

Kerendia (finerenone)
Effective 03/01/2026

Plan	<input type="checkbox"/> MassHealth UPPL <input checked="" type="checkbox"/> Commercial/Exchange	Program Type	<input checked="" type="checkbox"/> Prior Authorization <input type="checkbox"/> Quantity Limit <input type="checkbox"/> Step Therapy
Benefit	<input checked="" type="checkbox"/> Pharmacy Benefit <input type="checkbox"/> Medical Benefit		
Specialty Limitations	N/A		
Contact Information	Medical Benefit	Phone: 833-895-2611	Fax: 888-656-6671
	Pharmacy Benefit	Phone: 800-711-4555	Fax: 844-403-1029
Exceptions	N/A		

Overview

Kerendia (finerenone) is a non-steroidal mineralocorticoid receptor antagonist (MRA) 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).
- Cardiovascular death, hospitalization for heart failure, and urgent heart failure visits in adult patients with heart failure with left ventricular ejection fraction (LVEF) \geq 40%

Coverage Guidelines

Authorization may be granted for members new to the plan within the past 90 days who are currently receiving treatment with the requested medication, excluding when the product is obtained as samples or via manufacturer's patient assistance program

OR

Authorizations may be granted when all of the following diagnosis-specific criteria are met:

Chronic kidney disease associated with type 2 diabetes

1. Member has a diagnosis of chronic kidney disease (CKD) associated with type 2 diabetes (T2D)
2. Member meets ONE of the following:
 - a. Member has a paid claim or physician documented use of a sodium-glucose co-transporter 2 (SGLT2) inhibitor with renal benefit (e.g., Farxiga, Jardiance)
 - b. Member has intolerance or contraindication to SGLT2 inhibitor with renal benefit (e.g., Farxiga, Jardiance)
3. Member meets ONE of the following:
 - a. Member has a paid claim or physician documented use of an angiotensin-converting enzyme inhibitor (ACEi) or angiotensin receptor blocker (ARB)
 - b. Member has intolerance or contraindication to an ACEi or ARB

Heart Failure

1. Member has a diagnosis of heart failure
2. Member has a left ventricular ejection fraction (LVEF) greater than or equal to 40%
3. Member has New York Heart Association (NYHA) Class II, III, or IV symptoms
4. Member has estimated glomerular filtration rate (eGFR) greater than or equal to 25 mL/min/1.73 m²
5. Both of the following:
 - a. Member is on diuretic treatment (e.g., bumetanide, furosemide) for the management of symptoms of heart failure
 - b. Requested medication will not be prescribed in combination with spironolactone or eplerenone
6. One of the following:
 - a. Requested medication will be administered in combination with a sodium-glucose cotransporter-2 (SGLT2) inhibitor (e.g., Farxiga, Jardiance)
 - b. Member has a contraindication or intolerance to an SGLT2 inhibitor (e.g., Farxiga, Jardiance)

Continuation of Therapy

Requests for reauthorization will be approved when the following criteria are met:

1. Documentation of continuation of therapy and positive response to therapy.

Limitations

1. Initial approvals and reauthorizations will be granted for 12 months
2. The following quantity limits apply:

Drug Name	Quantity Limit
Kerendia tablet	1 tablet per day

References

1. American Diabetes Association. Standards of Medical Care in Diabetes - 2025. *Diabetes Care*. 2025;48(S1):S1-S352.
2. 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.
3. 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.
4. Kerendia (finerenone) [prescribing information]. Whippany, NJ: Bayer HealthCare Pharmaceuticals Inc.; August 2025.

Review History

01/19/2022 – Reviewed and Created for Jan P&T. Effective 03/01/2022.

02/12/2025 – Reviewed and updated for February P&T. Added Jardiance as an example of SGLT2 inhibitor. Effective 05/01/2025.

11/12/2025 – Reviewed and updated at November P&T. Added supplemental indication of heart failure. Effective 03/01/2026.

