



www.allcaremed.org

30 Grafton Street
Millbury, MA 01527

Tel: 508-865-4857
Fax: 508-865-6370

Email: customer.service@allcaremed.org

Checklist for Pullup and Liner Requests

(Please note that MassHealth uses the word "liners" to refer to the pad or insert worn inside an undergarment or brief)

- Letter of medical necessity
 - Diagnosis of incontinence
 - Primary diagnosis causing patient's incontinence
 - Signature of physician
 - Date
 - Explanation as to why patient requires both a diaper and a liner (ex: leakage, excessive urination, overflow, etc.)
 - Criteria for pullups:
 - Ambulatory
 - Able to pull up and down independently
 - Schedule of toileting to prevent episodes of incontinence

AND

- Prescription
 - Signed and dated by MD/NP
 - #quantity per month (248 maximum)
 - Size (for diapers)
 - Refills (11 maximum)
 - Date

Fax the request over to Allcare Medical Supply
508-865-6370



www.allcaremed.org

**30 Grafton Street
Millbury, MA 01527**

**Tel: 508-865-4857
Fax: 508-865-6370**

Email: customer.service@allcaremed.org

**Call us anytime to check the status:
508-865-4857 Opt 3**