

LAUREL HEALTH & REHABILITATION CENTER

Report ID: CCN 275111
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§ 1 Facility Identity

Facility	LAUREL HEALTH & REHABILITATION CENTER
CCN	275111
Location	820 3RD AVE, LAUREL, MT, 59044
Ownership type	For profit - Corporation
Certified beds	79

§ 2 CMS Federal Record

Civil money penalties on file	\$7,163
Deficiency citations — current cycle	23 (188% vs prior 24 months (8))
Deficiency citations — prior 24 months	8
Immediate Jeopardy — current cycle	0
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	\$7,163
MT state average	\$54,689 (this facility is 0.1× the MT average)
National average	\$31,239 (this facility is 0.2× 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 23 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
F865	Have a plan that describes the process for conducting QAPI and QAA activities.	F	Standard survey
F867	Set up an ongoing quality assessment and assurance group to review quality deficiencies and develop corrective plans of action.	F	Standard survey
F880	Provide and implement an infection prevention and control program.	F	Standard survey
F881	Implement a program that monitors antibiotic use.	F	Standard survey
F565	Honor the resident's right to organize and participate in resident/family groups in the facility.	E	Standard survey
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
F609	Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.	E	Standard survey
F677	Provide care and assistance to perform activities of daily living for any resident who is unable.	E	Standard survey
F600	Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody.	E	Complaint
F584	Honor the resident's right to a safe, clean, comfortable and homelike environment, including but not limited to receiving treatment and supports for daily living safely.	D	Standard survey
F627	Ensure the transfer/discharge meets the resident's needs/preferences and that the resident is prepared for a safe transfer/discharge.	D	Standard survey
F628	Provide the required documentation or notification related to the resident's needs, appeal rights, or bed-hold policies.	D	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	Standard survey
F679	Provide activities to meet all resident's needs.	D	Standard survey
F685	Assist a resident in gaining access to vision and hearing services.	D	Standard survey
F690	Provide appropriate care for residents who are continent or incontinent of bowel/bladder, appropriate catheter care, and appropriate care to prevent urinary tract infections.	D	Standard survey
F692	Provide enough food/fluids to maintain a resident's health.	D	Standard survey
F693	Ensure that feeding tubes are not used unless there is a medical reason and the resident agrees; and provide appropriate care for a resident with a feeding tube.	D	Standard survey
F699	Provide care or services that was trauma informed and/or culturally competent.	D	Standard survey
F759	Ensure medication error rates are not 5 percent or greater.	D	Standard survey
F791	Provide or obtain dental services for each resident.	D	Standard survey
F806	Ensure each resident receives and the facility provides food that accommodates resident allergies, intolerances, and preferences, as well as appealing options.	D	Standard survey
F610	Respond appropriately to all alleged violations.	D	Complaint

§ 5 Ownership & Chain Context

Ownership record	Chain: EVERGREEN HEALTHCARE GROUP (43 facilities); Owner on file: PACIFIC NORTHWEST SNF OPERATIONS HOLDINGS (MT) LLC (organization)
Ownership chain	EVERGREEN HEALTHCARE GROUP (43 facilities)
Penalties vs chain average	\$7,163 vs \$48,910 (0.1× the chain average)
Current deficiencies vs chain average	23 vs 12.6 (1.8× 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	1 / 5 (state avg 3.6 · US avg 2.9)
Quality measures (QM)	4 / 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/275111
Snapshot SHA-256	3e633d20cd18bd3e943479dae67f01167a09386d2a02c8a03562c11596268c75
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 275111.
 3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 3e633d20cd18.
 4. Deficiency F-tags cited above are searchable in CMS QCOR (qcor.cms.gov).
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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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