**MED D - 2025 SilverScript Choice Formulary**

Refer to the appropriate formulary based on the state:

|  |  |
| --- | --- |
| **If...** | **Then...** |
| AR, HI, IA, KS, MI, MN, MT, ND, NE, OR, SD, VA, WA, WI, WY | Refer to [MED D - A2 SilverScript Choice Formulary](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=c3d13a93-208e-4ea6-9ccf-673250ea0a04). |
| All Other States and DC | Refer to[MED D – A1 SilverScript Choice Formulary](https://thesource.cvshealth.com/nuxeo/thesource/#!/view?docid=f560c68b-372f-4769-ac52-6e59a6523cca). |

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