

**We Treat People Right**

**Welcome to The Cottages Assisted Living and Memory Care!**

**Home Office:**

The Cottages LLC

1079 S. Ancona Ave. Ste. 110

Eagle, ID 83616

P (208) 475-1805

F (208) 475-1810

Date

Jaime Simpson, Supervisor

**Our Locations:**

**The Cottages of Boise**

6300 North Roe Street

Boise, ID 83714

(208) 853-1255

**The Cottages of Emmett**

411 East 12th Street

Emmett, ID 83617

(208) 365-9490

**The Cottages of McCall**

PO Box 1973

700 Reedy Lane

McCall, ID 83638

(208) 634-3883

**The Cottages of Meridian**

3199 West Belltower Drive

Meridian, ID 83646

(208) 288-2220

**The Cottages of Middleton**

760 West Main Street

Middleton, ID 83644

(208) 585-5959

**The Cottages of Mt. Home**

735 South 5th West

Mt. Home, ID 83647
(208) 580-1121

**The Cottages of Nampa**

5023 East Victory Road

Nampa, ID 83687

(208) 463-4941

**The Cottages of Payette**

1481 7th Avenue North

Payette, ID 83661

(208) 642-6199

**The Cottages of Weiser**

1225 East 6th Street

Weiser, ID 83672

(208) 44-4200

Residential Community Care Program

Bureau of Facility Standards

PO Box 83720

Boise, Idaho 83720-0036

Re: Request for Bulk Medication Waiver for \_\_\_\_\_\_\_\_\_\_

Dear Ms. Simpson:

This is a written request, as indicated under the Rules for Licensed Residential and Assisted Living Facilities in Idaho, IDAPA 16.03.22.428.02; medication distribution system, for a waiver regarding medication distribution for a resident at (Facility Name).

It is important to ***Resident name*** to be able to obtain her/his medication from a pharmacy with the most reasonable cost. This pharmacy is unable to put her/his medications in a blister pack. She/he is requesting this bulk supply medication waiver for financial reasons. Her/his family assures us that her/his medications will be delivered in a timely manner to ensure her medication supply is available at all times.

The current medication distribution system at (Facility Name) is the Blister-Pack 30/31 day cycle for medication in single dose form.

The staff at (Facility Name) has been trained in the use of a bulk medication distribution system and the Resident’s bulk medication supply will be kept in their original containers from the pharmacy with the original pharmacy label(s) in a designated and locked cupboard in the locked (Facility Name) medication room.

Thank you in advance for reviewing this request.

Sincerely,

Administrator Name



www.TheCottages.biz