcotic Liquids | | |
| Rapaflo | | NP | oxybutynin 2.5mg tab | | NP | Calcium Channel Blocking Agents | | | guaifenesin/codeine | | P |
| Tezruly solution | SCN | NP | tolterodine | | NP | amlodipine | | P | promethazine/codeine | | P |
| Beta Blockers | | | tolterodine ER | | NP | diltiazem | | P | NOTE: 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. | | |
| acebutolol | | P | tropium | | NP | diltiazem ER capsules | SCN | P | | | |
| atenolol | | P | tropium ER | | NP | nifedipine ER | | P | NOTE: 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. | | |
| atenolol/chlorthalidone | | P | Detrol | | NP | nifedipine IR | | P | | | |
| bisoprolol | | P | Detrol LA | | NP | nimodipine | | P | Cytokine and CAM Antagonists | | |
| bisoprolol/HCTZ | | P | Gemtesa | SCN | NP | verapamil tablet | | P | Enbrel | | P |
| carvedilol | | P | Myrbetriq ER | | NP | verapamil ER tablet | | P | Cimzia | | P |
| labetalol | | P | Oxytrol | SCN | NP | diltiazem ER tablets | SCN | NP | Cyltezo (adalimumab-adbm) | | P |
| metoprolol | | P | Vesicare LS | | NP | felodipine ER | | NP | Humira | | P |
| metoprolol ER | | P | Bone Resorption Suppression | | | isradipine | | NP | Orencia subQ | | P |
| nadolol | | P | alendronate | | P | levamlodipine maleate tablet | SCN | NP | Otezla | | P |
| nebivolol (Gen-Bystolic) | | P | calcitonin-salmon nasal | | P | nicardipine | | NP | Simponi subQ | | P |
| propranolol | | P | ibandronate | | P | nimodipine solution | | NP | Tyenne subQ | SCN | P |
| propranolol ER | | P | Forteo | | P | nisoldipine | SCN | NP | Xeljanz | | P |
| sotalol | | P | alendronate sodium solution | SCN | NP | verapamil ER capsule | SCN | NP | adalimumab-aacf (Idacio) | SCN | NP |
| Hemangeol | SCN | P | raloxifene | | NP | verapamil ER PM capsule | SCN | NP | adalimumab-aaty (Yuflyma) | | NP |
| betaxolol | | NP | risedronate tablets | | NP | verapamil SR capsule | | NP | adalimumab-adaz (Hyrimoz) | | NP |
| carvedilol ER | | NP | risedronate DR tablets | | NP | Cardizem LA | | NP | adalimumab-adbm (Cyltezo) | | NP |
| metoprolol/HCTZ | | NP | teriparatide (Gen-Bonsity) | | NP | Katerzia suspension | SCN | NP | adalimumab-fkjp (Hulio) | | NP |
| pindolol | | NP | teriparatide (Gen-Forteo) | | NP | Matzim LA | | NP | adalimumab-ryvk (Simlandi subQ) | SCN | NP |
| timolol | | NP | Actonel tablets | SCN | NP | Norliqva solution | SCN | NP | ustekinumab-ttwe (Pyzchiva subQ) | SCN | NP |
| Inderal XL | | NP | Atelvia DR tablets | SCN | NP | Nymalize solution | | NP | Abrilada | | NP |
| Innopran XL | | NP | Binosto | | NP | COPD Agents | | | | | |
| Kapsargo sprinkles | | NP | Fosamax Plus D | | NP | ipratropium nebulizer | | P | | | |
| Sotylyze | | NP | Tymlos | | NP | ipratropium/albuterol nebulizer | | P | | | |
| Bile Salts | | | Bronchodilators, Beta Agonists | | | roflumilast | | P | | | |
| ursodiol | | P | albuterol HFA (Gen-ProAir) | | | Anoro Ellipta | SCN | P | | | |
| Bylvay | 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 (BBG) 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 05/29/2025 Effective 05/01/2025

| Cytokine and CAM Antagonists (cont) | | | Epinephrine, Self-Administered (cont) | | | Glucagon Agents (cont) | | | Glucocorticoids, Oral (cont) | | |
|----------------------------------------|-----|----|----------------------------------------|-----|----|---------------------------------------------------------------------------|-----|----|--------------------------------------------------|-----|----|
| Actemra subQ | SCN | NP | Neffy nasal spray | SCN | NP | Proglycem suspension | SCN | P | hydrocortisone tablet | | P |
| Amjevita (adalimumab-atto) | | NP | Symjepi | | NP | Zegalogue | SCN | P | methylprednisolone Dose PK | | P |
| Bimzelx | | NP | Erythropoiesis Stimulating Proteins | | | diazoxide suspension | SCN | NP | methylprednisolone tablet | | P |
| Cosentyx subQ | | NP | Aranesp | | P | glucagon 1mg emergency kit (Fresenius) | | NP | prednisolone solution 5mg/5ml | SCN | P |
| Enspryng | SCN | NP | Epogen | | P | Gvoke* | SCN | NP | prednisolone solution 15mg/5ml | | P |
| Entyvio subQ | | NP | Retacrit | SCN | P | *Prior Authorization not required for members 6 years of age and younger. | | | prednisolone sodium phosphate ODT | SCN | P |
| Hadlima (adalimumab-bwwd) | | NP | Jesduvroq | SCN | NP | Glucocorticoids, Inhaled | | | prednisolone sodium phosphate solution 25mg/5ml | | P |
| Hulio (adalimumab-fkjp) | | NP | Mircera | SCN | NP | budesonide respules | | P | prednisone dose pack, intensol, solution, tablet | | P |
| Hyrimoz (adalimumab-adaz) | | NP | Procrit | SCN | NP | fluticasone (Gen-Flovent Diskus) | SCN | P | cortisone | | NP |
| Idacio (adalimumab-aacf) | SCN | NP | Vafseo tablet | SCN | NP | fluticasone HFA (Gen-Flovent HFA) | SCN | P | deflazacort suspension (Gen-Emflaza suspension) | SCN | NP |
| Kevzara | | NP | Fibromyalgia | | | Advair Diskus | SCN | P | deflazacort tab (Gen-Emflaza tab) | | NP |
| Kineret | | NP | duloxetine DR 20mg, 30mg, 60mg capsule | | P | Advair HFA | SCN | P | dexamethasone Dose PK | | NP |
| Olumiant | | NP | pregabalin (Gen-Lyrica) | | P | AirDuo Respiclick | | P | prednisolone 5mg tablet | SCN | NP |
| Omvoq subQ | | NP | Lyrica | | P | Arnuity Ellipta | SCN | P | prednisolone solution 10mg/5ml (Gen-Millipred) | | NP |
| Otufli subQ (ustekinumab-aauz) | SCN | NP | Savella | SCN | P | Asmanex, Asmanex HFA | SCN | P | prednisolone solution 20mg/5ml (Gen-Veripred) | | NP |
| Pyzchiva subQ (ustekinumab-ttwe) | SCN | NP | duloxetine 40mg DR capsule | | NP | Dulera | SCN | P | Agamree | SCN | NP |
| Rinvoq LQ solution | | NP | Fluoroquinolones | | | Flovent Diskus | SCN | P | Alkindi sprinkle | SCN | NP |
| Rinvoq ER tablets | | NP | ciprofloxacin | | P | Flovent HFA | SCN | P | Emflaza suspension, tablets | SCN | NP |
| Selarsdi subQ (ustekinumab-aekn) | | NP | levofloxacin tablets | | P | Pulmicort Flexhaler | | P | Eohilia DR | | NP |
| Siliq | | NP | moxifloxacin | | P | Qvar Redihaler | | P | Hemady | SCN | NP |
| Simlandi subQ (adalimumab-ryvk) | | NP | ciprofloxacin suspension | | NP | Symbicort | | | Medrol tablet | | NP |
| Skyrizi subQ | | NP | levofloxacin solution | | NP | budesonide/formoterol (Gen-Symbicort) | SCN | NP | Rayos tablet DR | SCN | NP |
| Sotyktu | | NP | ofloxacin | | NP | fluticasone/salmeterol (Gen-Advair Diskus) | SCN | NP | TaperDex | SCN | NP |
| Spevigo subQ | | NP | Baxdela tablet | SCN | NP | fluticasone/salmeterol (Gen-Advair HFA) | SCN | NP | Tarpeyo DR capsule DR | SCN | NP |
| Stelara subQ | | NP | Cipro suspension | | NP | fluticasone/salmeterol (Gen-Airduo Respiclick) | | NP | Gout Agents | | |
| Steqeyma subQ (ustekinumab-stba) | SCN | NP | GI Motility, Chronic – Constipation | | | fluticasone/vilanterol (Gen-Breo Ellipta inhaler) | SCN | NP | allopurinol 100mg, 300mg | | P |
| Taltz | | NP | lubiprostone caps (Gen-Amitiza) | SCN | P | Airsupra HFA | | NP | colchicine tablet (Gen-Colcrys) | | P |
| Tremfya subQ | | NP | Linzess | SCN | P | Alvesco Inhaler | SCN | NP | febuxostat tab (Gen-Uloric) | SCN | P |
| Xeljanz solution | | NP | Trulance | SCN | P | Breo Ellipta Inhaler | SCN | NP | indomethacin | | P |
| Xeljanz XR | | NP | prucalopride (Gen-Motegrity) | SCN | NP | Breyna Inhaler | SCN | NP | naproxen Rx | | P |
| Yesintek subQ (ustekinumab-kfce) | SCN | NP | lbsrela | SCN | NP | Breztri Aerosphere HFA | | NP | probenecid | | P |
| Yuflyma (adalimumab-aaty) | | NP | Motegrity | | NP | Trelegy Ellipta | SCN | NP | probenecid/colchicine | | P |
| Yusimry (adalimumab-aqvh) | | NP | Movantik | | NP | Wixela Inhalation | SCN | NP | allopurinol 200mg | | NP |
| Zymfentra | SCN | NP | Relistor tablet | | NP | Glucocorticoids, Oral | | | colchicine capsule (Gen-Mitigare) | | NP |
| Epinephrine, Self-Administered | | | Symproic | | NP | budesonide EC capsule | | P | naproxen suspension | | NP |
| epinephrine (AG EpiPen & AG EpiPen JR) | | | GI Motility, Chronic – Diarrhea | | | dexamethasone elixir, intensol, solution, tablet | | P | Gloperba solution | SCN | NP |
| Auvi-Q 0.1mg | SCN | P | alosetron | | P | | | | Mitigare | SCN | NP |
| EpiPen JR | SCN | P | Xifaxan 550mg | | P | | | | Growth Hormone | | |
| EpiPen | SCN | P | Lotronex | SCN | NP | | | | Genotropin | | P |
| epinephrine (Gen-EpiPen & EpiPen JR) | | NP | Viberzi | SCN | NP | | | | Norditropin | SCN | P |
| epinephrine (Gen-Adrenaclick) | | NP | Glucagon Agents | | | | | | | | |
| Auvi-Q 0.3mg, 0.15mg | SCN | NP | glucagon 1mg hypokit & vial | | P | | | | | | |
| | | | glucagon 1mg emergency kit (Lilly) | | P | | | | | | |
| | | | Baqsimi nasal spray | | 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 (BBG) 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 05/29/2025 Effective 05/01/2025

| Growth Hormone (cont) | | | H. Pylori (cont) | | | HIV/AIDS (cont) | | | HIV/AIDS (cont) | | | |
|------------------------------------------------------|-----|----|---------------------------------------------|-----|----|------------------------------------------------------------|-----|----|---------------------------------------------------------|-----|-----|----|
| Humatrope | | NP | lansoprazole/amoxicillin/ clarithromycin | | NP | lopinavir-ritonavir tablet | | P | Reyataz powder packet | | NP | |
| Ngenla Pen | | NP | | | | nevirapine suspension | | P | Rukobia ER | SCN | NP | |
| Nutropin AQ | | NP | Voquezna tablets | SCN | NP | nevirapine tablet | SCN | P | Sunlenca | | NP | |
| Omnitrope | | NP | Voquezna dual pak | SCN | NP | ritonavir | | P | Viracept | SCN | NP | |
| Serostim | SCN | NP | Voquezna triple pak | SCN | NP | tenofovir DF | | P | Viread powder | | NP | |
| Skytrofa | SCN | NP | Hepatitis B Agents | | | zidovudine capsule, syrup, tabs | | P | Ziagen solution, tablet | SCN | NP | |
| Sogroya | SCN | NP | entecavir tablet | | P | Aptivus | | P | Hypoglycemics, Alpha-Glucosidase Inhibitors | | | |
| Zomacton | SCN | NP | lamivudine | SCN | P | Biktarvy | | P | acarbose | | P | |
| Headache Agents, Acute Treatment | | | adefovir dipivoxal | | NP | Cimduo | SCN | P | miglitol | | NP | |
| Nurtec ODT | SCN | P | Baraclude solution | | NP | Complera | | P | Hypoglycemics, DPP-4 Inhibitors | | | |
| Ubrelvy | SCN | P | Vemlidy | | NP | Delstrigo | SCN | P | Janumet | SCN | P | |
| Emgality 100mg* | | NP | Hepatitis C Agents | | | Descovy | | P | Janumet XR | SCN | P | |
| Reyvow | | NP | sofosbuvir/velpatasvir (Gen-Epclusa) | SCN | P | Dovato | SCN | P | Januvia | SCN | P | |
| Zavzpret | | NP | Mavyret | | P | Edurant | | P | Jentadueto | | P | |
| *Emgality 100mg strength only for cluster headaches | | | ledipasvir/sofosbuvir (Gen-Harvoni) | SCN | NP | Emtriva solution | | P | Tradjenta | | P | |
| Headache Agents, Preventative Treatment | | | Epclusa | | NP | Evotaz | | P | alogliptin | | NP | |
| Ajovy | | P | Harvoni | | NP | Fuzeon vial | SCN | P | alogliptin/metformin | | NP | |
| Emgality 120mg | | P | Sovaldi | | NP | Genvoya | | P | alogliptin/pioglitazone | | NP | |
| Nurtec ODT | SCN | P | Vosevi | | NP | Intelence | SCN | P | saxagliptin (Gen-Onglyza) | | NP | |
| Aimovig | | NP | Zepatier | SCN | NP | Isentress chew tablet, HD tablet, powder packet, tablet | SCN | P | saxagliptin/metformin ER tablets (Gen-Kombiglyze XR) | SCN | NP | |
| Qulipta | | NP | Hepatitis C Agents-Interferon | | | Juluca | SCN | P | sitagliptin tablet (Gen-Zituvio tablet) | | NP | |
| Headache Agents, Triptans Injectable | | | Pegasys | SCN | P | Norvir powder packet | | P | sitagliptin/metformin tablet (Gen-Zituvimet tablet) | | NP | |
| sumatriptan injectable | | P | Hepatitis C Agents-Ribavirin | | | Odefsey | | P | Glyxambi | | NP | |
| Zembrace | SCN | NP | ribavirin | | P | Pifeltro | SCN | P | Jentadueto XR | | NP | |
| Headache Agents, Triptans Non-Injectable | | | H2 Antagonists | | | Prezcobix | | P | Kazano | | NP | |
| eletriptan | | P | cimetidine tablet | | P | Prezista suspension, tablet | | P | Kombiglyze XR | | NP | |
| naratriptan | | P | famotidine RX suspension | | P | Selzentry solution, tablet | SCN | P | Nesina | | NP | |
| rizatriptan | | P | famotidine RX tablet | | P | Stribild | | P | Onglyza | | NP | |
| sumatriptan nasal spray (Gen-Imitrex nasal spray) | | P | cimetidine solution | | NP | Symfi | SCN | P | Oseni | | NP | |
| sumatriptan tablets | | P | nizatidine capsules | | NP | Symfi Lo | SCN | P | Zituvimet tablet | | NP | |
| zolmitriptan ODT, tablets | | P | HIV/AIDS | | | Symtuza | | P | Zituvimet XR tablet | | NP | |
| Imitrex nasal spray | | P | abacavir tablet, solution | | P | Tivicay PD tablet for oral suspension, tablet | SCN | P | Hypoglycemics, GLP 1 | | | |
| Zomig nasal spray | SCN | P | abacavir-lamivudine | | P | Triumeq suspension, tablet | SCN | P | exenatide 10mcg/0.04 (Gen-Byetta) | DR | SCN | P |
| almotriptan | | NP | atazanavir sulfate | | P | Tybost | | P | liraglutide (Gen-Victoza)* | DR | | P |
| frovatriptan | | NP | darunavir | | P | Viread 150mg, 200mg, 250mg tablets | | P | Byetta | DR | | P |
| sumatriptan/naproxen tablets | | NP | efavir-emtri-tenof | | P | efavir-lamiv-tenof | SCN | NP | Trulicity | DR | | P |
| zolmitriptan nasal spray (Gen-Zomig nasal spray) | | NP | efavirenz capsule | | P | etravirine | SCN | NP | Victoza | DR | SCN | P |
| Symbravo tablet | SCN | NP | efavirenz tablet | SCN | P | maraviroc | | NP | Bydureon BCise | DR | | NP |
| Tosymra nasal spray | SCN | NP | emtricitabine capsule | | P | Emtriva capsule | | NP | Mounjaro pen | DR | | NP |
| H. Pylori | | | emtricitabine-tenofv | | P | Epzicom | SCN | NP | Ozempic | DR | SCN | NP |
| Pylera | | P | fosamprenavir | SCN | P | Kaletra solution, tablet | SCN | NP | Rybelsus tablets | DR | SCN | NP |
| Talicia | | P | lamivudine solution, tablet | | P | Retrovir capsule, syrup | SCN | NP | | | | |
| bismuth/metronid/tetracycline (Gen-Pylera) | | NP | lamivudine-zidovudine | | P | | | | | | | |
| | | | lopinavir-ritonavir solution | 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 (BBG) 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 05/29/2025 Effective 05/01/2025

| Hypoglycemics, GLP 1 (cont) | | | | Hypoglycemics, Insulins Long-Acting (cont) | | | | Hypoglycemics, Other (cont) | | | | Immunomodulators, Atopic Dermatitis – Topical (cont) | | | |
|-----------------------------------------------------------------------------------------------|-----|-----|----|----------------------------------------------------------|-----|----|--|-----------------------------------------------|-----|--|----|--------------------------------------------------------------------------------------------------------------------------------------------------|-----|--|----|
| Soliqua | DR | | NP | insulin degludec vial (Gen-Tresiba) | SCN | NP | | Glumetza ER | | | NP | Zoryve 0.15% cream | SCN | | NP |
| Xultophy | DR | SCN | NP | insulin glargine max solo U300 (Gen-Toujeo Max Solostar) | SCN | NP | | Inpefa | SCN | | NP | * Use PA/PDL for Immunomodulators, Atopic Dermatitis – Topical [STAT PA/Paper (F-2572)]. For Vitiligo, use PA/DGA Sec VI – Paper only (F-11049). | | | |
| * Product is moving to Preferred status temporarily due to shortage/access issues for Victoza | | | | insulin glargine solostar U300 (Gen-Toujeo Solostar) | SCN | NP | | Invokamet XR | | | NP | | | | |
| Hypoglycemics, Insulins | | | | insulin glargine U-100 vial & pen (Gen-Lantus) | SCN | NP | | Qtern | | | NP | ** Product is temporarily moving to Preferred status due to Elidel shortage/access issues | | | |
| insulin aspart U-100 cartridge/pen/vial (Gen-Novolog) | | SCN | P | Basaglar U-100 Kwikpen, Tempo Pen | | NP | | Segluromet | SCN | | NP | | | | |
| insulin aspart/protamine pen/vial (Gen-Novolog Mix) | | SCN | P | Rezvoglar U-100 Kwikpen | | NP | | Steglatro | SCN | | NP | Immunomodulators, Topical | | | |
| insulin lispro Jr Kwikpen (Gen-Humalog Jr Kwikpen) | | | P | Semglee (YFGN) U-100 vial & pen | SCN | NP | | Steglujan | SCN | | NP | imiquimod 5% cream | | | P |
| insulin lispro mix (Gen-Humalog Mix) | | | P | Toujeo Solostar | | NP | | Synjardy XR | | | NP | imiquimod 3.75% cream | | | NP |
| insulin lispro U-100 Kwikpen/Vial (Gen-Humalog Kwikpen/Vial) | SCN | | P | Toujeo Max Solostar | | NP | | Trijardy XR | | | NP | podofilox gel | | | NP |
| Humalog Jr. Kwikpen | | | P | Tresiba Flextouch | SCN | NP | | Hypoglycemics, Sulfonylureas | | | | Hyftor | | | NP |
| Humalog Mix | | | P | Tresiba vial | SCN | NP | | glimepiride 1mg, 2mg, 4mg tablets | | | P | Zyclara | | | NP |
| Humalog U-100 Cartridge/Kwikpen/Vial | | | P | Hypoglycemics, Meglitinides | | | | glipizide | | | P | Intranasal Rhinitis Agents | | | |
| Humulin 70-30 | | | P | repaglinide | | P | | glipizide ER | | | P | azelastine (Gen-Astelin) | | | P |
| Humulin N U-100 Kwikpen/Vial | | | P | nateglinide | | NP | | glyburide | | | P | fluticasone RX | | | P |
| Humulin R U-100 Vial | | | P | Hypoglycemics, Other | | | | glyburide/metformin | | | P | ipratropium | | | P |
| Humulin R U-500 Kwikpen/Vial | | | P | colesevelam tablets (Gen-Welchol tablets) | | | | glimepiride 3mg tablet | SCN | | NP | mometasone furoate spray OTC | | | P |
| Novolog Mix | SCN | | P | metformin 500mg, 850mg, 1,000mg tablets | | P | | glipizide/metformin | | | NP | Beconase AQ | SCN | | P |
| Novolog U-100 Cartridge/Pen/Vial | SCN | | P | metformin ER (Gen-Glucophage) | | P | | Hypoglycemics, Thiazolidinediones | | | | Qnasl 80 nasal spray | | | P |
| Admelog | | | NP | Farxiga | | P | | pioglitazone | | | P | azelastine (Gen-Astebro) | | | NP |
| Afrezza | SCN | | NP | Invokamet | | P | | pioglitazone-glimepiride | | | NP | azelastine/fluticasone (Gen-Dymista) | | | NP |
| Apidra | | | NP | Invokana | | P | | pioglitazone-metformin | | | NP | flunisolide | | | NP |
| Fiasp U-100 cartridge, pen, pumpcart, vial | SCN | | NP | Jardiance | | P | | Actoplus MET | | | NP | mometasone furoate spray Rx | | | NP |
| Humalog Tempo Pen | | | NP | Symlin | | P | | Idiopathic Pulmonary Fibrosis | | | | olopatadine nasal spray | | | NP |
| Humalog U-200 Kwikpen | | | NP | Synjardy | | P | | pirfenidone (Gen-Esbriet) | | | P | Dymista | | | NP |
| Lyumjev U-100 Kwikpen, Tempo Pen, & Vial | | | NP | Welchol packet | | P | | Ofev | | | P | Omnaris | SCN | | NP |
| Lyumjev U-200 Kwikpen | | | NP | Xigduo XR | | P | | Immunomodulators, Asthma | | | | Qnasl 40 nasal spray | | | NP |
| Novolin | SCN | | NP | colesevelam packet (Gen-Welchol packet) | | NP | | Fasenra | | | P | Ryaltris nasal spray | SCN | | NP |
| Hypoglycemics, Insulins Long-Acting | | | | dapagliflozin tabs (Gen-Farxiga) | SCN | NP | | Xolair | SCN | | P | Xhance | SCN | | NP |
| Lantus | | | P | dapagliflozin/metformin (Gen-Xigduo XR) | SCN | NP | | Nucala | SCN | | NP | Zetonna | SCN | | NP |
| Levemir | SCN | | P | metformin 625mg, 750mg tabs | SCN | NP | | Tezspire pen | | | NP | Leukotriene Modifiers | | | |
| insulin glargine-yfgn U-100 vial & pen (Gen-Semglee(YFGN)) | SCN | | P | metformin ER | | NP | | Immunomodulators, Atopic Dermatitis | | | | montelukast chew tabs, tablets | | | P |
| insulin degludec pen U-100, U-200 (Gen-Tresiba) | SCN | | NP | metformin ER OSM-tab | | NP | | Adbry | SCN | | P | Zylo | SCN | | P |
| | | | | metformin solution (Gen-Riomet solution) | SCN | NP | | Cibinqo | | | NP | montelukast granules | | | NP |
| | | | | Cycloset | | NP | | Dupixent | | | NP | zafirlukast (Gen-Accolate) | | | NP |
| | | | | | | | | Ebglyss | | | NP | zileuton ER | | | NP |
| | | | | | | | | Nemluvio | SCN | | NP | Lipotropics, ACL Inhibitors | | | |
| | | | | | | | | Immunomodulators, Atopic Dermatitis – Topical | | | | Nexletol | SCN | | NP |
| | | | | | | | | tacrolimus | | | P | Nexlizet | SCN | | NP |
| | | | | | | | | pimecrolimus cream** | SCN | | P | Lipotropics, Apo-B Inhibitors | | | |
| | | | | | | | | Elidel | | | P | Juxtapid | SCN | | NP |
| | | | | | | | | Eucrisa 2% | SCN | | P | | | | |
| | | | | | | | | Opzelura 1.5%* | | | NP | | | | |
| | | | | | | | | Vtama 1% cream | 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 (BBG) 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 05/29/2025 Effective 05/01/2025

| Lipotropics, Bile Acid Sequestrants | | | Lipotropics, Other (cont) | | | Neuropathic Pain (cont) | | | NSAIDS (cont) | | |
|------------------------------------------------------------------------|-----|----|-------------------------------------------|-----|-----|---------------------------------------------------|-----|-----|--------------------------------------------------------------------|-----|----|
| cholestyramine | | P | Tryngolza | SCN | NP | Lyrca | | P | ketoprofen | | NP |
| colesevelam tablets (Gen-Welchol tablets) | | | Vytorin | SCN | NP | duloxetine 40mg DR capsule | | NP | ketoprofen ER caps | SCN | NP |
| colestipol tablet | | P | Zypitamag | SCN | NP | gabapentin ER (Gen-Gralise) | DR | NP | ketorolac nasal spray (Gen-Sprix) | SCN | NP |
| Welchol packet | | P | Lipotropics, PCSK9 Inhibitors | | | pregabalin ER (Gen-Lyrca CR) | DR | NP | meclofenamate | SCN | NP |
| colesevelam packet (Gen-Welchol packet) | | NP | Praluent | SCN | P | DermacinRX Lidocan Patch | | NP | mefenamic acid | | NP |
| colestipol granules | | NP | Repatha | | NP | Drizalma sprinkle DR | | NP | meloxicam capsule (Gen-Vivlodex) | SCN | NP |
| Colestid granules | | NP | Methotrexate | | | Gabarone tablets | SCN | NP | naproxen CR | | NP |
| Lipotropics, Fibric Acids | | | methotrexate tablet, PF vial, vial | | P | Gralise | DR | SCN | naproxen/esomeprazole DR (Gen-Vimovo) | | NP |
| fenofibrate capsule, tablets (Gen-Tricor) | | P | Jylamvo | SCN | NP | Horizant | | NP | naproxen EC | SCN | NP |
| fenofibric acid (Gen-Trilipix) | | P | Otrexup Auto Injector | SCN | NP | Lidocan | | NP | naproxen sodium Rx | | NP |
| gemfibrozil | | P | Rasuvo Auto Injector | | NP | Lyrca CR | DR | NP | naproxen suspension | SCN | NP |
| fenofibrate capsule, tablets (Gen-Antara, Fenoglide, Lipofen, Lofibra) | | NP | Trexall tablet | SCN | NP | NSAIDS | | | oxaprozin tablet | | NP |
| fenofibric acid (Gen-Fibricor) | | NP | Movement Disorders | | | celecoxib cap | | P | piroxicam | | NP |
| Fenoglide tablet | | NP | tetrabenazine | DR | P | diclofenac potassium 50mg tab | | P | tolmetin | | NP |
| Lipofen capsule | SCN | NP | Austedo | DR | P | diclofenac sodium | | P | Arthrotec tabs | | NP |
| Lipotropics, Niacin | | | Ingrezza caps, pack, sprinkles | DR | SCN | diclofenac ER | | P | Dolobid tablet | SCN | NP |
| niacin ER tabs (RX) | | P | MS Agents | | | flurbiprofen | | P | Duexis | SCN | NP |
| Lipotropics, Omega-3 Acids | | | dimethyl fumarate DR caps (Gen-Tecfidera) | SCN | P | ibuprofen Rx | | P | Elyxyb solution | SCN | NP |
| omega-3 acid ethyl esters | | P | fingolimod 0.5mg (Gen-Gilenya) | SCN | P | ibuprofen OTC chew tab 100mg* | | P | Fenopron capsule | SCN | NP |
| icosapent ethyl (Gen-Vascepa) | | NP | teriflunomide (Gen-Aubagio) | | P | ibuprofen OTC | SCN | P | Kiprofen | SCN | NP |
| Lipotropics, Other | | | Gilenya 0.25mg | | P | indomethacin caps | | P | Lofena 25mg tablet | SCN | NP |
| atorvastatin | | P | Kesimpta | | P | ketorolac | | P | Nalfon | SCN | NP |
| ezetimibe | | P | Bafiertam DR capsule | SCN | NP | meloxicam tablets | | P | Naprelan CR | | NP |
| lovastatin | | P | Mavenclad | SCN | NP | nabumetone | | P | Relafen DS | SCN | NP |
| pravastatin | | P | Mayzent | | NP | naproxen Rx | | P | Vimovo | SCN | NP |
| rosuvastatin | | P | Ponvory | | NP | naproxen DS Rx | | P | * Products are only covered for members 12 years of age or younger | | |
| simvastatin | | P | Tasceno ODT | | NP | naproxen OTC | SCN | P | | | |
| amlodipine/atorvastatin (Gen-Caduet) | | NP | Vumerity DR capsule | SCN | NP | sulindac | | P | Ophthalmics, Allergic Conjunctivitis | | |
| ezetimibe/simvastatin (Gen-Vytorin) | | NP | Zeposia | | NP | diclofenac pot 25 mg capsule (Gen-Zipsor capsule) | | NP | azelastine | | P |
| fluvastatin | | NP | MS Agents, Interferons | | | diclofenac pot 25 mg tablet (Gen-Lofena) | SCN | NP | cromolyn | | P |
| fluvastatin ER | | NP | Avonex | | P | diclofenac pot 50 mg powder packet (Gen-Cambia) | | NP | ketorolac 0.5% | | P |
| pitavastatin (Gen-Livalo) | SCN | NP | Betaseron | | P | diclofenac sodium/misoprostol tablets | | NP | ketotifen OTC | SCN | P |
| Altoprev | SCN | NP | Rebif | SCN | P | diflunisal | | NP | olopatadine 0.2% (Gen-Pataday) | | P |
| Atorvaliq | SCN | NP | Plegridy | SCN | NP | etodolac | | NP | Alaway OTC | SCN | P |
| Caduet | | NP | MS Agents, Other | | | etodolac XL | | NP | Alrex | | P |
| Ezallor sprinkles | | NP | dalfampridine ER | DR | SCN | fenoprofen | SCN | NP | bepotastine drops (Gen-Bepreve) | | NP |
| Flolipid suspension | SCN | NP | Copaxone 20mg, 40mg | | P | ibuprofen-famotidine (Gen-Duexis) | SCN | NP | epinastine | | NP |
| Lescol XL | | NP | glatiramer | SCN | NP | indomethacin ER caps | | NP | loteprednol etabonate (Gen-Alrex) | SCN | NP |
| Livalo | SCN | NP | Glatopa | | NP | indomethacin rectal | | NP | olopatadine 0.1% (Gen-Patanol) | | NP |
| | | | Neuropathic Pain | | | indomethacin suspension | SCN | NP | Alomide | | NP |
| | | | duloxetine DR 20mg, 30mg, 60mg caps | | P | | | | Bepreve | | NP |
| | | | gabapentin | | P | | | | Zerviate drops | SCN | NP |
| | | | pregabalin (Gen-Lyrca) | | P | | | | Ophthalmics, Antibacterial | | |
| | | | | | | | | | ciprofloxacin solution | | P |
| | | | | | | | | | erythromycin | | 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 (BBG) 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 05/29/2025 Effective 05/01/2025

| Ophthalmics, Antibacterial (cont) | | | Ophthalmics, Anti-Inflammatories (cont) | | | Ophthalmics, Glaucoma-Other (cont) | | | Opioid Dependency Agents-Rescue Agents (cont) | | |
|----------------------------------------------|-----|----|--------------------------------------------------|-----|----|----------------------------------------------------------------------------------|-----|--------|----------------------------------------------------------------------------------|-----|--------|
| gentamicin drops | | P | bromfenac 0.075% (Gen-Bromsite) | | NP | Rhopressa | SCN | P | Rextovy spray | | SCN NP |
| moxifloxacin (Gen-Vigamox) | | P | bromfenac 0.09% | | NP | Rocklatan | | P | Zimhi syringe | | SCN NP |
| ofloxacin | | P | difluprednate (Gen-Durezol) | | NP | Simbrinza | | P | Opioid Dependency Agents-methadone | | |
| polymyxin/trimethoprim | | P | loteprednol (Gen-Lotemax) | | NP | apraclonidine | | NP | methadone dispersible tab | DR | P |
| sulfacetamide solution | | P | prednisolone sodium phosphate | | NP | brimonidine tartrate (Gen-Alphagan P 0.1% & 0.15%) | | NP | methadone concentrate | DR | P |
| tobramycin | | P | Acuvail | | NP | brimonidine tartrate-timolol (Gen-Combigan) | | NP | Opioid Dependency and Alcohol Abuse / Dependency Agents | | |
| Ciloxan ointment | | P | Bromsite | | NP | brinzolamide 1% (Gen-Azopt) | | NP | naltrexone tab | DR | P |
| Tobrex ointment | | P | FML Liquifilm | | NP | Cosopt PF | | NP | Vivitrol injection* | DR | SCN P |
| bacitracin | | NP | Inveltys | SCN | NP | lopidine | | NP | *Policy for obtaining provider-administered drugs applies. Refer to topic #5697. | | |
| bacitracin/polymyxin | | NP | Lotemax | | NP | Ophthalmics, Glaucoma-Prostaglandins | | | Otics, Antibiotics | | |
| gatifloxacin | | NP | Prolensa | | NP | latanoprost | | P | neomycin/polymyxin/Hc sol | | P |
| neomycin/bacitracin/polymyxin ointment | | NP | Ophthalmics, Anti-Inflammatory / Immunomodulator | | | Lumigan | SCN | P | neomycin/polymyxin/Hc susp | | P |
| neomycin/polymyxin/gramicidin drops | | NP | Restasis | SCN | P | Travatan Z | | P | ofloxacin | | P |
| sulfacetamide ointment | | NP | Xiidra | | P | Xalatan | | P | Cipro HC | | P |
| triple antibiotic | | NP | cyclosporine eye emulsion (Gen-Restasis) | | NP | bimatoprost 0.03% 2.5ml, 5ml | | NP | ciprofloxacin | SCN | NP |
| Azasite | | NP | Cequa solution | | NP | bimatoprost 0.03% 7.5ml | | NP | ciprofloxacin/dexamethasone suspension (Gen-Ciprodex)* | | NP |
| Besivance | | NP | Eysuvis eye drops | SCN | NP | tafluprost (Gen-Zioptan) | SCN | NP | ciprofloxacin/fluocinolone (Gen-Otovel) | | NP |
| Natacyn | | NP | Miebo | | NP | travoprost (Gen-Travatan Z) | | NP | Otovel | | NP |
| Ophthalmics, Antibiotic-Steroid Combinations | | | Restasis Multidose | SCN | NP | lyuzeh | SCN | NP | NOTE: * Prior Authorization not required for members 6 years of age and younger. | | |
| neomycin/polymyxin/dexamethasone | | P | Tyrvaya nasal spray | SCN | NP | Vyzulta solution | | NP | Otics, Anti-Infectives & Anesthetics | | |
| sulfacetamide/prednisolone | | P | Verkazia | SCN | NP | Xelpros | | NP | acetic acid | | P |
| tobramycin/dexamethasone | | P | Vevye | SCN | NP | Zioptan | | NP | acetic acid HC | | NP |
| Tobradex ointment, suspension | | P | Ophthalmics, Glaucoma-Beta Blockers | | | Opioid Dependency Agents-Buprenorphine | | | Pancreatic Enzymes | | |
| neomycin/bacitracin/polymyxin/Hc | | NP | carteolol | | P | buprenorphine/naloxone tab | DR | P | Zenpep DR | SCN | P |
| neomycin/polymyxin/Hc drops | | NP | levobunolol | | P | Brixadi* | DR | SCN P | Creon DR | | NP |
| Tobradex ST | | NP | timolol (Gen-Timoptic/XE) | | P | Sublocade* | DR | SCN P | Pertzye DR | | NP |
| Zylet | | NP | Betimol | SCN | P | Suboxone Film | DR | SCN P | Viokace | | NP |
| Ophthalmics, Anti-Inflammatories | | | Betoptic S | | P | Zubsolv | DR | SCN P | Phosphate Binders | | |
| dexamethasone | | P | betaxolol | | NP | buprenorphine tabs (without naloxone) | DR | NP | calcium acetate 667mg capsule, tablets | | P |
| diclofenac eye drop | | P | timolol (Gen-Betimol) | SCN | NP | buprenorphine/naloxone film | DR | NP | sevelamer carbonate (Gen-Renvela) | | P |
| fluorometholone | | P | timolol (Gen-Istalol) | | NP | *Policy for obtaining provider-administered drugs applies. Refer to topic #5697. | | | ferric citrate (Gen-Auryxia) | SCN | NP |
| flurbiprofen | | P | timolol (Gen-Timoptic Ocudose) | | NP | Opioid Dependency Agents-Rescue Agent | | | lanthanum carbonate | | NP |
| ketorolac LS 0.4% | | P | Istalol | | NP | naloxone syringe | | P | sevelamer HCL (Gen-Renagel) | | NP |
| prednisolone acetate | | P | Timoptic Ocudose | | NP | naloxone vial | | P | Auryxia | SCN | NP |
| Durezol | | P | Ophthalmics, Glaucoma-Other | | | Narcan spray OTC | | SCN P | Fosrenol | | NP |
| Flarex | | P | brimonidine 0.2% | | P | Narcan spray RX | | SCN P | Magnebind | | NP |
| FML Forte | | P | dorzolamide | | P | naloxone spray OTC | | NP | Velphoro | SCN | NP |
| Ilevro | | P | dorzolamide w/timolol | | P | naloxone spray RX | | NP | Xphozah | SCN | NP |
| Lotemax suspension | | P | pilocarpine | | P | Kloxxado spray | | SCN NP | | | |
| Maxidex | | P | Alphagan P 0.1% | SCN | P | Opvee | | SCN NP | | | |
| Nevanac | | P | Alphagan P 0.15% | SCN | P | | | | | | |
| Pred Mild | SCN | P | Azopt 1% | | P | | | | | | |
| bromfenac 0.07% (Gen-Prolensa) | SCN | NP | Combigan | 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 (BBG) 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 05/29/2025 Effective 05/01/2025

| Platelet Aggregation Inhibitors | | | Proton Pump Inhibitors (cont) | | | Sickle Cell Anemia | | | Steroids, Topical Low (cont) | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|--------------------------------------------|-----|-----|-----------------------------------------------|-----|----|---------------------------------------------------------------------------|-----|----|
| aspirin | SCN | P | Prevacid Solutab | | NP | hydroxyurea | | P | hydrocortisone solution (Gen-Texacort solution) | SCN | NP |
| aspirin/dipyridamole | | P | Prilosec suspension | | NP | Droxia | | P | Capex shampoo | SCN | NP |
| clopidogrel | | P | Zegerid | | NP | Endari | SCN | P | Hydroxym Gel | | NP |
| dipyridamole | | P | Pulmonary Arterial Hypertension | | | Siklos | SCN | P | Texacort solution | SCN | NP |
| prasugrel | | P | ambrisentan tablet | | P | l-glutamine (Gen-Endari) | SCN | NP | Steroids, Topical Medium | | |
| Brilinta | | P | sildenafil tablet | DR | P | Xromi solution | SCN | NP | fluticasone cream, ointment | | P |
| ticagrelor tablet (Gen-Brilinta) | SCN | NP | tadalafil tablet | DR | P | Skeletal Muscle Relaxants | | | mometasone furoate | | P |
| Prenatal Vitamins | | | Opsumit | | P | baclofen solution (Gen-Ozobax) | | P | betamethasone valerate foam | | NP |
| prenatal vitamin plus low iron tablets | SCN | P | Tracleer tablet | | P | baclofen 5mg, 10mg, 20mg tabs | | P | clotocortolone cream (Gen-Cloderm) | | NP |
| Completenate chewable tablet | SCN | P | bosentan tab (Gen-Tracleer tab) | | NP | chlorzoxazone 500mg tablet | | P | flurandrenolide lotion, cream | | NP |
| Folivane-OB capsule | SCN | P | sildenafil suspension | DR | SCN | cyclobenzaprine tablet | | P | flurandrenolide ointment | SCN | NP |
| M-Natal Plus tablet | SCN | P | Adempas | | NP | dantrolene sodium | | P | fluticasone lotion | | NP |
| PNV-DHA softgel | SCN | P | Alyq | DR | NP | methocarbamol 500mg, 750mg | | P | fluocinolone cream | SCN | NP |
| SE-Natal 19 chewable tablet | SCN | P | Opsynvi tablet | | NP | tizanidine tablet | | P | fluocinolone ointment, solution | | NP |
| SE-Natal 19 tablet | SCN | P | Orenitram ER, kit | | SCN | baclofen 15mg tablets | | NP | hydrocortisone butyrate cream, lotion, ointment, solution | | NP |
| Taron-C DHA capsule | SCN | P | Revatio suspension | DR | NP | baclofen solution (Gen-Ozobax DS) | | NP | hydrocortisone valerate | | NP |
| Thrivite RX tablet | SCN | P | Tadliq suspension | DR | SCN | baclofen suspension (Gen-Fleqsuvy suspension) | | NP | prednicarbate cream | SCN | NP |
| Tricare Prenatal tablet | SCN | P | Tracleer suspension | | NP | carisoprodol | | NP | prednicarbate ointment | | NP |
| Trinatal RX 1 tablet | SCN | P | Tyvaso DPI inhalation | | SCN | chlorzoxazone 250mg tablets | | NP | Beser lotion | SCN | NP |
| Virt-PN DHA softgel | SCN | P | Tyvaso kit, solution | | SCN | chlorzoxazone 375mg, 750mg tablets | | NP | Cloderm | | NP |
| Wescap-PN DHA capsule | SCN | P | Upravi tablet, titration pack | | NP | cyclobenzaprine 7.5mg tablet | | NP | Pandel | SCN | NP |
| Zatean-PN DHA capsule | SCN | P | Ventavis | | NP | cyclobenzaprine ER capsule | | NP | Synalar | 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. | | NP | Winrevair | SCN | NP | metaxalone 400mg, 800mg tabs | | NP | Steroids, Topical High | | |
| Proton Pump Inhibitors | | | Sedative Hypnotics | | | metaxalone 640mg tablets | SCN | NP | betamethasone valerate | | P |
| esomeprazole magnesium RX | | P | eszopiclone | | P | methocarbamol 1,000mg | SCN | NP | fluocinonide cream, ointment, solution | | P |
| lansoprazole DR RX | | P | melatonin 3mg, 5mg tablets | | P | orphenad/asa/cafeine tablet | SCN | NP | triamcinolone acetonide | | P |
| omeprazole DR RX | | P | temazepam 15mg, 30mg caps | | P | orphenadrine ER | | NP | amcinonide | | NP |
| pantoprazole | | P | triazolam | | P | tizanidine capsule | | NP | betamethasone dipropionate cream, gel, lotion, ointment | | NP |
| Dexilant DR | | P | zaleplon | | P | Amrix | | NP | desoximetasone | | NP |
| Nexium DR packet | | P | zolpidem tablets | | P | Fexmid | | NP | diflorasone diacetate | | NP |
| Protonix suspension | | P | zolpidem ER tablets | | P | Fleqsuvy suspension | | NP | fluocinonide emollient, gel | | NP |
| dexlansoprazole capsules (Gen-Dexilant DR) | SCN | NP | ramelteon tablet (Gen-Rozerem) | | P | Lyvispah | SCN | NP | halcinonide 0.1 % cream (Gen-Halog cream) | | NP |
| esomeprazole DR packet (Gen-Nexium DR packet) | SCN | NP | Restoril 7.5mg, 15mg, 22.5mg, 30mg capsule | | P | Lorzone | SCN | NP | triamcinolone aerosol spray | | NP |
| lansoprazole ODT solutab (Gen-Prevacid solutab) | | NP | doxepin tablet (Gen-Silenor) | SCN | NP | Norgesic Forte tablet | SCN | NP | Diprolene ointment | | NP |
| pantoprazole suspension (Gen-Protonix suspension) | | NP | estazolam | | NP | Soma | | NP | Halog cream, ointment, solution | | NP |
| omeprazole-bicarb RX | | NP | flurazepam | SCN | NP | Tanlor | SCN | NP | Topicort 0.05% ointment | | NP |
| rabeprazole | | NP | quazepam | SCN | NP | Steroids, Topical Low | | | Topicort 0.25% spray | | NP |
| Konvomep | | NP | temazepam 7.5mg, 22.5mg caps | | NP | hydrocortisone | | P | Steroids, Topical Very High | | |
| | | | zolpidem tartrate 7.5 mg capsule | | NP | hydrocortisone OTC | SCN | P | clotetasol cream 0.05%, emollient cream, gel, ointment, shampoo, solution | | P |
| | | | zolpidem tablet SL | | NP | Derma-Smoother-FS | SCN | P | | | |
| | | | Belsomra | SCN | NP | alclometasone dipropionate cream, ointment | | NP | | | |
| | | | Dayvigo | | NP | desonide cream, ointment, lotion | | NP | | | |
| | | | Edluar | | NP | fluocinolone oil | | NP | | | |
| | | | Igalmi | SCN | NP | | | | | | |
| | | | Quviviq | 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 (BBG) 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 05/29/2025 Effective 05/01/2025

| Steroids, Topical Very High (cont) | | | Stimulants (cont) | | | Stimulants, Related Agents (cont) | | | Brand Name Drugs with Generic Copay (cont) | |
|--------------------------------------------------------------|-----|-----|-------------------------------------------------------------------------------------------------------|----|-----|----------------------------------------------------|-----|------------|--------------------------------------------|------------|
| halobetasol prop cream, ointment | | P | Vyvanse chew tabs | DR | P | Onyda XR suspension | SCN | NP | Drug Name | Start Date |
| Clodan | SCN | P | amphetamine sulfate (Gen-Evekeo)* | DR | NP | Qelbree ER | SCN | NP | Humalog Jr Kwikpen | 05/01/2020 |
| betamethasone dipropionate augmented cream, lotion, ointment | | NP | dextroamphetamine-amphetamine | DR | NP | Stimulants, Related Agents – Wake Promoting | | | Humalog Mix | 05/01/2020 |
| clobetasol 0.025% cream | SCN | NP | dextroamphetamine-amphetamine ER (Gen-Adderall XR) | DR | NP | armodafinil | | P | Humalog U-100 Kwikpen/Vial | 07/01/2019 |
| clobetasol foam, lotion, spray, emulsion foam | | NP | dextroamphetamine-amphetamine ER (Gen-Mydayis ER) | DR | NP | modafinil | | P | Intelence | 07/01/2023 |
| halobetasol propionate foam | | NP | dextroamphetamine* (Gen-Vyvanse) | DR | NP | Sunosi | SCN | NP | Lantus | 06/01/2022 |
| Apexicon E | SCN | NP | dextroamphetamine ER | DR | NP | Ulcerative Colitis | | | Novolog Mix | 01/01/2020 |
| Bryhali lotion | | NP | dextroamphetamine solution* | DR | SCN | balsalazide | | P | Novolog U-100 Pen/Vial | 01/01/2020 |
| Clobex shampoo, spray | SCN | NP | lisdexamfetamine caps (Gen-Vyvanse caps) | DR | NP | mesalamine suppository | | P | Retin-A (not micro) | 07/01/2016 |
| Impeklo lotion | SCN | NP | lisdexamfetamine chew (Gen-Vyvanse chew) | DR | NP | mesalamine DR tablet (Gen-Lialda tablet) | | P | Selzentry solution, tablet | 07/01/2023 |
| Lexette foam | | NP | methylphenidate ER caps (Gen-Aptensio XR) | DR | NP | sulfasalazine | | P | Suboxone film | 07/01/2020 |
| Ultravate lotion | SCN | NP | methylphenidate ER tab (Gen-Relexxii) | DR | SCN | Apriso ER | | P | Symfi | 07/01/2023 |
| Stimulants | | | methamphetamine | DR | NP | Azulfidine | | P | Symfi Lo | 07/01/2023 |
| dexamethylphenidate | DR | P | Adderall* | DR | SCN | Pentasa | | P | Tegretol suspension | 01/01/2016 |
| dexamethylphenidate ER capsule | DR | P | Adderall XR | DR | NP | Rowasa enema, kits | SCN | P | Tegretol tablet | 01/01/2016 |
| methylphenidate tablet (Gen-Ritalin) | DR | P | Adzenys XR ODT | DR | SCN | Uceris ER | | P | Tegretol XR | 01/01/2021 |
| methylphenidate CD | DR | P | Azstarys | DR | SCN | budesonide ER (Gen-Uceris ER) | | NP | Tobradex suspension | 01/01/2012 |
| methylphenidate chew tab (Gen-Methylin chew tab) | DR | P | Cotempla XR | DR | SCN | budesonide rectal foam | | NP | Transderm-Scop | 07/01/2022 |
| methylphenidate ER tablet (Gen-Concerta) | DR | P | Dexedrine Spansule | DR | SCN | mesalamine DR capsule (Gen-Delzicol) | | NP | Ventolin HFA | 01/01/2023 |
| methylphenidate ER tablet (Gen-Metadate ER and Methylin ER) | DR | P | Dyanavel XR | DR | SCN | mesalamine DR 800 mg tablet (Gen-Asacol tablet) | | NP | Vyvanse caps | 01/01/2024 |
| methylphenidate LA capsule (Gen-Ritalin LA) | DR | P | Evekeo* | DR | NP | mesalamine ER capsule (Gen-Apriso ER) | SCN | NP | Xalatan | 01/01/2023 |
| methylphenidate patch (Gen-Daytrana patch)** | DR | SCN | Evekeo ODT* | DR | NP | mesalamine ER 500mg caps (Gen-Pentasa) | | NP | | |
| methylphenidate solution (Gen-Methylin solution) | DR | P | Jornay PM | DR | SCN | mesalamine enema, kits | | NP | | |
| Aptensio XR | DR | P | Relexxii ER | DR | SCN | Delzicol | | NP | | |
| Concerta ER | DR | P | Xelstrym Patch | DR | SCN | Dipentum | | NP | | |
| Daytrana patch | DR | SCN | Zenzedi* | DR | NP | Uceris foam | | NP | | |
| Focalin | DR | P | *Prior Authorization not required for members 6 years of age and younger. | | | Velsipity | | NP | | |
| Focalin XR | DR | P | ** Product is moving to Preferred status temporarily due to shortage/access issues for Daytrana patch | | | Zeposia | | NP | | |
| Methylin solution | DR | SCN | Stimulants, Related Agents | | | Uterine Disorder Treatments | | | | |
| Quillichew ER | DR | SCN | atomoxetine | | P | Myfembree | | P | | |
| Quillivant XR | DR | SCN | clonidine ER | | P | Oriahnn | | P | | |
| Ritalin LA | DR | P | guanfacine ER | | P | Orilissa | | P | | |
| Vyvanse caps | DR | P | | | | Brand Name Drugs with Generic Copay | | | | |
| | | | | | | Drug Name | | Start Date | | |
| | | | | | | Alphagan P 0.15% | | 01/01/2012 | | |
| | | | | | | Carbatrol ER | | 01/01/2021 | | |
| | | | | | | Concerta | | 01/01/2018 | | |
| | | | | | | Depakote sprinkle | | 01/01/2021 | | |
| | | | | | | Forteo | | 07/01/2022 | | |

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 (BBG) 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