

Provider Engagement

WellSense Provider Portal: Emergent inpatient authorization requests



Products

- ☒ All products
- ☐ MassHealth ACO
- ☐ MassHealth MCO
- ☐ Special Kids Special Care (SKSC)
- ☐ MA Clarity
- ☐ Senior Care Options
- ☐ NH Medicaid
- ☐ NH Clarity
- ☐ NH Medicare Advantage

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General overview

The WellSense Portal enables WellSense network providers to submit authorization requests electronically, track their progress, and receive decisions within a secure, real-time environment. Through the portal, providers can:

- **Submit** emergent inpatient and elective inpatient and outpatient requests
- **Monitor** request status and see if additional clinical information is required
- **Upload** any requested documentation directly within the portal
- **View** final determinations and decision letters

Note:

For elective inpatient requests, see “WellSense Provider Portal: Elective inpatient authorization requests”.


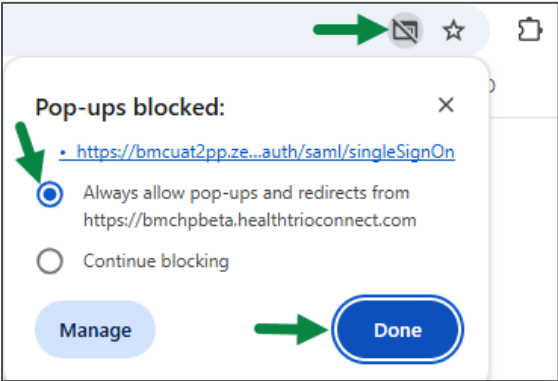
For elective outpatient requests, see “WellSense Provider Portal: Elective outpatient authorization requests”.

All inpatient admissions require WellSense authorization, whether elective or emergent.

Key benefits of the WellSense Provider Portal:

Platform enhancements	Provider benefits
Real-time, secure messaging between your team and WellSense utilization management staff	Faster processing times
Simplified, streamlined workflows for submitting and managing your prior authorization requests	Improved provider experience
Real-time decision notification, which reduces administrative burdens	Greater efficiency and support for timely, high-quality patient care

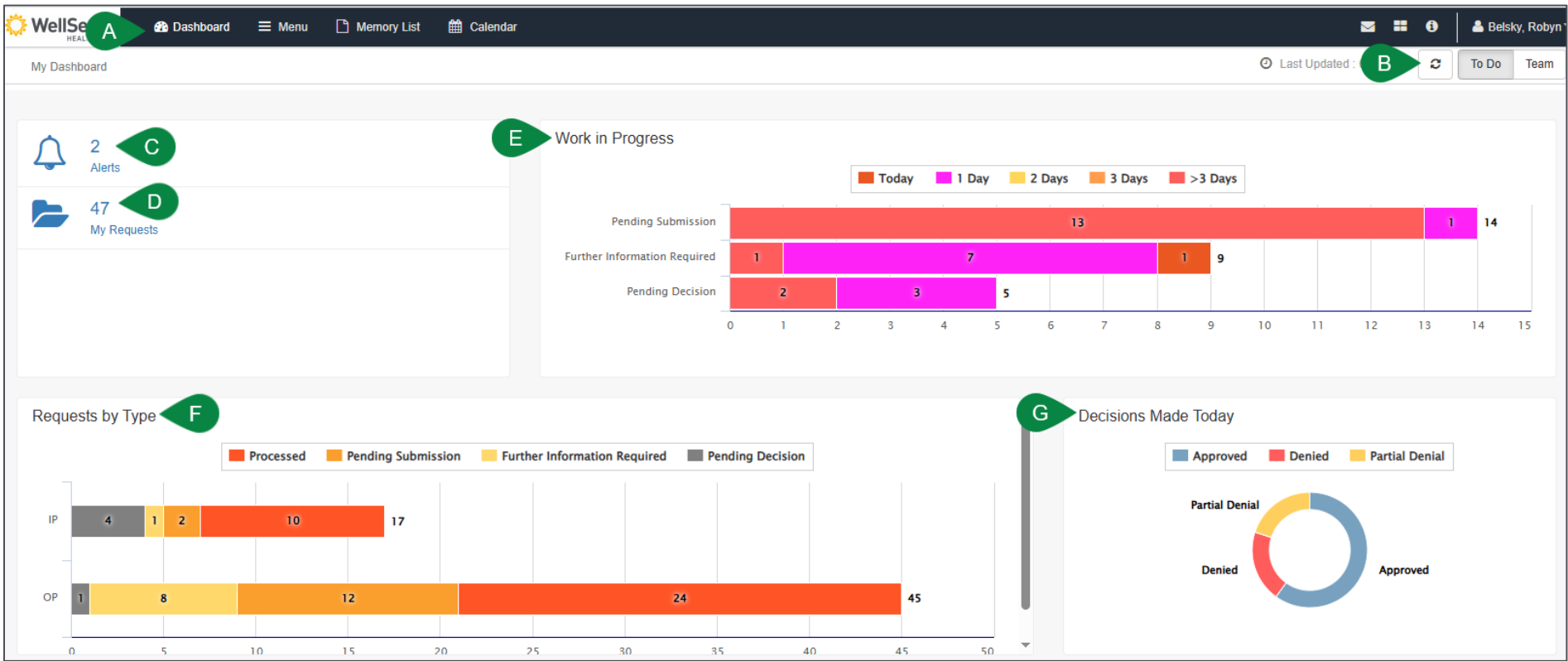
Log in and review the Dashboard

Step	Action
1	<p>Open Google Chrome and navigate to wellsense.org > Login.</p> 
2	<p>Enter your username and password, then select Sign In.</p>
3	<p>Go to Office Management > Authorizations and Referrals.</p>
4	<p>Complete the first-time setup to allow pop-ups: Click the pop-up blocker icon in the browser's address bar, select Always allow pop-ups from this site > Done.</p>  <p>Note: You may need to reset the pop-up blocker after you clear cache.</p>

Overview of the Dashboard

The Dashboard serves as the homepage for the WellSense Provider Portal. It provides a centralized view of authorization activity for providers, including real-time statuses, alerts, and recent determinations. All auth requests submitted under this provider’s Tax ID appear, regardless of who submitted the request.

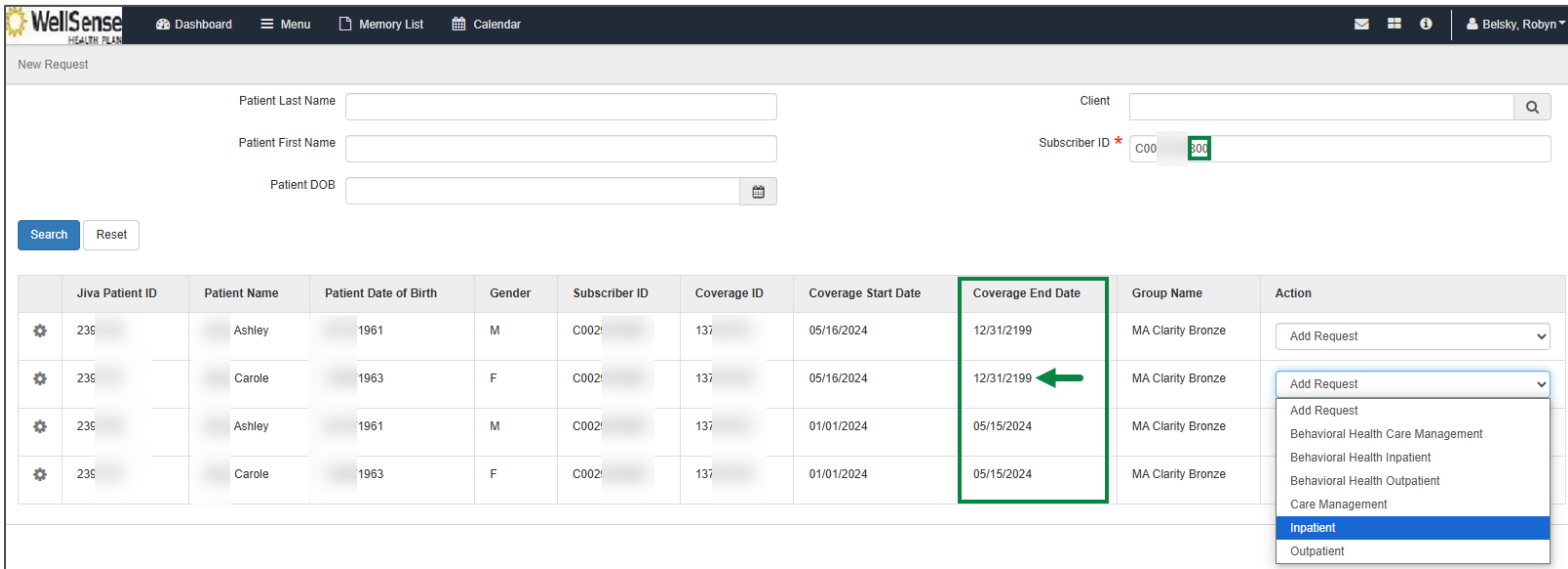
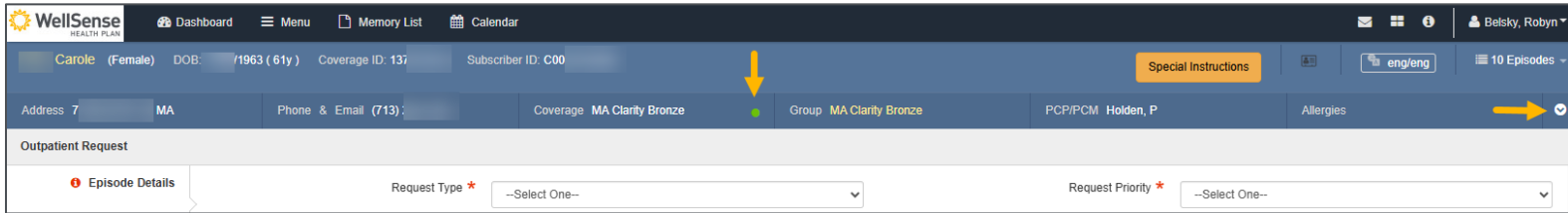
Click the colored bars to access the requests.



Item	Action
A	Dashboard on the black navigation bar returns to this homepage from any screen.
B	Refresh: Click to manually refresh the Dashboard and display the most current data. Note: The Dashboard does not automatically refresh.
C	Alerts: Indicate when WellSense has added a note for your review.
D	My Requests: Shows the total number of authorizations submitted under this Tax ID. Click to view the list of submitted requests.
E	Work in Progress: Displays request statuses across time: <ul style="list-style-type: none"> • Pending Submission – Drafted but not yet submitted to WellSense • Further Information Required – WellSense is awaiting additional clinical information for processing • Pending Decision – Submitted and under review by WellSense
F	Requests by Type: Displays inpatient vs. outpatient requests
G	Decisions Made Today: Shows color-coded decisions made today

Look up a patient

Step	Action
1	On the navigation bar, select Menu > New Request .
2	Enter the Subscriber ID from the member's WellSense ID card. <ul style="list-style-type: none"> • The ID is 9 digits—add two zeros at the end to meet the system's 11-digit requirement. • Fields marked with a red asterisk (*) are required. Click Search to continue.

Step	Action
3	<p>If multiple rows appear, confirm the correct patient by matching the name and date of birth.</p> <p>If there are duplicate entries, select the row with the future Coverage End Date, then click Add Request > Inpatient.</p> 
4	<p>The patient record appears.</p> <ul style="list-style-type: none"> • Verify demographic details at the top. • Use the arrow on the far right to expand and view additional information if needed. • A green dot indicates the member is currently eligible with WellSense. • A red dot means the member is not currently eligible. 
5	<p>If the wrong patient or request type is selected (e.g., outpatient instead of inpatient), scroll to the bottom and click Cancel. Then return to Menu > New Request to begin again.</p>

Complete the Inpatient Request screen

This screen includes several required fields. Some are marked with a red asterisk (*), while others must be completed even if not marked. Follow the steps below to ensure that the request is entered correctly.

Section 1: Request setup

Episode details

Field	Value
Request Type	Select Concurrent for emergent admissions.
Request Priority	Select Emergent for most unscheduled admissions except MA Clarity. For MA Clarity members, additional options appear: <ul style="list-style-type: none">• QHP -Info Received – select if you are attaching clinical information OR if this is a facility that allows WellSense to access the EMR via the portal.• QHP -No Info – select if clinical information is not available. These options affect the turn-around time.
Admit Type	Choose one: <ul style="list-style-type: none">• Maternity for antepartum or delivery• Medical for most emergent admissions• Newborn for newborns up to 28 days of age on admission• Rehab for inpatient rehab

Example:

Inpatient Request

Episode Details

Request Type *

Concurrent

Request Priority *


QHP -Info Received

Admit Type

Medical


Diagnosis


Field	Value
Diagnosis	Enter code or description. Select the correct match from the dropdown.

- To add more diagnoses, search again.
- The orange star indicates the primary diagnosis. Click a different diagnosis to make that one primary.
- To remove an incorrect diagnosis, click the Detach icon  next to the one you want to remove.


Note: You may have to add the new data before detaching.

Example:


 Diagnosis

Code Type 




ICD10

Diagnosis 

Diagnosis



[Advanced Search](#)

Primary Dx	Code Type	Diagnosis	Actions
	ICD10	E10.10--Type 1 diabetes mellitus with ketoacidosis without coma	
	ICD10	I10--Essential (primary) hypertension	

Section 2: Provider details

Click **Attach Providers**, then enter the facility name, OR provider first and last name, OR the NPI, OR the tax ID.

Field	Value
Provider Last Name / Facility	Enter the provider or facility name
Provider First Name	Optional
NPI	Enter the 10-digit National Provider Identifier
Tax ID	Enter the provider's Tax Identification Number

- Click **Search**. If no results appear, try different search criteria.
- When the correct provider appears, click the gear icon > **Multiple Attach**.

Attach Providers

Enter any search criteria

Provider Last Name / Facility:

Provider First Name:

NPIN:

Tax ID:

Search Results

	Provider ID	Provider Name	Location	Type	Provider Role	Specialty	In Network?	Provider Network
	000000005020	BMC - Boston Medical Center,	1 Boston Medical Center Place Boston, MA - 02118 USA	Hospital/Facility	Treatin <input type="button" value="v"/>	General Acute Care Hospital	Y	In Network <input type="button" value="v"/>

Single Attach

Multiple Attach

- For emergent inpatient admissions, attach:
 - **Treating Provider** (the facility)
 - **Admitting Provider** (the facility)
 - **Requesting Provider** (the facility)
- Once all providers are listed, scroll down, assign each role and click **Attach**.

Example:

Selected Providers List

	Provider ID	Provider Name	Location	Provider Role	Provider Network
	000000005020	BMC - Boston Medical Center,	1 Boston Medical Center Place Boston, MA - 02118 USA Phone: (617) 638-8000	Treating <input type="button" value="v"/>	In Network <input type="button" value="v"/>
	000000005020	BMC - Boston Medical Center,	1 Boston Medical Center Place Boston, MA - 02118 USA Phone: (617) 638-8000	Admitting <input type="button" value="v"/>	In Network <input type="button" value="v"/>
	000000005020	BMC - Boston Medical Center,	1 Boston Medical Center Place Boston, MA - 02118 USA Phone: (617) 638-8000	Requesting <input type="button" value="v"/>	In Network <input type="button" value="v"/>

Section 3: Stay request

Emergent inpatient requests include a Stay line; the system adds the Service line when the request is submitted.

Stay request

Field	Value
Service Type	Match the Admit Type from Episode Details . <ul style="list-style-type: none">• Maternity for antepartum or delivery – see Appendix: Maternity requests• Medical for most emergent admissions• Newborn up to 28 days of age on admission• Rehab for inpatient rehab, skilled nursing, or long-term acute care
Place of Service	<ul style="list-style-type: none">• Acute Rehab for rehab• Bed Hold for SNF bed holds• Custodial for custodial or respite• LTACH for long-term acute care• NICU for neonatal ICU• Room and Board for inpatient hospital• SNF 1 for skilled nursing
Requested Level of Care	Choose either Room and Board or Hospice , as appropriate.
Expected Admit Date	Enter the actual admission date.
Actual Admit Date	Enter the actual admission date.
LOS Requested	Enter 1 .

Example:

Stay Request	Service Type *	<input type="text" value="Medical"/>	Expected Admit Date	<input type="text" value="06/13/2025"/>	
	Place of Service	<input type="text" value="Inpatient Hospital"/>	Actual Admit Date	<input type="text" value="06/13/2025"/>	
	Requested Level Of Care *	<input type="text" value="Room and Board"/>	LOS Requested	<input type="text" value="1"/>	

Service Request

Skip this section.

Section 4: Documents

Upload available clinical documentation, such as a facesheet. For some facilities, WellSense can access the EMR via the portal.

Field	Value
Document Title	Paste the filename or enter a clear, descriptive title.
Document Type	UM Provider Document
Document Description	<ul style="list-style-type: none">• Facesheet• Notice of Admission• Clinicals

Click **Browse** to locate the file, then click **Attach**. To attach more than one file, scroll down and **Save as Draft** and then attach another document.

Example:

Documents

Document Title *

Patient Name Emergency Admit

Document Description

Facesheet

Document Type

UM Provider Document

Select Document

Browse

Patient Name Emergency Admit.pdf

Section 5: Add a note and submit the request

Note

Include:

- Contact information for the requester: name, phone, fax number.
- Details not captured elsewhere, for example, if patient’s status changed from Observation to Inpatient, indicate the date of Observation.

Example:

Notes

Note Type

UM Provider Note

Note Encounter Date

06/13/2025

Note Encounter Time

13

55

Note Text

File Edit View Format Tools

B *I* U

Contact Jess at 617-555-5555, fax: 617/999-9999

Patient in observation 6/11, admitted as inpatient 6/13

Submit the request

Field	Value
Submit	Sends the request to WellSense for review
Save as Draft	Saves your work so you can return to complete it later
Cancel	Clears the screen without saving changes

The system displays a message. Click **OK** to bypass. Currently, providers do not complete InterQual for inpatient requests.

bmcuat2pp.zeomega.com says

You are submitting the request without InterQual review. Only sleep studies require InterQual review.

OK

Cancel

After submission, the Request Details page displays the:

- **Episode Abstract:** Summary of the request (excluding documents). This can be printed for the patient's record.
- **Expected Decision Date:** Timeline for WellSense to review and respond.
- **Cert Number:** Use this number for reference if contacting WellSense.

Note: The service line is automatically added to cover ancillary services.

Example:

Episode Abstract									
Expected Decision Date : 06/14/2025		Authorization Type : IP		Episode Number : 354		Episode Status : OpenRequest		Cert Number 250	
Stay Request	Stay ID	LOS Requested#	LOS Assigned#	LOS Denied	Auth Start Date	Auth End Date	Service Type	Decision	
	12008	1	0	0	06/13/2025	06/13/2025	Medical	Pending	
Authorization Details	Service ID	Service Code	Requested #	Assigned #	Denied	Auth Start Date	Auth End Date	Service Type	Frequency
	12009	INP(UMSG)	9999	0	0			Medical	-

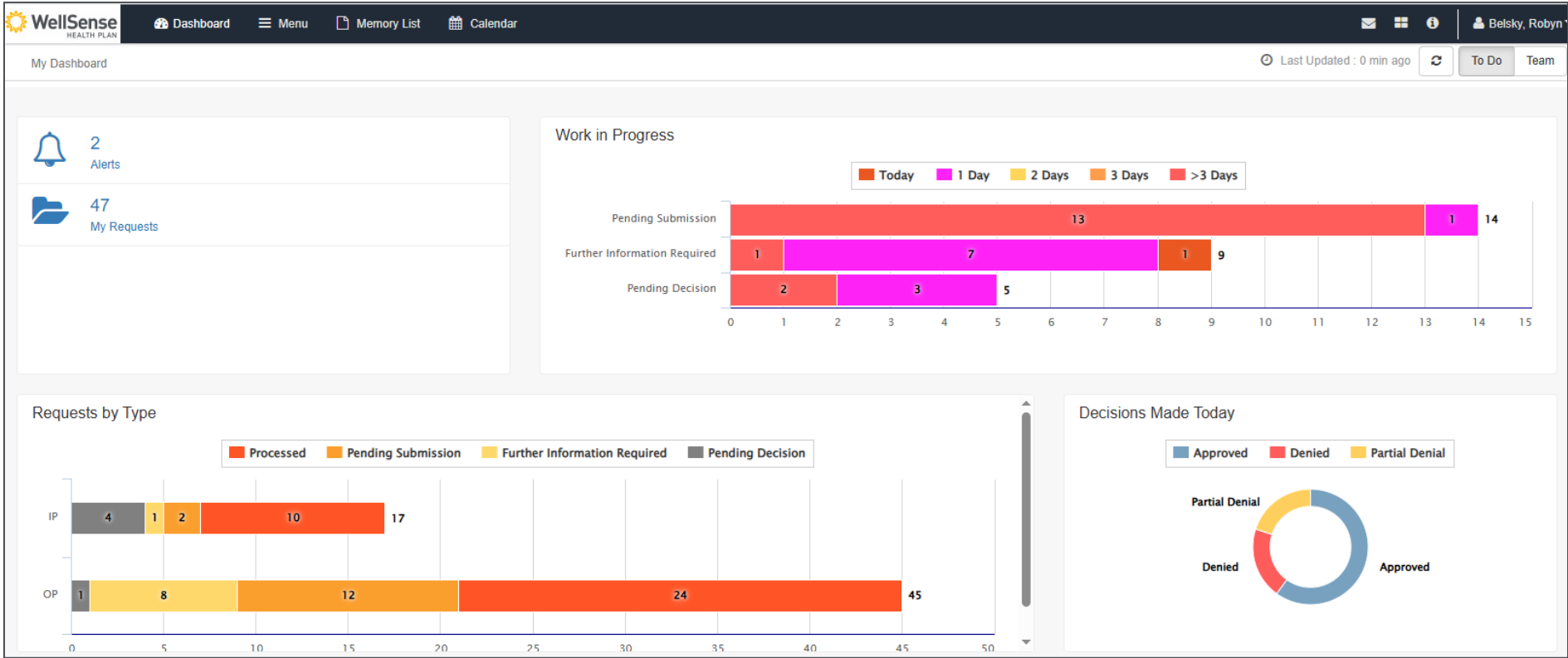
Start another request

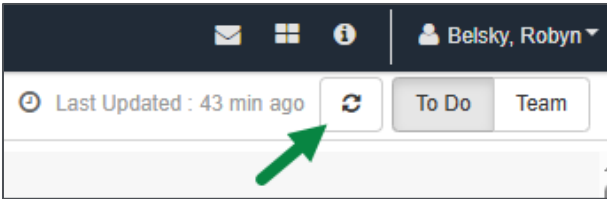
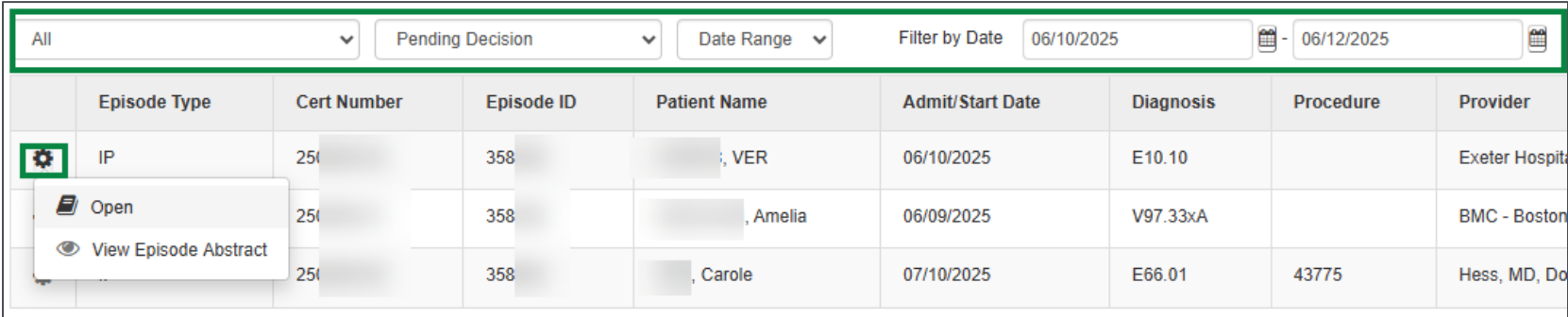
To begin a new authorization request:

1. Click **Menu > New Request**.
2. Follow the steps outlined in the [Look up a patient](#) section.

Review authorization status/view letters

From the Dashboard, track and manage the prior authorization requests using the colored status bars.



Step	Action
1	<p>Refresh the Dashboard screen by clicking the Refresh button on the upper right to see the most current information. Do not use the browser Refresh button; always use the Portal Refresh.</p> 
2	<p>Click any of the colored bars (e.g., Pending Submission, Further Information Required, Pending Decision, Decisions Made Today) to open the list of associated authorizations. Note: Use filters at the top of the screen to sort or narrow results. Change the date range to view decisions made before today.</p> 
3	<p>To edit a request:</p> <ul style="list-style-type: none"> • If the request is pending submission, click the gear icon to edit. • If the request has been submitted, users can: <ul style="list-style-type: none"> ○ Add a note. ○ Upload documents. To update a document, delete the old version first, then upload the new one. Important: Avoid using Add New Version. ○ Review the abstract (summary of the episode). <p>Note: If you need to cancel a request, or edit dates, visits, etc., please contact WellSense and refer to the Cert Number.</p>

Step

Action

4

When a request has an alert or falls under **Further Information Required**, open to review the note that states what is specifically being requested. You can attach documents or add clinical information in a note. WellSense is notified that additional information has been sent.

Note

Username : Belsky RN UAT TWO, Robyn

Title : Supervisor

Note Type : UM Provider Note

Source : Episode Note

Note Encounter Date : 07/26/2025 14:22:00

Please confirm dates in OBS vs. inpatient admission

07/26/2025 14:23:05

Add Notes

View All Notes

Diagnosis

Actions

Primary Dx

Code Type

Diagnosis

★

ICD10

E10.10--Type 1 diabetes mellitus with ketoacidosis without coma

⊘

★

ICD10

I10--Essential (primary) hypertension

Add Diagnosis

Documents

Episodes View

Name

Type

Date Added

Date Received

Added User

Description

⚙

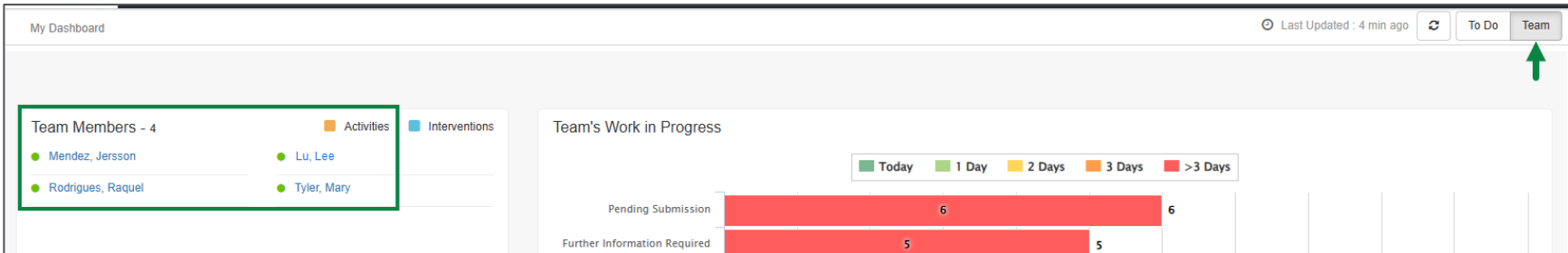
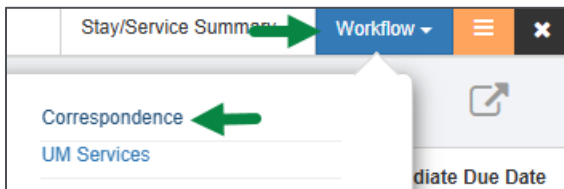
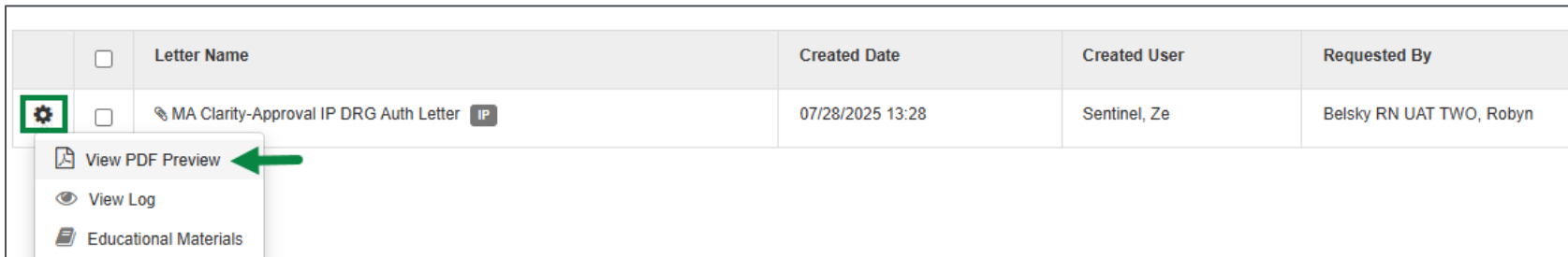
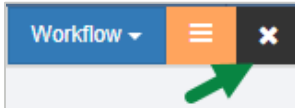
Emergency Admit

07/26/2025 14:10:26

Belsky, Robyn

Facesheet

Add Document

Step	Action												
5	<p>To view requests submitted by staff with the same tax ID, click Team in the upper right, then click the link for the co-worker to view.</p> 												
6	<p>To view and print the letters, click Workflow > Correspondence.</p>  <p>Click the gear icon > View PDF Preview. You can print the PDF.</p>  <table><thead><tr><th></th><th><input type="checkbox"/></th><th>Letter Name</th><th>Created Date</th><th>Created User</th><th>Requested By</th></tr></thead><tbody><tr><td></td><td><input type="checkbox"/></td><td>MA Clarity-Approval IP DRG Auth Letter IP</td><td>07/28/2025 13:28</td><td>Sentinel, Ze</td><td>Belsky RN UAT TWO, Robyn</td></tr></tbody></table>		<input type="checkbox"/>	Letter Name	Created Date	Created User	Requested By		<input type="checkbox"/>	MA Clarity-Approval IP DRG Auth Letter IP	07/28/2025 13:28	Sentinel, Ze	Belsky RN UAT TWO, Robyn
	<input type="checkbox"/>	Letter Name	Created Date	Created User	Requested By								
	<input type="checkbox"/>	MA Clarity-Approval IP DRG Auth Letter IP	07/28/2025 13:28	Sentinel, Ze	Belsky RN UAT TWO, Robyn								
7	<p>After reviewing the request, click the X in the upper right corner of the episode screen. This exits the request and allows WellSense staff to access and process the request. WellSense cannot process the request when the form is open in the portal.</p> 												

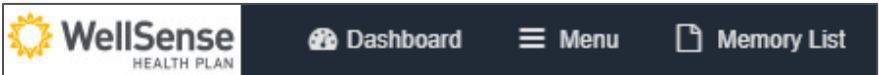
Add discharge information

You can add the discharge date and disposition, thereby avoiding a call or fax from WellSense requesting this info.

Step	Action
1	<div>In the IP episode, click Discharge.</div> <div><div><div>▼ Stay Request</div><div><div><div><div></div></div><div></div><div>Place of Service</div><div>Due Date</div><div>Decision</div><div>Reason for Decision</div><div>Auth Start Date</div><div>Auth End Date</div><div>Request</div></div><div><div><div></div></div><div><div>Initial</div></div><div>Inpatient Hospital</div><div>06/05/2025 15:49</div><div>Approved</div><div>Criteria Approval</div><div>06/02/2025</div><div>06/06/2025</div><div>Emergen</div></div></div><div><div></div><div></div></div></div></div> <div><div>Discharge</div></div>
2	<div>Edit the Discharge Date if necessary, leave the default time, select the Discharge Disposition > Save.</div> <div><div><div>Discharge</div><div><div>Discharge Date *</div><div>06/06/2025</div><div>Discharge Time *</div><div>13</div><div>58</div><div>Admit Type</div><div>Medical</div><div>Discharge Dx *</div><div>J43.8-Other emphysema</div><div>Discharge Disposition *</div><div>--Select One--</div><div><div>Save</div><div>Cancel</div></div></div><div><div>No Service added</div></div></div></div>

Using the navigation bar

The navigation bar remains visible at the top of the screen and provides quick access to common features and functions.



Tip: Be sure to exit requests once you have completed reviewing or editing them to prevent access delays for WellSense staff.

Option	Description
Dashboard	Returns to the main Dashboard view. See the previous section for details.
Menu	Provides access to authorization tools: <ul style="list-style-type: none">• New Request: Search for a member and submit a new authorization request.• My Patients and Search Request: These features are currently not functional.
Memory List	Stores up to the last 10 open screens that have not been closed. Click X next to each item or Close All to exit all open requests and release them for WellSense review.

Appendix: Maternity Requests

Emergent inpatient maternity requests can auto-approve when the following options are selected:

Field	Value
Episode Details section	
Request Type	Concurrent
Request Priority	<ul style="list-style-type: none"> Emergent For MA Clarity members: QHP – Info Received
Admit Type	Maternity
Diagnosis section	
Diagnosis	<ul style="list-style-type: none"> O80 O82 Z33.1
Provider Details section	
Provider	Treating, Admitting, and Requesting provider can be the same facility
Stay Request section	
Service Type	Maternity
Place of Service	Inpatient Hospital
Requested Level of Care	Room and Board
Expected Admit Date	Date of admission
Actual Admit Date	Same as Expected Admit Date
LOS Requested	For: <ul style="list-style-type: none"> O80: < 4 days O82: < 5 days Z33.1: < 5 days

Field	Value
Documents section	
Documents	Not required
EDC section	
EDC Date	Leave blank
Clinical Site section	
Primary Clinical Site	Leave blank
Notes section	
Note Text	<p>Please add contact information: name, phone, fax, and include details that may be helpful, such as:</p> <p><i>Patient admitted in labor 7/14, delivered via C Section 10:37 AM 7/15.</i></p> <p><i>Baby boy Weight: 6lbs 15.5oz Gestation Age: 39 weeks</i></p>

Example:

Inpatient Request

Episode Details

Request Type *
Concurrent
Request Priority *
Emergent
Admit Type
Maternity
Optional Fields

Diagnosis

Code Type *
ICD10
Diagnosis *
Diagnosis
Advanced Search

Primary Dx	Code Type	Diagnosis	Actions
	ICD10	O82--Encounter for cesarean delivery without indication	

Provider Details

ID	Name	Location	Role	Network	Phone	Action
000000005020	BMC - Boston Medical Center,	1 Boston Medical Center Place Boston, MA - 02118 USA Phone: (617) 638-8000	Treating	In Network	(617) 638-8000	
000000005020	BMC - Boston Medical Center,	1 Boston Medical Center Place Boston, MA - 02118 USA Phone: (617) 638-8000	Admitting	In Network	(617) 638-8000	
000000005020	BMC - Boston Medical Center,	1 Boston Medical Center Place Boston, MA - 02118 USA Phone: (617) 638-8000	Requesting	In Network	(617) 638-8000	

Stay Request	Service Type *	Maternity	Expected Admit Date	07/25/2025
	Place of Service	Inpatient Hospital	Actual Admit Date	07/25/2025
	Requested Level Of Care *	Room and Board	LOS Requested	4
Service Request	Service Type	Maternity	Modifier	Search Modifier
	Place of Service	Inpatient Hospital	Start Date	07/25/2025
	Code Type	CPT	End Date	07/26/2025
	Service Code	Search Service Code		
	Advanced Search Optional Fields <input type="button" value="Add"/>			
	<input type="button" value="Check For Review"/>			
Documents	Document Title		Document Description	
	Document Type	--Select One--		
	Select Document	<input type="button" value="Browse"/> No File Selected		

EDC Date

EDC Date

Clinical Site

Primary Clinical...

Notes

Note Type

UM Provider Note

Note Encounter Date

09/04/2025

Note Encounter Time

09

15

Note Text

File

Edit

View

Format

Tools

B

I

U

ABC

Contact Rita in Admitting: 617-555-5555 or fax: 617-666-6666
 Patient admitted in labor 7/25, delivered via C section 7/26 at 2:15 AM
 Baby boy weight: 6 lbs 12 oz, gestational age 39 weeks

Submit

Save as Draft

Cancel

The request shows as **Approved**.

Episode Abstract									
Expected Decision Date : 07/29/2025		Authorization Type : IP		Episode Number : 359		Episode Status : OpenRequest		Cert Number 25	
Stay Request	Stay ID	LOS Requested#	LOS Assigned#	LOS Denied	Auth Start Date	Auth End Date	Service Type	Decision	
	12010	4	0	0	07/25/2025	07/29/2025	Maternity	Approved	
Authorization Details	Service ID	Service Code	Requested #	Assigned #	Denied	Auth Start Date	Auth End Date	Service Type	Frequency
	12011	INP(UMSG)	9999	0	0			Maternity	-

Document history

Original approval date	Original effective date	Owner	Approved by
7/17/2025	8/1/2025	R Belsky	A Garcia F Bautista
9/18/2025	9/18/2025	R Belsky	J Hair
9/26/2025	9/26/2025	R Belsky	N/A

Next review date: 9/1/2026