LORIEN TANEYTOWN, INC

Report ID: CCN 215348
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§ 1 Facility Identity

Facility	LORIEN TANEYTOWN, INC
CCN	215348
Location	100 ANTRIM BLVD, TANEYTOWN, MD, 21787
Ownership type	For profit - Corporation
Certified beds	63

§ 2 CMS Federal Record

Civil money penalties on file	$65,400
Deficiency citations — current cycle	17 (up from 0 in the prior 24 months)
Deficiency citations — prior 24 months	0
Immediate Jeopardy — current cycle	**1**
Actual-harm (G+) citations — current cycle	0
Special Focus Facility status	Not listed
Abuse icon	No

§ 3 Federal Penalties in Context

This facility — penalties on file	$65,400
MD state average	$22,972 (this facility is 2.8× the MD average)
National average	$31,239 (this facility is 2.1× 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 17 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
F945	Include as part of its infection prevention and control program, mandatory training that includes written standards, policies, and procedures for the program.	F	Complaint
F732	Post nurse staffing information every day.	F	Standard survey
F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	F	Standard survey
F908	Keep all essential equipment working safely.	F	Standard survey
F804	Ensure food and drink is palatable, attractive, and at a safe and appetizing temperature.	F	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
F940	Develop, implement, and/or maintain an effective training program for all new and existing staff members.	D	Complaint
F941	Develop, implement, and/or maintain an effective training program that includes effective communications for direct care staff members.	D	Complaint
F946	Provide training in compliance and ethics.	D	Complaint
F609	Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.	D	Standard survey
F641	Ensure each resident receives an accurate assessment.	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

F842	Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards.	D	Standard survey
F847	Inform resident or representatives choice to enter into binding arbitration agreement and right to refuse.	D	Standard survey
F880	Provide and implement an infection prevention and control program.	D	Standard survey
F610	Respond appropriately to all alleged violations.	D	Complaint

§ 5 Ownership & Chain Context

Ownership record	Chain: LORIEN HEALTH SERVICES (8 facilities); Owner on file: COLLISON, MICHELE (individual)
Ownership chain	LORIEN HEALTH SERVICES (8 facilities)
Penalties vs chain average	$65,400 vs $10,180 (6.4× the chain average)
Current deficiencies vs chain average	17 vs 13.5 (1.3× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	2 / 5 (state avg 3.1 · US avg 3)
Health inspection	2 / 5 (state avg 2.8 · US avg 2.8)
Staffing	4 / 5 (state avg 3.2 · US avg 2.9)
Quality measures (QM)	2 / 5 (state avg 3.9 · US avg 3.7)

§ 7 Record Provenance

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/215348
Snapshot SHA-256	0833538311006b56434aec9359f179e566780151681efab833bd1c09331db3d5
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 215348.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 083353831100.
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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