

MYSTIC HEALTHCARE & REHABILITATION CENTER, LLC

Report ID: CCN 075271
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§ 1 Facility Identity

Facility	MYSTIC HEALTHCARE & REHABILITATION CENTER, LLC
CCN	075271
Location	475 HIGH ST, MYSTIC, CT, 06355
Ownership type	For profit - Limited Liability company
Certified beds	100

§ 2 CMS Federal Record

Civil money penalties on file	\$21,645
Deficiency citations — current cycle	16 (100% vs prior 24 months (8))
Deficiency citations — prior 24 months	8
Immediate Jeopardy — current cycle	1
Actual-harm (G+) citations — current cycle	0
Special Focus Facility status	Not listed
Abuse icon	Yes — CMS abuse icon currently listed

§ 3 Federal Penalties in Context

This facility — penalties on file	\$21,645
CT state average	\$18,685 (this facility is 1.2× the CT average)
National average	\$31,239 (this facility is 0.7× the national average)

Averages are CMS-published per-facility fine amounts for the same snapshot. Figures and multiples are stated as published; no inference is drawn here.

§ 4 Current-Cycle Deficiencies

The current survey cycle records the following 16 federal deficiency citations (CMS F-tags). Scope/severity is CMS's own A–L grade; "Immediate Jeopardy" is CMS's most serious classification.

F-TAG	FINDING (CMS)	SCOPE/SEV.	SOURCE
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	J • Immediate Jeopardy	Complaint
F692	Provide enough food/fluids to maintain a resident's health.	E	Standard survey
F761	Ensure drugs and biologicals used in the facility are labeled in accordance with currently accepted professional principles; and all drugs and biologicals must be stored in locked compartments, separately locked, compartments for controlled drugs.	E	Standard survey
F656	Develop and implement a complete care plan that meets all the resident's needs, with timetables and actions that can be measured.	D	Complaint
F726	Ensure that nurses and nurse aides have the appropriate competencies to care for every resident in a way that maximizes each resident's well being.	D	Complaint
F600	Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody.	D	Complaint
F609	Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.	D	Complaint
F550	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.	D	Standard survey
F580	Immediately tell the resident, the resident's doctor, and a family member of situations (injury/decline/room, etc.) that affect the resident.	D	Standard survey
F657	Develop the complete care plan within 7 days of the comprehensive assessment; and prepared, reviewed, and revised by a team of health professionals.	D	Standard survey
F658	Ensure services provided by the nursing facility meet professional standards of quality.	D	Standard survey

F679	Provide activities to meet all resident's needs.	D	Standard survey
F686	Provide appropriate pressure ulcer care and prevent new ulcers from developing.	D	Standard survey
F757	Ensure each resident's drug regimen must be free from unnecessary drugs.	D	Standard survey
F880	Provide and implement an infection prevention and control program.	D	Standard survey
F865	Have a plan that describes the process for conducting QAPI and QAA activities.	B	Standard survey

§ 5 Ownership & Chain Context

Ownership record	Chain: RYDERS HEALTH MANAGEMENT (8 facilities); Owner on file: KOPCHIK, KENNETH (individual)
Ownership chain	RYDERS HEALTH MANAGEMENT (8 facilities)
Penalties vs chain average	\$21,645 vs \$11,299 (1.9× the chain average)
Current deficiencies vs chain average	16 vs 18.9 (0.8× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	1 / 5 (state avg 3 · US avg 3)
Health inspection	1 / 5 (state avg 2.7 · US avg 2.8)
Staffing	3 / 5 (state avg 3.3 · US avg 2.9)
Quality measures (QM)	2 / 5 (state avg 3.7 · US avg 3.7)

§ 7 Record Provenance

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/075271
Snapshot SHA-256	ebb4243e8a9b3e4110f2524a2a7a68545148153045b7e3c08bbc9bb8fe9769ba
Methodology & version	v1.0 — https://www.caregiverhelpnow.com/methodology

§ 8 For Your Attorney

1. The full survey file (Form 2567) for each inspection cited above is available from the state survey agency or by FOIA request.
2. Quarterly staffing data: CMS Payroll-Based Journal (PBJ) public use files, CCN 075271.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash ebb4243e8a9b.
4. Deficiency F-tags cited above are searchable in CMS QCOR (qcor.cms.gov).

This snapshot is a frozen record of CMS Care Compare data as of Jun 2026. Independently verifiable at the URL above. Generated by CareSentinel under Nodal Logics LLC. Compiled under CareSentinel methodology v1.0, documented at <https://www.caregiverhelpnow.com/methodology>; the Snapshot SHA-256 above pins this record to that methodology version.

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