

YELLOWSTONE RIVER NURSING AND REHABILITATION

Report ID: CCN 275029
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§ 1 Facility Identity

Facility	YELLOWSTONE RIVER NURSING AND REHABILITATION
CCN	275029
Location	2115 CENTRAL AVE, BILLINGS, MT, 59102
Ownership type	For profit - Individual
Certified beds	160

§ 2 CMS Federal Record

Civil money penalties on file	\$138,359
Deficiency citations — current cycle	17 (143% vs prior 24 months (7))
Deficiency citations — prior 24 months	7
Immediate Jeopardy — current cycle	1
Actual-harm (G+) citations — current cycle	2
Special Focus Facility status	Not listed
Abuse icon	No

§ 3 Federal Penalties in Context

This facility — penalties on file	\$138,359
MT state average	\$54,689 (this facility is 2.5× the MT average)
National average	\$31,239 (this facility is 4.4× 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
F686	Provide appropriate pressure ulcer care and prevent new ulcers from developing.	G	Standard survey
F692	Provide enough food/fluids to maintain a resident's health.	G	Standard survey
F850	Hire a qualified full-time social worker in a facility with more than 120 beds.	E	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.	E	Complaint
F585	Honor the resident's right to voice grievances without discrimination or reprisal and the facility must establish a grievance policy and make prompt efforts to resolve grievances.	E	Standard survey
F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	E	Standard survey
F677	Provide care and assistance to perform activities of daily living for any resident who is unable.	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
F711	Ensure the resident's doctor reviews the resident's care, writes, signs and dates progress notes and orders, at each required visit.	D	Complaint
F740	Ensure each resident must receive and the facility must provide necessary behavioral health care and services.	D	Complaint
F745	Provide medically-related social services to help each resident achieve the highest possible quality of life.	D	Complaint
F610	Respond appropriately to all alleged violations.	D	Complaint

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	Complaint
F550	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.	D	Standard survey
F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	D	Standard survey
F695	Provide safe and appropriate respiratory care for a resident when needed.	D	Standard survey

§ 5 Ownership & Chain Context

Ownership record	Chain: EDURO HEALTHCARE (35 facilities); Owner on file: CALDWELL, SARAH (individual)
Ownership chain	EDURO HEALTHCARE (35 facilities)
Penalties vs chain average	\$138,359 vs \$82,307 (1.7× the chain average)
Current deficiencies vs chain average	17 vs 11.7 (1.5× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	1 / 5 (state avg 2.9 · US avg 3)
Health inspection	1 / 5 (state avg 2.7 · US avg 2.8)
Staffing	2 / 5 (state avg 3.6 · US avg 2.9)
Quality measures (QM)	2 / 5 (state avg 3.2 · US avg 3.7)

§ 7 Record Provenance

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/275029
Snapshot SHA-256	ebd56554134271e711bc6116a155aac30b4339a55c97311037cb5e1a49af268b
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 275029.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash ebd565541342.
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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