Formulary **lenalidomide (Revlimid®)** will be covered on the prescription drug benefit when the following criteria are met:

- Prescribed by an Oncologist or Hematologist

  **AND**

- Diagnosis of multiple myeloma

  **OR**

- Diagnosis of myelodysplastic syndrome (MDS) in patients with 5q cytogenetic abnormality who are transfusion-dependent (after epoetin failure or documented endogenous epoetin level is more than 500 microunits/mL)

  **OR**

- Diagnosis of mantle cell lymphoma with progression after two chemotherapy regimens which include cyclophosphamide/doxorubicin, bortezomib, OR bendamustine

  **OR**

- Diagnosis of follicular lymphoma disease with relapse or progression after at least one prior therapy