

## **Pharmacy Drug Policy Checklist**

POLICY NAME Kerendia (finerenone) POLICY # 3134P

## Criteria

Coverage Criteria for Chronic Kidney Disease associated with Type 2 Diabetes	
	1.1 Diagnosis of type 2 diabetes and chronic kidney disease with eGFR of ≥25 mL/min/1.73m2
	1.2 Age 18 years or older
	1.3 Documented concurrent use of preferred ACE (some examples are lisinopril, benazepril, enalapril) or ARB (some examples are losartan, candesartan, olmesartan)
	1.4 Documented concurrent use or previous trial and failure of a preferred SGLT-2 inhibitor (such as Jardiance or Farxiga)