BEARTOOTH REHABILITATION AND NURSING LLC

Report ID: CCN 275159
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§ 1 Facility Identity

Facility	BEARTOOTH REHABILITATION AND NURSING LLC
CCN	275159
Location	350 W PIKE AVE, COLUMBUS, MT, 59019
Ownership type	For profit - Corporation
Certified beds	0

§ 2 CMS Federal Record

Civil money penalties on file	$30,572
Deficiency citations — current cycle	35 (338% vs prior 24 months (8))
Deficiency citations — prior 24 months	8
Immediate Jeopardy — current cycle	**2**
Actual-harm (G+) citations — current cycle	2
Special Focus Facility status	SFF candidate
Abuse icon	**Yes — CMS abuse icon currently listed**

§ 3 Federal Penalties in Context

This facility — penalties on file	$30,572
MT state average	$54,689 (this facility is 0.6× the MT average)
National average	$31,239 (this facility is 1.0× 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 35 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
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	**J · Immediate Jeopardy**	Complaint
F600	Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody.	G	Complaint
F658	Ensure services provided by the nursing facility meet professional standards of quality.	G	Complaint
F865	Have a plan that describes the process for conducting QAPI and QAA activities.	F	Complaint
F868	Have the Quality Assessment and Assurance group have the required members and meet at least quarterly	F	Complaint
F801	Employ sufficient staff with the appropriate competencies and skills sets to carry out the functions of the food and nutrition service, including a qualified dietician.	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
F835	Administer the facility in a manner that enables it to use its resources effectively and efficiently.	F	Standard survey
F837	Establish a governing body that is legally responsible for establishing and implementing policies for managing and operating the facility and appoints a properly licensed administrator responsible for managing the facility.	F	Standard survey
F838	Conduct and document a facility-wide assessment to determine what resources are necessary to care for residents competently during both day-to-day	F	Standard survey

	operations (including nights and weekends) and emergencies.		
F865	Have a plan that describes the process for conducting QAPI and QAA activities.	F	Standard survey
F880	Provide and implement an infection prevention and control program.	F	Standard survey
F609	Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.	E	Complaint
F628	Provide the required documentation or notification related to the resident's needs, appeal rights, or bed-hold policies.	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	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.	E	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.	E	Standard survey
F847	Inform resident or representatives choice to enter into binding arbitration agreement and right to refuse.	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
F610	Respond appropriately to all alleged violations.	D	Complaint
F609	Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.	D	Complaint
F610	Respond appropriately to all alleged violations.	D	Complaint
F637	Assess the resident when there is a significant change in condition	D	Complaint

F640	Encode each resident’s assessment data and transmit these data to the State within 7 days of assessment.	D	Complaint
F641	Ensure each resident receives an accurate assessment.	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
F577	Allow residents to easily view the nursing home's survey results and communicate with advocate agencies.	D	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	Complaint
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
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
F688	Provide appropriate care for a resident to maintain and/or improve range of motion (ROM), limited ROM and/or mobility, unless a decline is for a medical reason.	D	Standard survey
F742	Provide the appropriate treatment and services to a resident who displays or is diagnosed with mental disorder or psychosocial adjustment difficulty, or who has a history of trauma and/or post-traumatic stress disorder.	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

§ 5 Ownership & Chain Context

Ownership record	Chain: THE CHARLY BELLO FAMILY, THE MAZE FAMILY, THE SWAIN FAMILY, & WALTER MYERS (18 facilities); Owner on file: WHITE ASH LLC (organization)
Ownership chain	THE CHARLY BELLO FAMILY, THE MAZE FAMILY, THE SWAIN FAMILY, & WALTER MYERS (18 facilities)
Penalties vs chain average	$30,572 vs $53,109 (0.6× the chain average)
Current deficiencies vs chain average	35 vs 16.3 (2.1× 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	3 / 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/275159
Snapshot SHA-256	b96e2ac5834a2b83fd2ca066d45375d34182e959efdf2bf443d5c4126f69957e
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 275159.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash b96e2ac5834a.
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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relationship. Inspection findings are point-in-time CMS survey results, not a determination that any specific resident was harmed.