

**KERENDIA
(finerenone)**

Pre - PA Allowance

None

Prior-Approval Requirements

Age 18 years of age or older

Diagnosis

Patient must have the following:

1. Chronic kidney disease (CKD) associated with Type 2 Diabetes Mellitus
 - a. Used in combination with maximally tolerated dose of an ACE or ARB, unless medically contraindicated
 - b. Used in combination with an antidiabetic agent, unless medically contraindicated
 - c. Patients on eplerenone, spironolactone, renin inhibitor, or potassium-sparing diuretic **ONLY**: patient will discontinue use of this medication at least 4 weeks before starting Kerendia
 - d. Prescriber agrees to monitor eGFR and serum potassium levels
 - e. **NO** adrenal insufficiency
 - f. **NO** concurrent therapy with strong CYP3A4 inhibitors (e.g., itraconazole)

Prior - Approval Limits

Quantity 90 tablets per 90 days

Duration 12 months

Prior – Approval *Renewal* Requirements

Age 18 years of age or older

Diagnosis

Patient must have the following:

1. Chronic kidney disease (CKD) associated with Type 2 Diabetes Mellitus



**BlueCross
BlueShield**

Federal Employee Program.

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- a. Used in combination with maximally tolerated dose of an ACE or ARB, unless medically contraindicated
- b. Used in combination with an antidiabetic agent, unless medically contraindicated
- c. eGFR has improved or stabilized
- d. Prescriber agrees to monitor eGFR and serum potassium levels
- e. **NO** adrenal insufficiency
- f. **NO** concurrent therapy with strong CYP3A4 inhibitors (e.g., itraconazole)

Prior - Approval *Renewal* Limits

Same as above