Wisconsin Rapids Health Services

Report ID: CCN 525212
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§ 1 Facility Identity

Facility	Wisconsin Rapids Health Services
CCN	525212
Location	1350 River Run Dr, Wisconsin Rapids, WI, 54494
Ownership type	For profit - Limited Liability company
Certified beds	114

§ 2 CMS Federal Record

Civil money penalties on file	$74,861
Deficiency citations — current cycle	17 (325% vs prior 24 months (4))
Deficiency citations — prior 24 months	4
Immediate Jeopardy — current cycle	1
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	$74,861
WI state average	$39,833 (this facility is 1.9× the WI average)
National average	$31,239 (this facility is 2.4× 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
F686	Provide appropriate pressure ulcer care and prevent new ulcers from developing.	**J · Immediate Jeopardy**	Complaint
F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	F	Standard survey
F812	Procure food from sources approved or considered satisfactory and store, prepare, distribute and serve food in accordance with professional standards.	E	Complaint
F623	Provide timely notification to the resident, and if applicable to the resident representative and ombudsman, before transfer or discharge, including appeal rights.	E	Standard survey
F880	Provide and implement an infection prevention and control program.	E	Standard survey
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
F755	Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist.	D	Complaint
F908	Keep all essential equipment working safely.	D	Complaint
F637	Assess the resident when there is a significant change in condition	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
F661	Ensure necessary information is communicated to the resident, and receiving health care provider at the time of a planned discharge.	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
F755	Provide pharmaceutical services to meet the needs of each resident and employ or obtain the services of a licensed pharmacist.	D	Standard survey
F758	Implement gradual dose reductions(GDR) and non-pharmacological interventions, unless contraindicated, prior to initiating or instead of continuing psychotropic medication; and PRN orders for psychotropic medications are only used when the medication is necessary and PRN use is limited.	D	Standard survey
F550	Honor the resident's right to a dignified existence, self-determination, communication, and to exercise his or her rights.	D	Complaint

§ 5 Ownership & Chain Context

Ownership record	Chain: NORTH SHORE HEALTHCARE (59 facilities); Owner on file: NSHR OPERATIONS LLC (organization)
Ownership chain	NORTH SHORE HEALTHCARE (59 facilities)
Penalties vs chain average	$74,861 vs $16,788 (4.5× the chain average)
Current deficiencies vs chain average	17 vs 8.0 (2.1× the chain average)

§ 6 CMS Care Compare Star Ratings

Overall	1 / 5 (state avg 3 · US avg 3)
Health inspection	1 / 5 (state avg 2.8 · US avg 2.8)
Staffing	4 / 5 (state avg 3.7 · US avg 2.9)
Quality measures (QM)	1 / 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/525212
Snapshot SHA-256	7bc8f6d70f10119e38cb823f960113d71d148e38d6363121650661fdacea9d78
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 525212.
3. Cite this snapshot as “CMS Care Compare, as of Jun 2026” — integrity hash 7bc8f6d70f10.
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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