



Last Updated: 09/26/2025

Drug Utilization Review (DUR) Meeting Decisions Effective October 1, 2025

The purpose of this bulletin is to notify providers about routine changes to new drug service authorization (SA) requirements for drugs reviewed clinically and through fiscal analysis by the Drug Utilization Review (DUR) Board in June 2025.

The Drug Utilization Review Board is authorized by **12VAC30-130-340**. The meetings of this committee is open to the public and is posted on the Virginia Town Hall meetings page.

June 2025 DUR Board Summary

Reviewed 8 T-Cell Therapy Drugs and approved their service authorization criteria

Reviewed 4 pipeline drugs

Abecma®, Aucatzyl®, Breyanzi®, Carvykti®, Kymriah®, Tecartus®, Tecelra® and Yescarta®
brensocatib oral, dordaviprone (ONC201) oral, rilzabrutinib oral and vatiquinone oral

Additionally, the Board reviewed the results of several utilization analyses:

- The impact reports for 8 T-Cell Therapy Drugs (Abecma®, Aucatzyl®, Breyanzi®, Carvykti®, Kymriah®, Tecartus®, Tecelra® and Yescarta®)
- Concurrent use of opioids and benzodiazepines
- Concurrent use of opioids and antipsychotics
- Overlaps in opioids, benzodiazepines, and antipsychotics
- Naloxone and buprenorphine utilization for members on opioids
- Glucagon-Like Peptide-1 Receptor Agonist (GLP-1 RA) Utilization
- ProDUR reports



- RetroDUR reports
- Utilization analysis reports

To avoid disruption to claims payment through FFS and the MCOs providers must periodically check the DMAS provider portal, also known as the Provider Services Solution (PRSS), to ensure that the provider's enrollment, contact information, and license information is up to date, for all of the provider's respective service locations. Under federal rules, MCOs and DMAS are prohibited from paying claims to network providers who are not enrolled in PRSS. Additional information is provided on the [MCO Provider Network Resources webpage](#) and includes links to resources, tutorials and contact information to reach Gainwell with any provider enrollment or revalidation related questions. Dental providers should continue to enroll directly through the DMAS Dental Benefits Administrator, DentaQuest.

PROVIDER CONTACT INFORMATION & RESOURCES

Virginia Medicaid

Web Portal

Automated Response System (ARS)

Member eligibility, claims status, payment status, service limits, service authorization status, and remittance advice.

<https://vamedicaid.dmas.virginia.gov/>

Medicall (Audio Response System)

Member eligibility, claims status, payment status, service limits, service authorization status, and remittance advice.

1-800-884-9730 or 1-800-772-9996

Provider Appeals

DMAS launched an appeals portal in 2021. You can use this portal to file appeals and track the status of your appeals. Visit the website listed for appeal resources and to register for the portal.

<https://www.dmas.virginia.gov/appeals/>

Managed Care Programs

Cardinal Care Managed Care and Program of All-Inclusive Care for the Elderly (PACE). In order to be reimbursed for services provided to a managed care enrolled individual, providers must follow their respective contract with the managed care plan/PACE provider. The managed care plan may utilize different guidelines than those described for Medicaid fee-for-service individuals.

Cardinal Care Managed Care PACE

<https://www.dmas.virginia.gov/for-providers/managed-care/cardinal-care-managed-care/>
[Program of All-inclusive Care \(virginia.gov\)](https://www.virginia.gov/Programs/Program-of-All-Inclusive-Care)

**Provider Enrollment**

In-State: 804-270-5105
Out of State Toll Free: 888-829-5373
Email: VAMedicaidProviderEnrollment@gainwelltechnologies.com

Provider HELPLINE

Monday-Friday 8:00 a.m.-5:00 p.m. For provider use only, have Medicaid Provider ID Number available.

1-804-786-6273
1-800-552-8627

Aetna Better Health of Virginia

<https://www.aetnabetterhealth.com/virginia/providers/index.html>
1-800-279-1878

Anthem HealthKeepers Plus

<http://www.anthem.com/>
1-800-901-0020

Humana Healthy Horizons

Provider Services Call Center

1-844-881-4482 (TTY: 711)
<https://provider.humana.com/medicaid/virginia-medicaid>

Sentara Community Plan**United Healthcare**

1-800-881-2166 <https://www.sentarahealthplans.com/providers>
www.uhcprovider.com/
1-844-284-0146

Acentra Health

Behavioral Health and Medical Service Authorizations

<https://vamedicaid.dmas.virginia.gov/sa>
1-804-622-8900

Dental Provider

DentaQuest

1-888-912-3456

Fee-for-Service (POS)

Prime Therapeutics

<https://www.virginiamedicaidpharmcyservices.com/>
1-800-932-6648