Meridian Meadows Transitional Care

Report ID: CCN 135147
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§ 1 Facility Identity

Facility	Meridian Meadows Transitional Care
CCN	135147
Location	2656 E Magic View Drive, Meridian, ID, 83642
Ownership type	For profit - Limited Liability company
Certified beds	52

§ 2 CMS Federal Record

Civil money penalties on file	$0
Deficiency citations — current cycle	20 (900% vs prior 24 months (2))
Deficiency citations — prior 24 months	2
Immediate Jeopardy — current cycle	0
Actual-harm (G+) citations — current cycle	1
Special Focus Facility status	SFF candidate
Abuse icon	**Yes — CMS abuse icon currently listed**

§ 3 Federal Penalties in Context

This facility — penalties on file	$0
ID state average	$13,767 (this facility is 0.0× the ID average)
National average	$31,239 (this facility is 0.0× 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 20 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
F600	Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody.	G	Complaint
F725	Provide enough nursing staff every day to meet the needs of every resident; and have a licensed nurse in charge on each shift.	E	Complaint
F609	Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.	D	Complaint
F554	Allow residents to self-administer drugs if determined clinically appropriate.	D	Standard survey
F677	Provide care and assistance to perform activities of daily living for any resident who is unable.	D	Standard survey
F552	Ensure that residents are fully informed and understand their health status, care and treatments.	D	Complaint
F604	Ensure that each resident is free from the use of physical restraints, unless needed for medical treatment.	D	Complaint
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
F658	Ensure services provided by the nursing facility meet professional standards of quality.	D	Complaint
F684	Provide appropriate treatment and care according to orders, resident’s preferences and goals.	D	Complaint
F686	Provide appropriate pressure ulcer care and prevent new ulcers from developing.	D	Complaint
F695	Provide safe and appropriate respiratory care for a resident when needed.	D	Complaint
F727	Have a registered nurse on duty 8 hours a day; and select a registered nurse to be the director of nurses on a full time basis.	D	Complaint

F757	Ensure each resident's drug regimen must be free from unnecessary drugs.	D	Complaint
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.	D	Complaint
F849	Arrange for the provision of hospice services or assist the resident in transferring to a facility that will arrange for the provision of hospice services.	D	Complaint
F865	Have a plan that describes the process for conducting QAPI and QAA activities.	D	Complaint
F880	Provide and implement an infection prevention and control program.	D	Complaint
F883	Develop and implement policies and procedures for flu and pneumonia vaccinations.	D	Complaint
F887	Educate residents and staff on COVID-19 vaccination, offer the COVID-19 vaccine to eligible residents and staff after education, and properly document each resident and staff member's vaccination status.	D	Complaint

§ 5 Ownership & Chain Context

Ownership record	Chain: TANABELL HEALTH SERVICES (5 facilities); Owner on file: BELL, JAMIE (individual)
Ownership chain	TANABELL HEALTH SERVICES (5 facilities)
Penalties vs chain average	$0 vs $2,259 (0.0× the chain average)
Current deficiencies vs chain average	20 vs 8.8 (2.3× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	2 / 5 (state avg 3.2 · US avg 3)
Health inspection	1 / 5 (state avg 2.7 · US avg 2.8)
Staffing	1 / 5 (state avg 3 · US avg 2.9)
Quality measures (QM)	5 / 5 (state avg 4.2 · US avg 3.7)

§ 7 Record Provenance

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/135147
Snapshot SHA-256	d3abfbff484dba6fa381f5da460b8ba5ca4fe0f17b840ebf7796f350a1e96c01
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 135147.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash d3abfbff484d.
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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