HIGHLAND MANOR OF FALLON REHABILITATION LLC

Report ID: CCN 295085
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§ 1 Facility Identity

Facility	HIGHLAND MANOR OF FALLON REHABILITATION LLC
CCN	295085
Location	550 NORTH SHERMAN STREET, FALLON, NV, 89406
Ownership type	For profit - Corporation
Certified beds	102

§ 2 CMS Federal Record

Civil money penalties on file	$90,220
Deficiency citations — current cycle	22 (19% vs prior 24 months (27))
Deficiency citations — prior 24 months	27
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	$90,220
NV state average	$13,076 (this facility is 6.9× the NV average)
National average	$31,239 (this facility is 2.9× 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 22 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
F641	Ensure each resident receives an accurate assessment.	F	Standard survey
F759	Ensure medication error rates are not 5 percent or greater.	E	Standard survey
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.	E	Standard survey
F552	Ensure that residents are fully informed and understand their health status, care and treatments.	D	Standard survey
F604	Ensure that each resident is free from the use of physical restraints, unless needed for medical treatment.	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
F644	Coordinate assessments with the pre-admission screening and resident review program; and referring for services as needed.	D	Standard survey
F655	Create and put into place a plan for meeting the resident's most immediate needs within 48 hours of being admitted	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
F658	Ensure services provided by the nursing facility meet professional standards of quality.	D	Standard survey
F686	Provide appropriate pressure ulcer care and prevent new ulcers from developing.	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
F689	Ensure that a nursing home area is free from accident hazards and provides adequate supervision to prevent accidents.	D	Standard survey
F699	Provide care or services that was trauma informed and/or culturally competent.	D	Standard survey
F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	D	Standard survey
F865	Have a plan that describes the process for conducting QAPI and QAA activities.	D	Standard survey
F880	Provide and implement an infection prevention and control program.	D	Standard survey
F909	Regularly inspect all bed frames, mattresses, and bed rails (if any) for safety; and all bed rails and mattresses must attach safely to the bed frame.	D	Standard survey
F684	Provide appropriate treatment and care according to orders, resident's preferences and goals.	D	Complaint
F835	Administer the facility in a manner that enables it to use its resources effectively and efficiently.	D	Complaint
F839	Employ staff that are licensed, certified, or registered in accordance with state laws.	D	Complaint

§ 5 Ownership & Chain Context

Ownership record	Chain: THE CHARLY BELLO FAMILY, THE MAZE FAMILY, THE SWAIN FAMILY, & WALTER MYERS (18 facilities); Owner on file: MAHRT, DAVID (individual)
Ownership chain	THE CHARLY BELLO FAMILY, THE MAZE FAMILY, THE SWAIN FAMILY, & WALTER MYERS (18 facilities)
Penalties vs chain average	$90,220 vs $53,109 (1.7× the chain average)
Current deficiencies vs chain average	22 vs 16.3 (1.3× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	1 / 5 (state avg 3.2 · US avg 3)
Health inspection	1 / 5 (state avg 2.9 · US avg 2.8)
Staffing	1 / 5 (state avg 3.1 · US avg 2.9)
Quality measures (QM)	4 / 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/295085
Snapshot SHA-256	dd187d724e19987057a2fea26ec224316e972eee6404c7a2df68412f1c113c8a
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 295085.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash dd187d724e19.
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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