AUSTIN WELLNESS & REHABILITATION

Report ID: CCN 455799
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§ 1 Facility Identity

Facility	AUSTIN WELLNESS & REHABILITATION
CCN	455799
Location	11406 RUSTIC ROCK DRIVE, AUSTIN, TX, 78750
Ownership type	For profit - Individual
Certified beds	120

§ 2 CMS Federal Record

Civil money penalties on file	$166,205
Deficiency citations — current cycle	17 (89% vs prior 24 months (9))
Deficiency citations — prior 24 months	9
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	$166,205
TX state average	$49,788 (this facility is 3.3× the TX average)
National average	$31,239 (this facility is 5.3× 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
F656	Develop and implement a complete care plan that meets all the resident's needs, with timetables and actions that can be measured.	E	Complaint
F880	Provide and implement an infection prevention and control program.	E	Complaint
F550	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.	E	Standard survey
F578	Honor the resident's right to request, refuse, and/or discontinue treatment, to participate in or refuse to participate in experimental research, and to formulate an advance directive.	E	Standard survey
F804	Ensure food and drink is palatable, attractive, and at a safe and appetizing temperature.	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
F880	Provide and implement an infection prevention and control program.	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
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
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
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.	D	Complaint

F609	Timely report suspected abuse, neglect, or theft and report the results of the investigation to proper authorities.	D	Complaint
F558	Reasonably accommodate the needs and preferences of each resident.	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
F679	Provide activities to meet all resident's needs.	D	Standard survey
F692	Provide enough food/fluids to maintain a resident's health.	D	Standard survey
F755	Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist.	D	Standard survey

§ 5 Ownership & Chain Context

Ownership record	Chain: CORYELL COUNTY MEMORIAL HOSPITAL AUTHORITY (9 facilities); Owner on file: CORYELL COUNTY MEMORIAL HOSPITAL AUTHORITY (organization)
Ownership chain	CORYELL COUNTY MEMORIAL HOSPITAL AUTHORITY (9 facilities)
Penalties vs chain average	$166,205 vs $41,114 (4.0× the chain average)
Current deficiencies vs chain average	17 vs 6.1 (2.8× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	1 / 5 (state avg 2.7 · US avg 3)
Health inspection	1 / 5 (state avg 2.8 · US avg 2.8)
Staffing	2 / 5 (state avg 1.8 · US avg 2.9)
Quality measures (QM)	2 / 5 (state avg 3.8 · US avg 3.7)

§ 7 Record Provenance

CMS data as of	Jun 2026
Independent verification	https://www.medicare.gov/care-compare/details/nursing-home/455799
Snapshot SHA-256	662c13ab6b206653c4d9c34085dd778983387afe8f0d3149f93a5d9be195e980
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 455799.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 662c13ab6b20.
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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