

Effective June 28, 2025, the Worker's Compensation Medical Bill Processing (WCMBP) System will introduce a new feature to enhance the authorization process. With this update, providers will only be able to upload attachments to an authorization request if the status of the request line item is one of the following:

- Pended Further Development
- In Review
- Processed Awaiting Decision

Attachments will not be accepted for authorization requests in any other status. Additionally, the WCMBP System will automatically notify DOL or Acentra Health staff when a provider has taken this action.

This Quick Reference Guide (QRG) explains the process of how a provider can upload supporting documentation after an authorization is submitted.

Note: Providers must log in to the WCMBP portal prior to this step.

1. Select the appropriate Provider ID from the **Available Provider IDs** drop-down list.

Welcome to the WCMBP Provider Portal	
Select a Provider ID Number to continue to the Provider Portal:	
Available Provider IDs:	
Users can toggle between multiple OWCP Provider IDs using the Switch OWCP Provider ID link on the Provider Portal.	



Authorization

Provider

2. Select an appropriate profile that allows the user to access authorization request functionality and select **Go**.

Note: EXT Provider Eligibility Checker – Claims, EXT Provider Eligibility Checker – Auth, and EXT Provider Bills Submitter profiles can perform the functionality.

	Welcome to the Workers' Compensation Medical Bill Process System	
	ECAMS ™ HCE	
	Select a profile to use during this session:	
	Profile: EXT Provider Eligibility Checker - A ∨ * OGo	
3.	On the Provider Portal from the Online Services section of the screen select the On-line Authorization Submission link.	I,
	Online Services	
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On-line Authorization Submission

Maintain Provider Information

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Uploading Attachments to a Previously Submitted Authorization Request (4 of 6)	Quick Reference Guide
Uploading New Attachments to an Authorization Reque	st
 The Authorization File Attachment page displays, from Type drop-down list select the Auth Supporting Door Filename, select Choose File. 	om the Document c ument , from
Auth Request Number:	
III Attachment	
Please select the file to be uploaded	
Document Type : Auth Supporting Documents ∨)*	
Filename : Choose File No file chosen *	
Please be sure the supporting documentation/attachments is for the treated claimant ONLY. Please do not upload supporting documentation/attachments for any other claimant as this could potenti	ally cause a denial of your authorization
The acceptable file extensions for the upload are .tif,.tiff,.pdf. Filename cannot be longer than 50 characters.	
 Confirm the correct filename is present and select C supporting document file.)K to upload a new
Auth Request Number:	
Attachment	^
Please select the file to be uploaded	
Document Type : Auth Supporting Documents V*	
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Please be sure the supporting documentation/attachments is for the treated claimant ONLY. Please do not upload supporting documentation/attachments for any other claimant as this could potentially or an unintended disclosure of protected health information (PHI).	cause a denial of your authorization
The acceptable file extensions for the upload are .tif,.tiff,.pdf. Filename cannot be longer than 50 characters.	
	O Ok Close

06/28/2025



To verify the attachments are uploaded, check the **Attachment List** section. The most recently uploaded attachments are listed first.

8. To view the newly submitted attachment, select the **Image ID** link this will open the file in a separate browser window. Select **Close** to return to the authorization request.

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 All authorization lines with the "Pended Further Development" status update automatically to the "In Review" status. Authorization lines in the "Processed Awaiting Decision" status will not update to the "In Review" status.

Note: After uploading new documents to the authorization, the WCMBP System will automatically notify DOL or Acentra Health staff that the authorization is ready for review.

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Close	O Upload/Retrieve Attachment	Show Duplicate Authorization	Show Correction		
_	Program:	~	Authorization Type:	Surgical Package	~
A	uthorization Status: In Review Source: DDE		Authorization Level:	Level 3	
III R	equestor Information				
	Initial Paguast				
Date	e Requested: 04/17/2025	* Requested E	By:		Phone Number:
≡ c	laimant Information				
	mantia Casa ID:			Date of Birth:	271-1975 #
Clai	mant's Case ID.				
Clai	First Name:			Last Name:	Manica.
Clai	First Name:			Last Name:	RMCX.