# MEADOWVIEW REHABILITATION AND NURSING CENTER

Report ID: CCN 395296
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## § 1 Facility Identity

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|---|---|
| Facility | MEADOWVIEW REHABILITATION AND NURSING CENTER |
| CCN | 395296 |
| Location | 9209 RIDGE PIKE, WHITE MARSH, PA, 19128 |
| Ownership type | For profit - Corporation |
| Certified beds | 244 |

## § 2 CMS Federal Record

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|---|---|
| Civil money penalties on file | $79,414 |
| Deficiency citations — current cycle | 14 (up from 0 in the prior 24 months) |
| Deficiency citations — prior 24 months | 0 |
| Immediate Jeopardy — current cycle | 0 |
| Actual-harm (G+) citations — current cycle | 1 |
| Special Focus Facility status | Not listed |
| Abuse icon | No |

## § 3 Federal Penalties in Context

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|---|---|
| This facility — penalties on file | $79,414 |
| PA state average | $25,102 (this facility is 3.2× the PA average) |
| National average | $31,239 (this facility is 2.5× 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 14 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 |
|---|---|---|---|
| F692 | Provide enough food/fluids to maintain a resident's health. | G | Complaint |
| F804 | Ensure food and drink is palatable, attractive, and at a safe and appetizing temperature. | E | 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 | Complaint |
| F842 | Safeguard resident-identifiable information and/or maintain medical records on each resident that are in accordance with accepted professional standards. | D | Complaint |
| F684 | Provide appropriate treatment and care according to orders, resident’s preferences and goals. | D | Complaint |
| F645 | PASARR screening for Mental disorders or Intellectual Disabilities | 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 |
| F684 | Provide appropriate treatment and care according to orders, resident’s preferences and goals. | D | Standard survey |
| F697 | Provide safe, appropriate pain management for a resident who requires such services. | D | Standard survey |
| F808 | Ensure therapeutic diets are prescribed by the attending physician and may be delegated to a registered or licensed dietitian, to the extent allowed by State law. | D | Standard survey |
| F847 | Inform resident or representatives choice to enter into binding arbitration agreement and right to refuse. | D | Standard survey |
| F622 | Not transfer or discharge a resident without an adequate reason; and must provide documentation and convey specific information when a resident is transferred or discharged. | D | Complaint |

| | | | |
|---|---|---|---|
| F623 | Provide timely notification to the resident, and if applicable to the resident representative and ombudsman, before transfer or discharge, including appeal rights. | 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 |

## § 5 Ownership & Chain Context

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|---|---|
| Ownership record | Chain: JONATHAN BLEIER (18 facilities); Owner on file: WM HOLDINGS LLC (organization) |
| Ownership chain | JONATHAN BLEIER (18 facilities) |
| Penalties vs chain average | $79,414 vs $30,939 (2.6× the chain average) |
| Current deficiencies vs chain average | 14 vs 12.0 (1.2× the chain average) |

## § 6 CMS Care Compare Star Ratings

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|---|---|
| Overall | 2 / 5 (state avg 3 · US avg 3) |
| Health inspection | 2 / 5 (state avg 2.8 · US avg 2.8) |
| Staffing | 3 / 5 (state avg 3.1 · US avg 2.9) |
| Quality measures (QM) | 4 / 5 (state avg 3.6 · US avg 3.7) |

## § 7 Record Provenance

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| CMS data as of | Jun 2026 |
| Independent verification | https://www.medicare.gov/care-compare/details/nursing-home/395296 |
| Snapshot SHA-256 | 25835c59d973de776425112d15eda639ac074976af7cd32fb94de8e4f88eee4a |
| 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 395296.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 25835c59d973.
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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