PRIOR AUTHORIZATION CRITERIA

BRAND NAME
(generic)

KERENDIA
(finerenone)

Status: CVS Caremark Criteria
Type: Initial Prior Authorization

POLICY

FDA-APPROVED INDICATIONS

Kerendia is indicated to reduce the risk of sustained eGFR decline, end-stage kidney disease, cardiovascular death, non-fatal myocardial infarction, and hospitalization for heart failure in adult patients with chronic kidney disease (CKD) associated with type 2 diabetes (T2D).

COVERAGE CRITERIA

The requested drug will be covered with prior authorization when the following criteria are met:

- The patient has a diagnosis of chronic kidney disease (CKD) associated with type 2 diabetes (T2D)

AND

- The patient is currently receiving a maximally tolerated dose of an angiotensin-converting enzyme inhibitor (ACEi) or angiotensin receptor blocker (ARB)
  OR
- The patient has experienced an intolerance to an angiotensin-converting enzyme inhibitor (ACEi) or angiotensin receptor blocker (ARB)
  OR
- The patient has a contraindication that would prohibit a trial of an angiotensin-converting enzyme inhibitor (ACEi) or angiotensin receptor blocker (ARB)

REFERENCES

1. Kerendia [package insert]. Whippany, NJ: Bayer HealthCare Pharmaceuticals Inc.; July 2021.
2. Lexicomp Online, AHFS DI (Adult and Pediatric) Online, Hudson, Ohio: UpToDate, Inc.; 2021; Accessed September 28,2021.
3. Micromedex (electronic version). IBM Watson Health, Greenwood Village, Colorado, USA. Available at: https://www.micromedexsolutions.com. Accessed September 28, 2021
4. ADA's Standards of Medical Care in Diabetes - 2022. *Dia Care.* 2021;45(S1):S1-S264.
5. de Boer IH, Caramori ML, Chan JCN, et al. KDIGO 2020 Clinical Practice Guideline for Diabetes Management in Chronic Kidney Disease. *Kidney International*. 2020;98(4):S1-S115.
6. Bakris GL, Agarwal R, Anker SD, et. al. Effect of Finerenone on Chronic Kidney Disease Outcomes in Type 2 Diabetes. *New Engl J Med*, 2020;383(23):2219-2229.