

Myeloma Pathways: Multiple Myeloma

Patient Name: _____ Date of Birth: _____

Member Number: _____ Treatment Start Date: _____

Pathology: _____ Stage: _____

Line of Therapy: 1st Line 2nd Line 3rd Line 3rd Line+
 Maintenance

ECOG Performance Status: _____ ICD-10 Code: _____

Biomarkers/Characteristics: (select all that apply)

Transplant Candidate: No Yes

Primary/First Line of Therapy (1st Line) | Transplant Candidates

VRD/VDR: bortezomib (Velcade), lenalidomide (Revlimid), and dexamethasone

Primary/First Line of Therapy (1st Line) | Non-Transplant Candidates

CyBorD or VDC: bortezomib (Velcade), cyclophosphamide, and dexamethasone

R-dex: lenalidomide (Revlimid) and low-dose dexamethasone

VRD/VDR: bortezomib (Velcade), lenalidomide (Revlimid), and dexamethasone

VD: bortezomib (Velcade) and dexamethasone

Maintenance Therapy | Post-Transplant

Lenalidomide (Revlimid)

Relapsed Disease | Second and Subsequent Lines of Therapy (2nd Line+)

CRd or KRd: carfilzomib (Kyprolis), lenalidomide (Revlimid), and dexamethasone

DRD: daratumumab (Darzalex), lenalidomide (Revlimid), and dexamethasone

DVD: daratumumab (Darzalex), bortezomib (Velcade), and dexamethasone

Relapsed Disease | Third and Subsequent Lines of Therapy (3rd Line+)

Daratumumab (Darzalex)

Elotuzumab (Empliciti), lenalidomide (Revlimid), and dexamethasone

Elotuzumab (Empliciti), pomalidomide (Pomalyst), and dexamethasone*

* Eligible only if patient has received prior therapy with lenalidomide and proteasome inhibitor

Note: Pathways are independent of specific health plan medical policy coverage criteria. Health plan medical policy/clinical guidelines should be consulted to determine whether proposed services will be covered.

