Provider Engagement

WellSense Provider Portal: Inpatient BH authorization requests

Products

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

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General overview

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

- **Submit** 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:
>
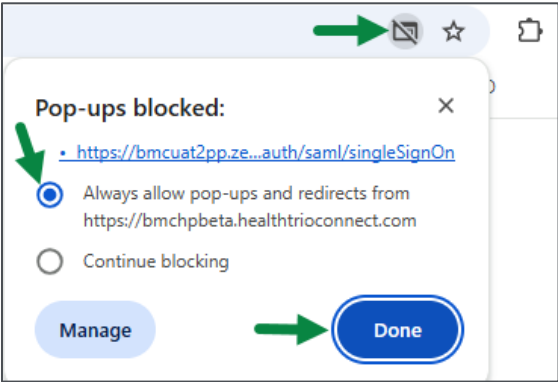> For outpatient requests, see "WellSense Provider Portal: Outpatient BH authorization requests".
>
> **All** inpatient admissions require WellSense notification or authorization.

Key benefits of the WellSense Provider Portal:

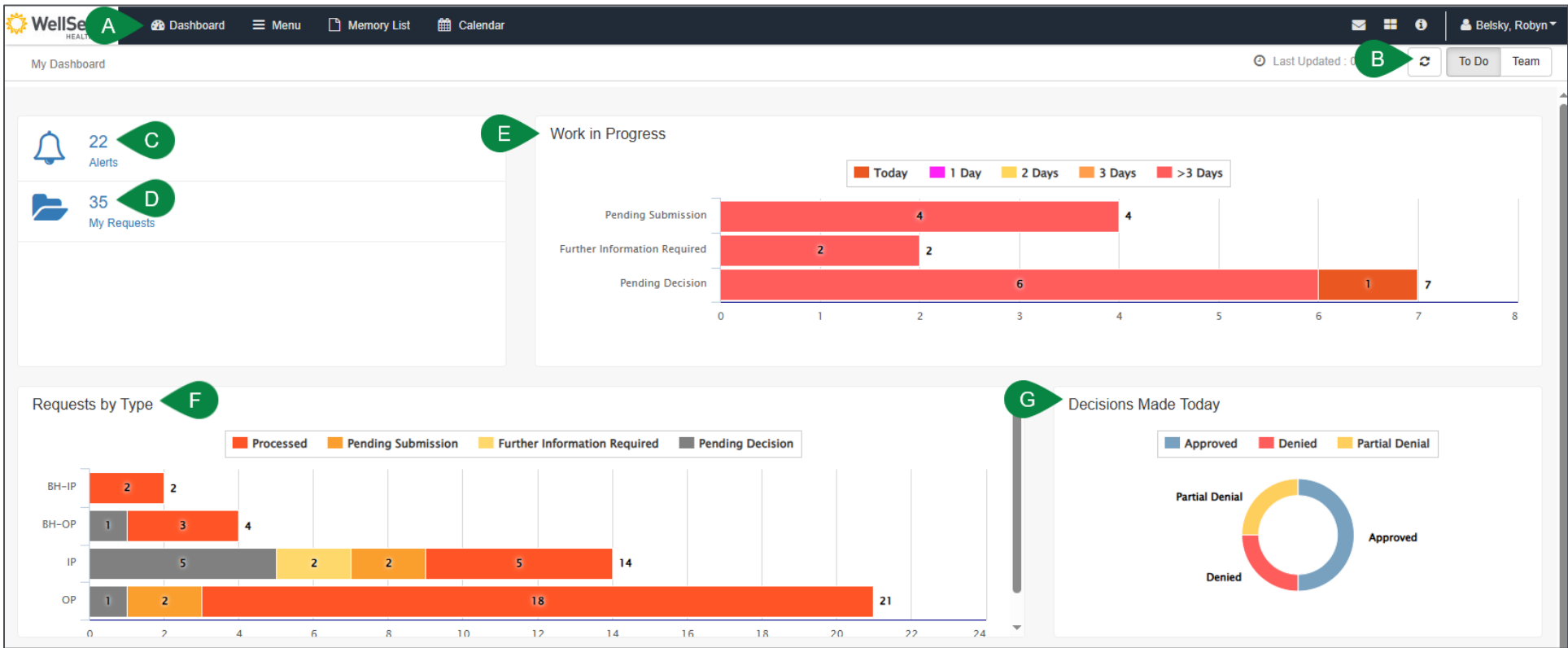| Platform enhancements	Provider benefits
Real-time, secure messaging between your team and WellSense utilization management staff	Faster processing times
Simplified, streamlined workflows for submitting and managing your prior authorization requests	Improved provider experience
Real-time decision notification,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

Log in and review the Dashboard

Requests should be submitted by the **accepting/admitting** facility rather than the ED so that communication can flow appropriately between WellSense and the provider.

Step	Action
1	Open Google Chrome and navigate to wellsense.org > **Login**.
2	Enter your username and password, then select **Sign In**.
3	Go to **Office Management** > **Authorizations and Referrals**.
4	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**. Note: You may need to reset the pop-up blocker after you clear cache.

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. The default Dashboard displays requests you have submitted, but you can also view all auth requests submitted under this provider's Tax ID appear, regardless of who submitted the request.
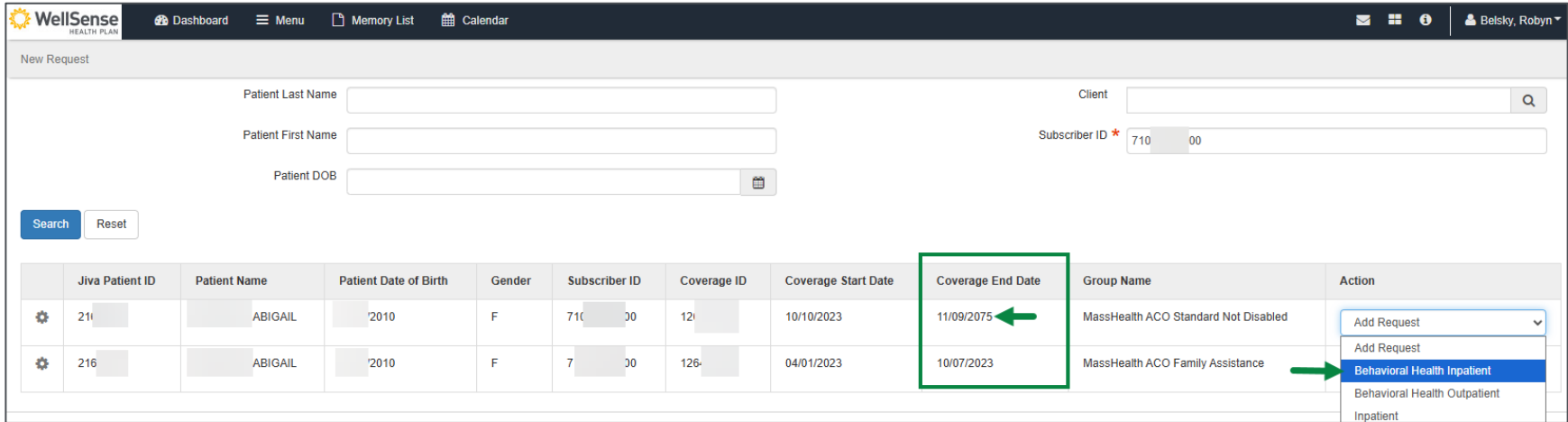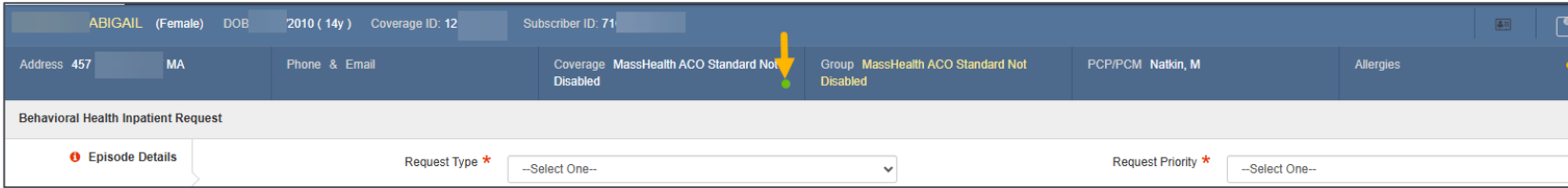
Click the colored bars to access the requests.

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: • **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. • 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	If multiple rows appear, confirm the correct patient by matching the name and date of birth. If there are duplicate entries, select the row with the future **Coverage End Date**, then click **Add Request** > **Behavioral Health Inpatient**.
4	The patient record appears. - 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	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.

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	Admission authorization
Request Priority	Notification
Admit Type	Behavioral Health

Example:

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:

Section 2: Provider details

Click **Attach Providers**, then enter the facility 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** three times.

- For 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:

Section 3: Stay request

Inpatient requests include a Stay line.

Stay request

Field	Value
Service Type	• **Behavioral Health** • **Substance Use Disorder**
Place of Service	• **Inpatient Psychiatric Facility** • **Psychiatric Residential Treatment Center** • **Residential Substance Abuse Treatment Facility**
Requested Level of Care	• **Adult Community Crisis Stabilization (ACCS)** • **ATS (3.7)** • **ATS (4.0)** • **CBAT** • **Community Crisis Stabilization (CCS)** • **CSS (3.5)** • **DDAT** • **EATS** • **ICBAT** • **Individualized Treatment and Recovery (ITS)** • **Inpatient Mental Health** • **Inpatient Mental Health–ASD/DD** • **Low-Intensity Residential Treatment (3.1)** • **Residential Rehab (3.5)** • **Residential Rehabilitation Services (RRS)** • **Residential Treatment Services** • **Transitional Care Unit (TCU)** • **Youth Community Crisis Stabilization (YCCS)**

Field	Value
Expected Admit Date	Enter the actual admission date.
Actual Admit Date	Enter the actual admission date.
LOS Requested	See [Appendix: Initial Notification Length of Stay](#)

Example:

Service Request

Skip this section.

Section 4: Documents

Upload available clinical documentation in **Word or PDF format**, such as a facesheet, authorization form, or crisis eval.

Field	Value
Document Title	Paste the filename or enter a clear, descriptive title.
Document Type	**UM Provider Document**
Document Description	**Clinicals**

Click **Browse** to locate the file, then click **Attach**.

Note: If the portal does not allow you to attach from your desktop or C drive, please save files to a different drive to attach in the request.

Example:

Section 5: Add a note and submit the request

Note

Include:
- Contact information for the requester: name, phone, fax number.
- If known, please provide UM contact information for accepting facility.
- Details not captured elsewhere, for example, if a patient left AMA on Day 2, please indicate that.
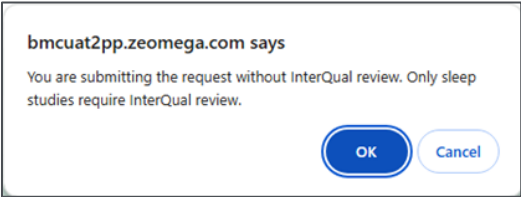
Example:

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.

After submission, the Request Details screen 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.
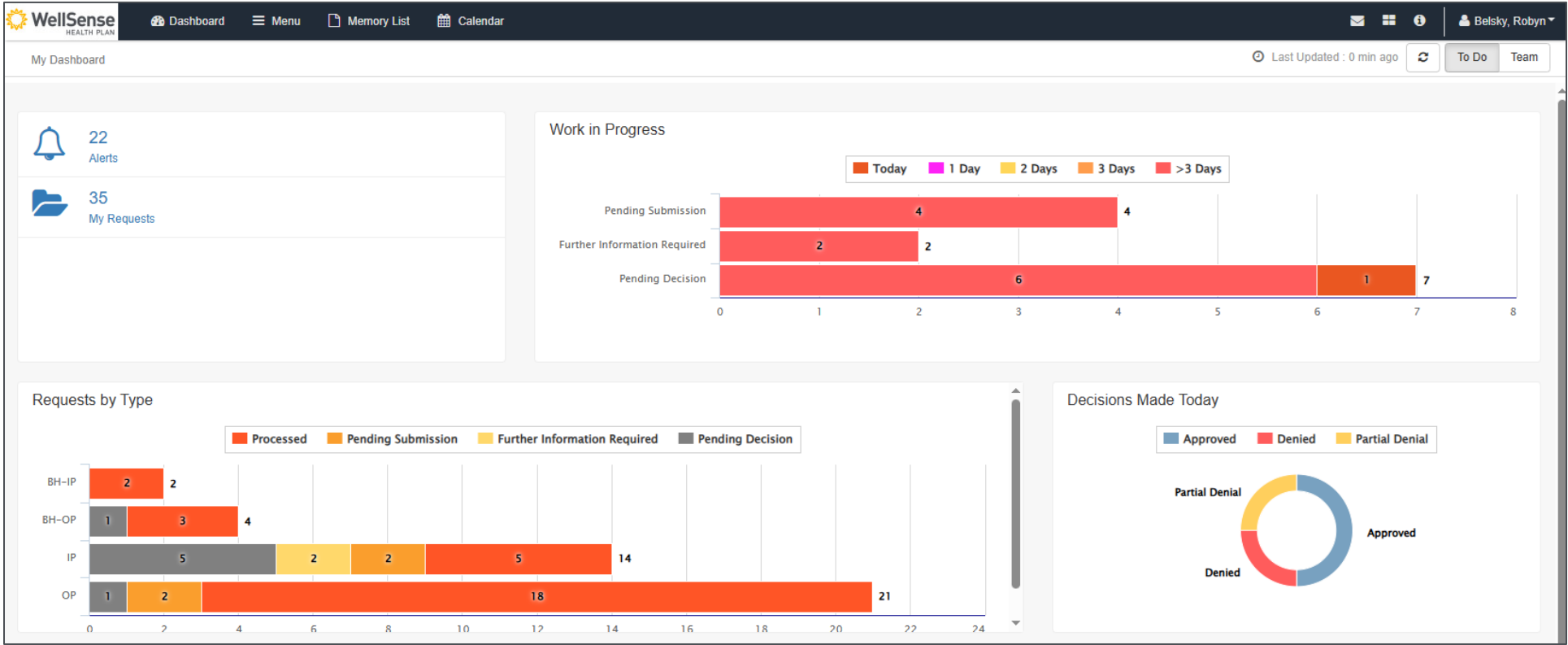
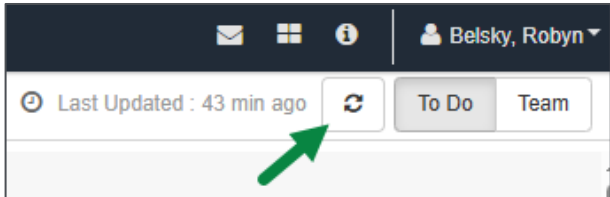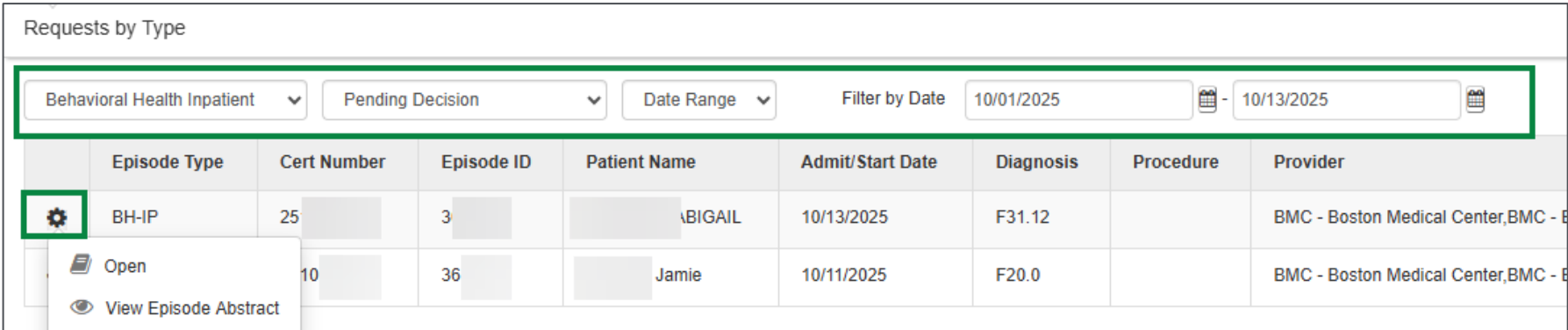**Example:**

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	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. ✉ ⊞ ⓘ 👤 Belsky, Robyn ▾ 🕐 Last Updated : 43 min ago ⟳ To Do Team
2	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. **Requests by Type** Behavioral Health Inpatient ▾ Pending Decision ▾ Date Range ▾ Filter by Date 10/01/2025 📅 - 10/13/2025 📅 |	Episode Type	Cert Number	Episode ID	Patient Name	Admit/Start Date	Diagnosis	Procedure	Provider
---	---	---	---	---	---	---	---	---
⚙	BH-IP	25	3	ABIGAIL	10/13/2025	F31.12		BMC - Boston Medical Center,BMC - E
	10	36		Jamie	10/11/2025	F20.0		BMC - Boston Medical Center,BMC - E	 📖 Open 👁 View Episode Abstract

3	To edit a request:
	  • If the request is pending submission, click the gear icon to edit.
	  • If the request has been submitted, users can:
	    ○ 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).
	Note: If you need to cancel a request, or edit dates, visits, etc., please contact WellSense and refer to the Cert Number.

Step	Action
	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.
4	
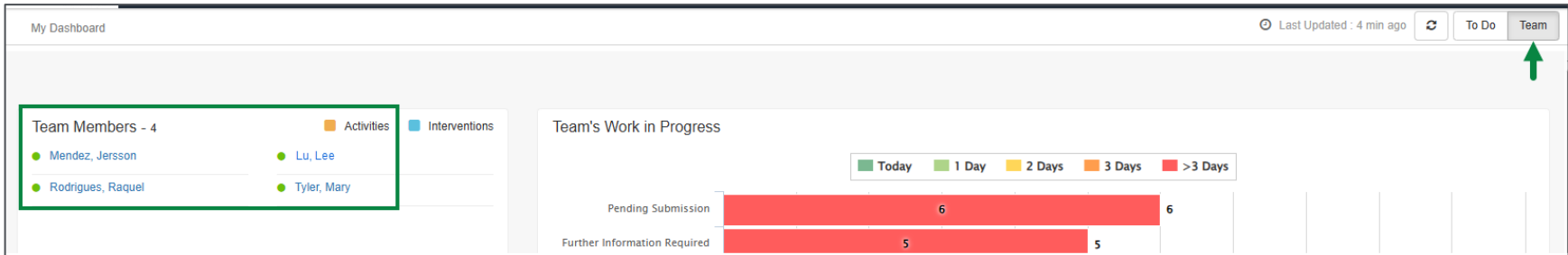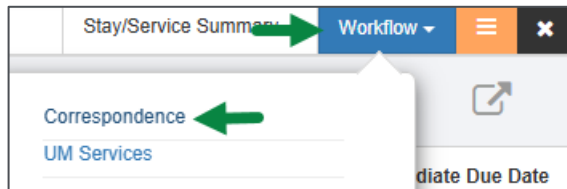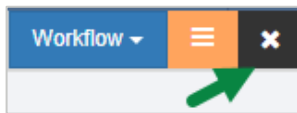
Step	Action
5	To view requests submitted by staff with the same tax ID, click **Team** in the upper right, then click the link for the staff member to view.
6	To view and print the letters, click **Workflow** > **Correspondence**. Click the gear icon > **View PDF Preview**. You can print the PDF.
7	After 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.**

Add discharge information

You can add the discharge information as a document or note, thereby avoiding a call or fax from WellSense requesting this info.

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: • **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: Initial Notification Length of Stay

Line of Business	Service Reason	Level of Request/Reason for Request	Initial LOS Request
MassHealth MCO/ACO	Behavioral Health	ACCS	5 days
	Substance Use Disorder	ATS (3.7)	7 days
	Substance Use Disorder	ATS (4.0)	7 days
	Behavioral Health	CBAT	3 days
	Substance Use Disorder	CSS/Residential Rehab (3.5)	14 days
	Behavioral Health	DDAT	14 days
	Substance Use Disorder	EATS	14 days
	Behavioral Health	ICBAT	3 days
	Substance Use Disorder	Individualized Treatment Stabilization (ITS)	14 days
	Behavioral Health	Inpatient Mental Health	3 days
	Substance Use Disorder	RRS/Low-Intensity Residential Tx (3.1)	90 days
	Behavioral Health	Transitional Care Unit (TCU)	3–5 days
Massachusetts Clarity	Behavioral Health	ACCS	5 days
	Substance Use Disorder	ATS 3.7	7 days
	Substance Use Disorder	ATS 4.0	7 days
	Behavioral Health	CBAT	3 days
	Substance Use Disorder	CSS/Residential Rehab (3.5)	14 days
	Behavioral Health	DDAT	14 days
	Substance Use Disorder	EATS	14 days
	Behavioral Health	ICBAT	3 days
	Substance Use Disorder	Individualized Treatment Stabilization (ITS)	14 days
	Behavioral Health	Inpatient Mental Health	3 days

Line of Business	Service Reason	Level of Request/Reason for Request	Initial LOS Request
New Hampshire Medicaid	Substance Use Disorder	ATS (3.7)	7 days
	Substance Use Disorder	ATS (4.0)	7 days
	Substance Use Disorder	CSS/Residential Rehab (3.5)	14 days
	Behavioral Health	Inpatient Mental Health	5 days
	Substance Use Disorder	RRS/Low-Intensity Residential Tx (3.1)	90 days
New Hampshire Clarity	Substance Use Disorder	ATS (3.7)	7 days
	Substance Use Disorder	ATS (4.0)	7 days
	Substance Use Disorder	CSS/Residential Rehab (3.5)	14 days
	Behavioral Health	Inpatient Mental Health	5 days
	Substance Use Disorder	RRS/Low-Intensity Residential Tx (3.1)	90 days
New Hampshire Medicare Advantage	Substance Use Disorder	ATS (3.7)	7 days
	Substance Use Disorder	ATS (4.0)	7 days
	Behavioral Health	Inpatient Mental Health	5 days

Document history

Approval date	Effective date	Owner	Approved by
10/24/2025	11/10/2025	R Belsky	S Rufo B Cioffi H Savage
11/13/2025	11/13/2025	R Belsky	A Garcia

Next review date: 12/1/2026