

# Antibiotics - Oral Cephalosporins

## First Generation

<i>Product Name</i>	<i>Preferred Drug List</i>	<i>Medicaid</i>	<i>Health Choice</i>	<i>ABW: Wayne, Macomb</i>	<i>Plan B: Wayne, Macomb</i>
<b>Cefadroxil</b>		FA	FA	PA	PA
<b>Cephalexin</b>	√	FA	FA	FA	FA

## Second Generation

<i>Product Name</i>	<i>Preferred Drug List</i>	<i>Medicaid</i>	<i>Health Choice</i>	<i>ABW: Wayne, Macomb</i>	<i>Plan B: Wayne, Macomb</i>
<b>Cefaclor</b>		ST	ST	ST	ST
<b>Cefprozil</b>		ST	ST	ST	ST
<b>Cefuroxime axetil</b>		ST	ST	ST	ST
Ceftin suspension		PA	PA	NF	NF

## Third Generation

<i>Product Name</i>	<i>Preferred Drug List</i>	<i>Medicaid</i>	<i>Health Choice</i>	<i>ABW: Wayne, Macomb</i>	<i>Plan B: Wayne, Macomb</i>
<b><u>All Drugs PA</u></b>					

\*Generics are **bolded**

\*√ = Preferred Drug

\*FA = Formulary

\*QL = Quantity Limit (Maximum 1 per day)

\* PA = Prior Authorization

\*NF = Non-Formulary

