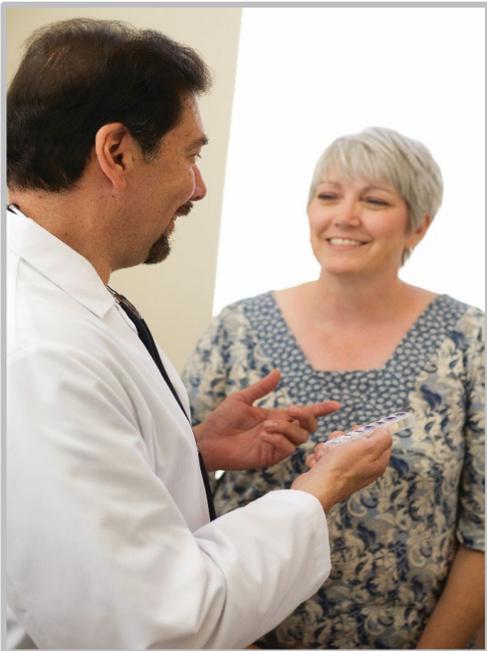


PROVIDER NEWSLETTER

A Newsletter for the Molina Healthcare of Illinois (MHIL) Provider Network

First Quarter 2022



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CAHPS®

The Consumer Assessment of Healthcare Providers and Systems (CAHPS®) is an industry standard survey tool used to evaluate patient satisfaction. Improving patient satisfaction has many benefits. It not only helps to increase patient retention, but can also help increase compliance with physician recommendations **and** improve patient outcomes.

Focusing together on a positive patient experience will greatly benefit your practice by:

- Increasing patient retention.
- Increasing compliance with physician clinical recommendations.
- Improving patients' overall wellness and health outcomes.
- Ensuring that preventive care needs are addressed more timely.
- Reducing no-show rates.

Additional resources are available for office staff and patients:

- For additional after-hours coverage, members can call the Nurse Advice Line:

Nurse Advice Line (HEALTHLINE) 24 hours per day, 365 days per year	
English Phone - (888) 275-8750	English TTY – (888) 735-2929
Spanish Phone - (866) 648-3537	Spanish TTY – (866) 833-4703

- Molina members can access interpreter services at no cost by calling Member Services at (877) 901-8181 (English & Spanish).

- Providers can access the Provider Portal 24/7 at availability.com/molinahealthcare:
 - Search for patients (members).
 - Check member eligibility.
 - Submit Prior Authorization requests & check status.
 - Submit Claims & check status.
 - Send secure message to Molina .
 - Review Patient Care Plan.
 - Obtain CAHPS® Tip Sheets.
 - Participate in online Cultural Competency trainings (also available at MolinaHealthcare.com, under the [Health Resources tab](#)).

Please encourage your patients who have received the CAHPS®/QHP Enrollee Experience Survey to participate.

Molina Healthcare's 2021 Quality Improvement Results

Molina Healthcare conducts an annual program evaluation to assess how well we meet the performance goals and objectives for improving the quality and safety of clinical care and services specified within the Quality Improvement Program Description and Annual Work Plan. Below are highlights from the annual evaluation.

CAHPS®

The Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Survey assesses Molina members' satisfaction with their health care. It allows us to better serve our members. Molina's CAHPS® results are:



Medicaid—In 2021, Molina **improved** in the following CAHPS measures:

- Coordination of Care.
- Rating of Personal Doctor.
- Rating of Specialist Seen Most Often.
- Rating of Health Plan.

We need to **make improvements** in Getting Needed Care, Getting Care Quickly, How Well Doctors Communicate, Customer Service/Plan Administration, and Rating of Health Care.

MMP—In 2021, Molina **improved** in the following CAHPS measures:

- Getting Needed Care.
- Getting Care Quickly.
- How Well Doctors Communicate.
- Coordination of Care.
- Rating of Health Care.
- Rating of Personal Doctor.
- Rating of Specialist Seen Most Often.
- Flu Vaccinations.

We need to **make improvements** in Customer Service/Plan Administration and Overall Rating of Drug Plan.

HEDIS®

Another tool used to improve member care is the Healthcare Effectiveness Data and Information Set (HEDIS®). HEDIS® scores allow Molina to monitor how many members are receiving the services they need. Measures include immunizations, well-child exams, Pap tests, and mammograms. Additional scores are for diabetes care, and prenatal and after-delivery care.

Medicaid—In 2021, Molina **improved** in:

- Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC) - Counseling for Physical Activity.
- Follow-Up Care for Children Prescribed ADHD Medication (ADD) - Initiation Phase.
- Appropriate Treatment for Upper Respiratory Infection (URI).
- Total and Prenatal and Postpartum Care (PPC) - Postpartum Care.

We need to **make improvements** in Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC) - BMI Percentile, Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC) - Counseling for Nutrition, Childhood Immunization Status (CIS) - Combination #10, Immunizations for Adolescents (IMA) - Combination #2, Breast Cancer Screening (BCS), Cervical Cancer Screening (CCS), Chlamydia Screening in Women (CHL) - Total, Comprehensive Diabetes Care (CDC) - HbA1c Control (<8.0%), Comprehensive Diabetes Care (CDC) - Eye Exam (Retinal) Performed, Comprehensive Diabetes Care (CDC) - Blood Pressure Control (<140/90 mm Hg), Follow-Up Care for Children Prescribed ADHD Medication (ADD) - Continuation and Maintenance (C&M) Phase and Prenatal and Postpartum Care (PPC) - Timeliness of Prenatal Care.

MMP—In 2021, Molina **improved** in:

- Osteoporosis Management in Women Who Had a Fracture (OMW).
- Antidepressant Medication Management (AMM) - Effective Acute Phase Treatment.
- Antidepressant Medication Management (AMM) - Effective Continuation Phase Treatment.

We need to **make improvements** in Controlling High Blood Pressure (CBP).



Culturally and Linguistically Appropriate Services/Disability Resources

Molina also assesses the cultural, ethnic, racial, and linguistic needs and preferences of members on an ongoing basis. Information gathered during regular monitoring and annual network assessment is used to identify and eliminate cultural and/or linguistic barriers to care through the implementation of programs and interventions.

Medicaid—Most Medicaid members specified English as their preferred language (98%). One percent (1%) of Medicaid members identified Spanish as their preferred language. Spanish was the most requested language among Medicaid members through Molina's interpreter services, followed by Cantonese and Arabic.

MMP—Most MMP members specified English as their preferred language (99.6%) and 0.2% of MMP members identified Spanish as their preferred language. Spanish was the most requested language among MMP members through Molina’s interpreter services, followed by Vietnamese and Mandarin.

Overall, Molina found that the current Culturally and Linguistically Appropriate Services program resources, structure, and practitioner and community participation are sufficient based on member needs. Additionally, Molina has a series of short Culturally Competency training videos (Health Disparities, LGBTQ+, Immigrants/Refugees, etc.) available on the Portal: availity.com/molinahealthcare and at MolinaHealthcare.com under the [Health Resources tab](#).

Scroll down on the page to find disability resources: Americans with Disability Act (ADA), Members who are Blind or have Low Vision, Service Animals, and Tips for Communicating with People with Disabilities & Seniors.

The progress related to the goals that Molina Healthcare has set for the annual CAHPS® survey results and the annual HEDIS® measures can be viewed in more detail on the Molina website. You can also view information about the Quality Improvement Program and print a copy. Please visit the provider page on Molina’s website at MolinaHealthcare.com.

MHIL Quality Incentive Program for 2022

Molina introduces providers to the 2022 Molina Healthcare of Illinois Quality Incentive (QI) program. As a top-performing Illinois Medicaid MCO, we know our success is rooted in our strong relationships with the provider community.

We offer a robust Pay-for-Performance (P4P) program to acknowledge those relationships and to reward high-quality care for our members—your patients. For this year, we have revamped our incentive program in three ways:

1. **Simplified the targets**—We reduced the number of HEDIS® metrics included, so that you may succeed using more focused efforts. This year, you may earn incentives based on performance on five (5) P4P measures.
2. **Simplified the incentive structure**—In place of prior years’ blended point system, we have created two clear benchmarks for each targeted HEDIS® measure; you will earn a payout for each measure you meet or surpass.
3. **Two avenues for you to earn an incentive**—You may earn a per-member, per-month bonus payout based on performance, or a payout based on improvement versus last year. We expect that this change will give all providers access to some incentive payouts.



Please visit the [Quality Improvement page](#) of the Molina website, located under the Health Resources tab. Click here for a [Note from Plan President Matt Wolf](#) featuring details on this year’s program.

Requirements for Submitting Prior Authorization

Molina requires Prior Authorization (PA) for specific services, and we offer three tools on the [MolinaHealthcare.com](https://www.molinahealthcare.com) website to assist you in making the determination:

- The PA Codification List.
- PA Review Guide.
- PA Code LookUp Tool.

Both the PA Codification List and the PA Code LookUp Tool offer detailed information by CPT and HCPCS codes. The PA Code LookUp Tool is conveniently located on the provider home pages [MolinaHealthcare.com](https://www.molinahealthcare.com). The most efficient Prior Authorization submission method is through [Molina's Availity Provider Portal](#).



When submitting a Prior Authorization request, it is important to include **all** clinical information and medical records necessary to support the medical necessity of the requested service/item:

- Current (up to six months) patient history related to the requested service/item.
- Relevant physical examination that addresses the medical need for the requested service(s).
- Relevant lab or radiology results to support the request (include previous MRI, CT, lab, or X-ray report/results).
- Relevant specialty consultation notes.
- Any other information or data specific to the request showing that the member meets the criteria for approving the service/item.

By providing **all** necessary information with the initial request, Molina will be able to make a more timely and complete decision based on the member's current health condition, while potentially avoiding delays resulting from the need for additional supporting documentation.

The Urgent/Expedited service request designation should only be used if the treatment is **required** to prevent serious deterioration in the member's health or could jeopardize his/her ability to regain maximum function. Requests outside of this definition will be handled as Routine/Non-Urgent.

The goal is to have **all** necessary information to make the appropriate decision during the initial review of the service/item and avoid the need for an appeal if the service/item is denied.

Note: In the event a denial is issued and subsequently appealed, the provider **must** reference the original decision. If the denial was due to missing information needed to justify coverage, not providing that information with your appeal request will not change the decision and could further delay medically necessary covered services/items. Let's work together to ensure timely and appropriate care for your patients.

Strengthening the Primary Care Setting with Trauma-Informed Care

Molina Healthcare is dedicated to promoting the importance of Trauma-Informed Care practices. Trauma-Informed Care understands and considers the pervasive nature of trauma

and promotes environments of healing and recovery, not practices and services that may inadvertently re-traumatize.

According to the National Council for Mental Wellbeing, an “individual’s experience of trauma impacts every area of human functioning—physical, mental, behavioral, social, and spiritual.”

Implementing a Trauma-Informed Care approach in the primary care setting can benefit providers, members, and office staff alike. The National Council of Mental Wellbeing reports that Trauma-Informed Primary Care settings can:



- Create safer spaces for staff.
- Improve clinical decision-making.
- Equip providers to identify and respond to trauma.
- Build collaborative care networks, increasing provider capacity to address holistic needs.

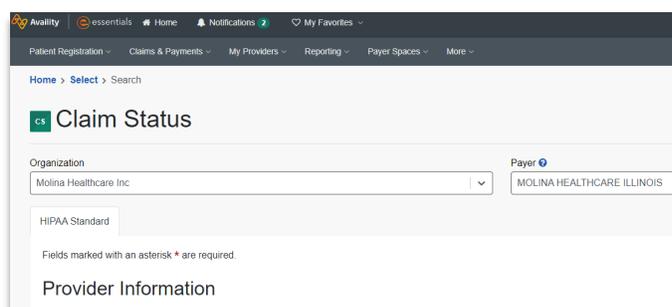
Molina has adopted the guideline for [Fostering Resilience and Recovery: A Change Package for Advancing Trauma-Informed Primary Care](#) from the National Council for Mental Wellbeing. For more information, please visit Molina’s Clinical Program Guidelines on our website, or visit the National Council for Mental Wellbeing to access the guideline [here](#).

Image courtesy of The Community Mental Health Action Plan

Secure Messaging from Claim Status Screen in Availity Portal

Molina strives to offer tools to our provider partners to help you get more done with less effort. Molina now offers an integrated messaging feature from the Claim Status screen in the Availity Provider Portal.

You can submit secure messages from the Claim Status screen directly to Molina using Availity’s Messaging Application.



Note: You will need the Claim Status and the Messaging App roles to access this function. If you’re an administrator for your organization, you can assign roles by selecting Maintain User from your account dashboard. Then, select the user and View/Edit their roles.

Accessing Secure Messaging: Go to Claims & Payments | Claims Status

1. Initiate a message via the “Message this payer” option on the claim status results page. Important: The message must pertain to the current claim listed on the claim status results page.
2. Allow up to two business days for a response.
3. Access the Messaging Queue from the top right corner of your Availity home page.
4. Conversations display as cards. The color of the cards indicates the status.
5. All users have sorting and filtering options. If a message is missing from your queue, clear your filter options.

Availity’s Messaging App is a faster, more effective platform for resolving simple queries. The next time you have a question about the status of a claim, try messaging.

Customer Support: If you have questions about Messaging from Claim Status, call Availity Client Services at **(800) 282-4548** from 7 a.m. to 7 p.m. Central Time, Monday through Friday.

Additional Questions? We're here to help. Contact your Provider Network Manager or email the team at MHILProviderNetworkManagement@MolinaHealthcare.com.

Transition to Availity Portal Ramps Up

Molina continues our transition to the Availity Provider Portal (aka, Availity Essentials), a tool that streamlines your claims management, authorizations, and eligibility/benefit verification.

A number of functions are still being transferred to the Availity Portal platform.

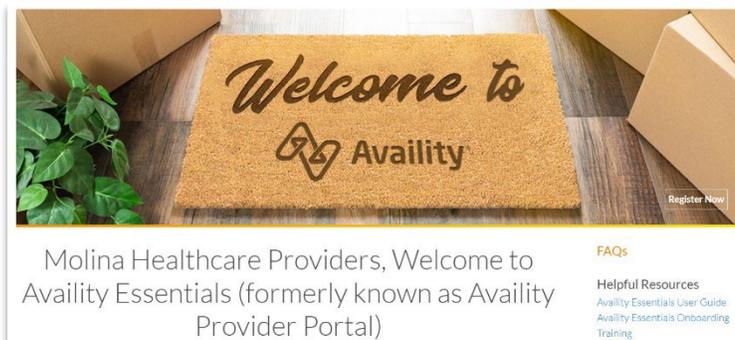
You can access the following while logged into Availity via Single Sign On (SSO):

- Appeals/Disputes
- Authorizations
- Member Roster
- HEDIS® Profile

SSO means that providers/staff log in on Availity and can cross over to the Molina Legacy Portal—for a while, that is. Once all of these SSO portal functions are enabled and tested in the Availity Portal environment, Molina will disable the Legacy Portal.

In fact, no new users will be registered after March 1, 2022. Therefore, we strongly encourage all providers and their staff to become familiar with Availity as soon as possible.

Are you registered on Availity yet? [Click here](#) to get started.



HFS Claims Process, Template, Tracking Number

Per the Illinois Department of Healthcare and Family Services (HFS), Molina reminds providers to use the latest Standard Complaints/Claim-Issue Template for monitoring and resolving claim issues.

Providers are **required** by HFS to begin with Molina's internal claim dispute process **before** contacting HFS.



After exhausting **all** avenues provided by Molina to resolve the dispute, a provider may then submit a complaint to HFS using the methods outlined.

The provider **must** also reference the tracking number provided on the dispute determination letter.

Note: HFS will immediately close complaints not adhering to this process.

Refer to this [Provider Memo from January 20, 2022](#), for complete details.

Download the HFS Template

On Molina's provider website, go to [Frequently Used Forms](#) >> Contracting and Provider Forms >> Molina Claim Issue Template.

Note: Clicking the template link will download the Excel file to your device.

Partner with Molina for Community Outreach

Molina partners with providers, nonprofits, and other organizations throughout the state for community events and giveaways. Partner with us and help reach our members—your patients—with events such as:

- Drive-thru food distribution
- Coat giveaways
- Youth shoe giveaways
- Free community pantries
- Free checkups and health screenings
- COVID vaccination events
- And so much more



Our community outreach partners can contribute in a variety of ways:

- Providing a venue (building, parking lot, etc.)
- Donating giveaway items (food, coats, cleaning products, etc.)
- Donating time (setting up, distributing items to members, etc.)
- Donating skills (administering shots, conducting exams, cleaning teeth, etc.)

Get things rolling by contacting Tammy Lackland, Manager of Community Engagement, today: Tammy.Lackland@MolinaHealthcare.com.

Check Out This Food Giveaway in Danville:



Food_Giveaway_With_Ruler_Foods.MP4

[Download PDF to Play File](#)

Marketplace Resources for Illinois Providers

Molina Healthcare of Illinois launched our Marketplace line of business on January 1, 2022, in Cook, DuPage, Kane, and Will Counties. Our staff is delighted with the opportunity to provide health care services and resources to more Illinois residents. To help providers be informed on Marketplace practices and procedures, we have developed new tools.

- [MHIL Marketplace Quick Reference Guide](#)—Phone, fax, and email contact information for various areas of service.
- [MHIL Marketplace Frequently Asked Questions](#)—Find answers to common questions about Marketplace procedures.
- [MHIL Marketplace Website](#)—Details about the different plans, Marketplace Provider Manual, Prior Authorization LookUp Tool, PA Forms, and more.

Lunch for Frontline Health Care Workers



MHIL’s Community Engagement team wanted to show thanks and appreciation for the frontline workers in Illinois during this latest COVID surge. What better way than by providing meals, and much-needed hand sanitizer and Kleenex? In all, we handed out 248 meals to ER staff in 10 hospitals throughout Illinois. These meals contained a sandwich or wrap, chips, cookies, and water.

Community Engagement Specialist Erika Hannah stated, “Our Growth and Community Engagement team proudly delivered meals to hospital emergency room staff throughout the week of January 24–28. This initiative was designed to

give back and support our frontline workers who continue to devote countless hours caring for others as they battle COVID-19. By continuing to work together to support our frontline workers, we collectively improve the wellbeing of our community.”

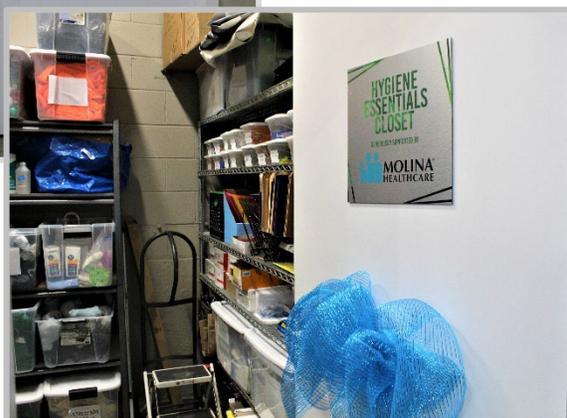


‘Molina Closets’ Provide Basic Necessities



MHIL created an initiative called the Molina Closet, by which those in need can receive basic necessities, such as food, laundry detergent, and hygiene products. Molina donated \$45,500 to get things off the ground. Molina Closets are currently in StreetWise and YWCA facilities in Chicago and Rockford, as well as The Boys & Girls Club in Alton.

To kick off this amazing project, Molina, StreetWise, and YWCA Metropolitan Chicago hosted a ribbon-cutting ceremony on January 26. Matt Wolf, MHIL Plan President; David Vinkler, VP of Government



Contracts; Tammy Lackland, Manager of Community Engagement; Nicole Robinson, YWCA CEO; Damaris Wright, Program Director YWCA Young Parents’ Program; and Julie Youngquist, StreetWise Executive Director, attended the ceremony.

Clinician-Administered Preferred Drug List 2022

A clinician-administered drug is an outpatient drug other than a vaccine that is typically administered by a health care provider in a clinician's office or other outpatient clinical setting. Drugs that are infused or injected are typically clinician-administered drugs.

The Molina Healthcare Medical Preferred Drug List encourages utilization of clinically appropriate and lower-net-cost products within the following therapeutic drug classes.

The List includes these products **only**, and other product may be available under a plan's medical benefit. The listed preferred products **must** be used first. An exception process is in place for specific circumstances that may warrant a need for a non-preferred product.

Medicaid Medical Preferred Drug List—Through October 2022

Drug Class	Non-Preferred Product(s)	Preferred Product(s)
Alpha-1 Antitrypsin Deficiency	Aralast® (Alpha-1-Proteinase Inhibitor), Glassia® (Alpha-1-Proteinase Inhibitor), Zemaira® (Alpha-1-Proteinase Inhibitor)	Prolastin C® (Alpha-1-Proteinase Inhibitor)
Hematologic, Colony Stimulating Factors – Short Acting	Granix® (tbo-filgrastum) Leukine® (sargramostim) Neupogen® (filgrastim) Nivestym® (filgrastim-aafi)	Zarxio® (filgrastim-sndz)
Hematologic, Colony Stimulating Factors – Long Acting	Fulphila™ (pegfilgrastim-jmdb), Udenyca® (pegfilgrastim-cbqv), Neulasta® (pegfilgrastim) Nyvepria™ (pegfilgrastim-apgf)	Ziextenzo® (pegfilgrastim-bmez)
Infliximab	Remicade® (infliximab)	Inflectra® (infliximab-dyyb) Renflexis® (infliximab-abda) Avsola™ (infliximab-axxq)
Lysosomal Storage Disorders – Gaucher Disease	VPRIV® (velaglucerase alfa) Elelyso® (taliglucerase alfa)	Cerezyme® (imiglucerase)
Multiple Sclerosis (Infused)	Lemtrada® (alemtuzumab)	Tysabri® (natalizumab) Ocrevus® (ocrelizumab)
Osteoarthritis, Viscosupplements	Gelsyn-3® (sodium hyaluronate 8.4mg/ml) GenVisc® 850 (sodium hyaluronate) Hyalgan® (1% sodium hyaluronate) Hymovis® (hyaluronic acid 8mg/ml) Orthovisc® (1% sodium hyaluronate) Supartz® FX (1% sodium hyaluronate) TriVisc® (sodium hyaluronate) Visco-3® (1% sodium hyaluronate) Synvisc® (hylan (Avian) 8 mg/mL)	Euflexxa® (1% sodium hyaluronate)
Oncology	**Avastin® (bevacizumab)	Mvasi™ (bevacizumab-awwb) Zirabev® (bevacizumab-bvzr)
	Herceptin® (trastuzumab) Herceptin Hycelta™ (trastuzumab and hyaluronidase-oysk)	Herzuma® (trastuzumab-pkrb) Kanjinti™ (trastuzumab-anns) Ogivri™ (trastuzumab-dkst) Ontruzant® (trastuzumab-dttb) Trazimera™ (trastuzumab-qyyp)

Paroxysmal Nocturnal Hemoglobinuria	Ultomiris® (ravulizumab-cwvz)	Empaveli® (pegcetacoplan)
Rituximab	Rituxan® (rituximab) Rituxan Hycela®(rituximab-hyaluronidase)	Truxima®(rituximab-abbs) Ruxience®(rituximab-pvvr) Riabni™ (rituximab-arrx)
Retinal Disorders (Eye)	Eylea®(afibercept) Lucentis® (ranibizumab)	**Avastin® (bevacizumab)

Marketplace Medical Preferred Drug List—Through October 2022

Drug Class	Non-Preferred Product(s)	Preferred Product(s)
Alpha-1 Antitrypsin Deficiency	Aralast® (Alpha-1-Proteinase Inhibitor), Glassia® (Alpha-1-Proteinase Inhibitor), Zemaira® (Alpha-1-Proteinase Inhibitor)	Prolastin C® (Alpha-1-Proteinase Inhibitor)
Autoimmune	Actemra® (tocilizumab) IV, Cimzia® (certolizumab pegol), Orencia®(abatacept)	Envyio® (vedolizumab), Ilumya™ (tilgrakizumab-asmn), Simoni Aria® (golimumab), Stelara®(ustekinumab)
Botulinum Toxins	Myobloc® (rimabotulinumtoxin B)	Botox® (onabotulinumtoxin A), Dysport® (abobotulinumtoxin A), Xeomin® (incobotulinumtoxin A)
Hematologic, Colony Stimulating Factors – Short Acting	Granix® (tbo-filgrastum) Leukine® (sargramostim) Neupogen® (filgrastim)	Nivestym® (filgrastim-aafi), Zarxio® (filgrastim-sndz)
Hematologic, Colony Stimulating Factors – Long Acting	Fulphila™ (pegfilgrastim-jmdb), Udenyca® (pegfilgrastim-cbqv), Nyvepria™(pegfilgrastim-apgf)	Ziextenzo® (pegfilgrastim-bmez), Neulasta® (pegfilgrastim)
Hematologic, Erythropoiesis - Stimulating Agents	Epogen® (epoetin alfa), Mircera® (methoxy polyethylene glycol-epoetin beta), Procrit® (epoetin alfa)	Aranesp® (darbepoetin), Retacrit® (epoetin alfa-epbx)
Hemophilia, Factor VIII	Eloctate® (antihemophilic factor recombinant Fc fusion protein), Helixate® [Antihemophilic Factor (Recombinant), Formulated with Sucrose], Nuwiq® [antihemophilic Factor (recombinant)]	Adynovate®[antihemophilic factor (recombinant), PEGylated], Jivi® [antihemophilic factor (recombinant), PEGylated], Kogenate®[antihemophilic factor (recombinant), Kovaltry®[antihemophilic factor (recombinant), Novoeight® [antihemophilic factor (recombinant)]
Infliximab	Remicade® (infliximab)	Inflectra® (infliximab-dyyb) Renflexis® (infliximab-abda) Avsola™ (infliximab-axxq)
Long-Acting Reversible Contraceptives	Liletta® (levonorgestrel-releasing intrauterine system) Nexplanon® (etonogestrel implant)	Kyleena® (levonorgestrel-releasing intrauterine system), Mirena® (levonorgestrel-releasing intrauterine system) Skyla® (levonorgestrel-releasing intrauterine system)

Lysosomal Storage Disorders – Gaucher Disease	VPRIV® (velaglucerase alfa) Cerezyme® (imiglucerase)	Elelyso® (taliglucerase alfa)
Multiple Sclerosis (Infused)	Lemtrada® (alemtuzumab)	Tysabri® (natalizumab) Ocrevus® (ocrelizumab)
Osteoarthritis, Viscosupplements	Gelsyn-3® (sodium hyaluronate 8.4mg/ml) GenVisc® 850 (sodium hyaluronate) Hyalgan® (1% sodium hyaluronate) Hymovis® (hyaluronic acid 8mg/ml) Supartz® FX (1% sodium hyaluronate) TriVisc®(sodium hyaluronate) Visco-3® (1% sodium hyaluronate) Synvisc® (hylan (Avian) 8 mg/mL)	Euflexxa® (1% sodium hyaluronate) Orthovisc® (1% sodium hyaluronate) Monovisc® (sodium hyaluronate)
Oncology	NA	Firmagon® (degarelix)
	**Avastin® (bevacizumab)	Mvasi™ (bevacizumab-awwb) Zirabev® (bevacizumab-bvzr)
	Herceptin® (trastuzumab) Herzuma® (trastuzumab-pkrb) Herceptin Hycelta™ (trastuzumab and hyaluronidase-oysk) Trazimera™ (trastuzumab-qyyp) Ontruzant® (trastuzumab-dttb)	Kanjinti™(trastuzumab-anns) Ogivri™ (trastuzumab-dkst)
Paroxysmal Nocturnal Hemoglobinuria	Ultomiris® (ravulizumab-cwvz)	Empaveli® (pegcetacoplan)
Retinal Disorder Agents (Eye)	Eylea®(afibercept) Lucentis® (ranibizumab)	**Avastin® (bevacizumab)
Rituximab	Rituxan® (rituximab) Rituxan Hycela®(rituximab-hyaluronidase)	Truxima®(rituximab-abbs) Ruxience®(rituximab-pvvr) Riabni™ (rituximab-arrx)
Severe Asthma	Cinqair® (reslizumab)	Dupixent®(dupilumab) Fasenra®(benralizumab) Nucala®(mepolizumab) Xolair® (omalizumab)