Non-Formulary **Thalidomide (Thalomid)** will be covered on the prescription drug benefit when the following criteria are met:

1. Prescribed by an Oncologist or Hematologist **AND**
   Diagnosis of multiple myeloma

   -OR-

2. Prescribed by Infectious Disease **AND**
   Presence of a mycobacterial infection

   -OR-

3. Prescribed by Dermatology **AND**
   a. Presence of a mycobacteria infection (erythema nodosum leprosum) **-OR-**
   b. Diagnosis of cutaneous lupus erythematosus AND tried and failed 4 of the following:
      - Acitretin, chloroquine, dapsone, hydroxychloroquine, intralesional steroids, isotretinoin, methotrexate, mycophenolate, topical calcineurin inhibitors, topical steroids