BR Insiders 2026 Summer Series

Skin Integrity Post Acute Pressure Ulcer Injury (Pressure Ulcer New or Worsening)

aegis therapies

BROAD RIVER SIMPLIFY SUCCESS

July 2026

APPROVAL STATEMENT DISCLOSURE

- This nursing continuing professional development activity was approved by Broad River Rehab, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation.
- This course has been approved for 0.5 contact hours.

CONFLICT OF INTEREST DISCLOSURE

- Broad River Rehab is not charging for this educational offering and has no financial or other conflicts of interest regarding this program.

SUCCESSFUL COMPLETION REQUIREMENTS

- **Live-Virtual**
  - To obtain nursing contact hours, you must participate in the entire program, participate in audience polling and/or Q&A and complete the evaluation.

DISCLOSURE OF THE EXPIRATION DATE FOR AWARDING CONTACT HOURS FOR ENDURING PROGRAMS

- Contact hours for this program will not be awarded after 1 week.

Learning Objectives

- *Identify how the Numerator, Denominator, Exclusions, & Covariates are used to calculate the measure*
- *Utilize the SNF Quality Reporting Program Manual & IQIES Reporting to apply the methodology for the measure*
- *Apply knowledge to Facility IDT practice & QI efforts*

Resources

- *Skilled Nursing Facility Quality Reporting Program Measure Calculations and Reporting User's Manual*
- *Quality Measures | CMS*
- *Design for Care Compare Nursing Home Five-Star Quality Rating System: Technical Users' Guide April 2026*
- *Minimum Data Set 3.0 Resident Assessment Instrument User's Manual v1.20.1*
- *Nursing Homes | CMS Survey Critical Element Pathways*
- *Medicare State Operations Manual*

Section 1: Short Stay (SS) Quality Measures

Table 2-1
Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury
(CMS ID: S038.02) (CMS Measures Inventory Tool [CMIT] Measure ID: 121[7]

This quality measure is calculated using the SNF Quality Reporting Program measure Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury (CMS ID: S038.02). To review the measure logic specifications for CMS ID: S038.02, please refer to the SNF Quality Reporting Program Measure Calculations and Reporting User's Manual V7.0 on the SNF QRP website[8] under the Downloads section at the bottom of the page. The measure logical specifications can be found in **Chapter 8, Table 8-3.**

[7] This measure is used in the Five-Star Quality Rating System.
[8] Please refer to the SNF Quality Reporting Program Measure Calculations and Reporting User's Manual V7.0 on the SNF QRP Measures and Technical Information website: https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/Skilled-Nursing-Facility-Quality-Reporting-Program/SNF-Quality-Reporting-Program-Measures-and-Technical-Information.html

- ✓ ***Link: Skilled Nursing Facility Quality Reporting Program Measure Calculations and Reporting User's Manual***

"Help!! I'm in the Quality Measure Manual. Why can't I find the specifications for S038.02?!"

***S038.02 is a QRP measure and part of the Quality Measure 5-Star. Specifications are in the QRP manual.**

Table 8-3
Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury (CMS ID: S038.02)[36]

Measure Description
This measure reports the percentage of Medicare Part A SNF stays with Stage 2-4 pressure ulcers, or unstageable pressure ulcers due to slough/eschar, non-removable dressing/device, or deep tissue injury, that are new or worsened since admission. The measure is calculated by reviewing a resident's MDS pressure ulcer discharge assessment data for reports of Stage 2-4 pressure ulcers, or unstageable pressure ulcers due to slough/eschar, non-removable dressing/device, or deep tissue injury, that were not present or were at a lesser stage at the time of admission.
Measure Specifications[37]
If a resident has multiple Medicare Part A SNF stays during the target 12 months, then all stays are included in this measure.

Is it new, did it get worse, or both?

Key Specifications:

- Traditional Medicare Part A SNF Stays (only)
- Residents may have multiple Part A SNF stays during the target 12 months. Each stay is included.
- Section M of the Discharge MDS is compared to the initial PPS 5-Day assessment coding.
- Identifies Pressure Ulcers NOT present or at a LESSER stage when compared to admission.
- Includes Stage 2-4 Pressure Ulcers & all Unstageable Pressure Ulcers located in Section M.

✓ Skilled Nursing Facility (SNF) Quality Reporting Program (QRP) Training | CMS

Stage 1 Pressure Ulcers do **NOT** impact S038.02

CMS QRP POCKET GUIDE

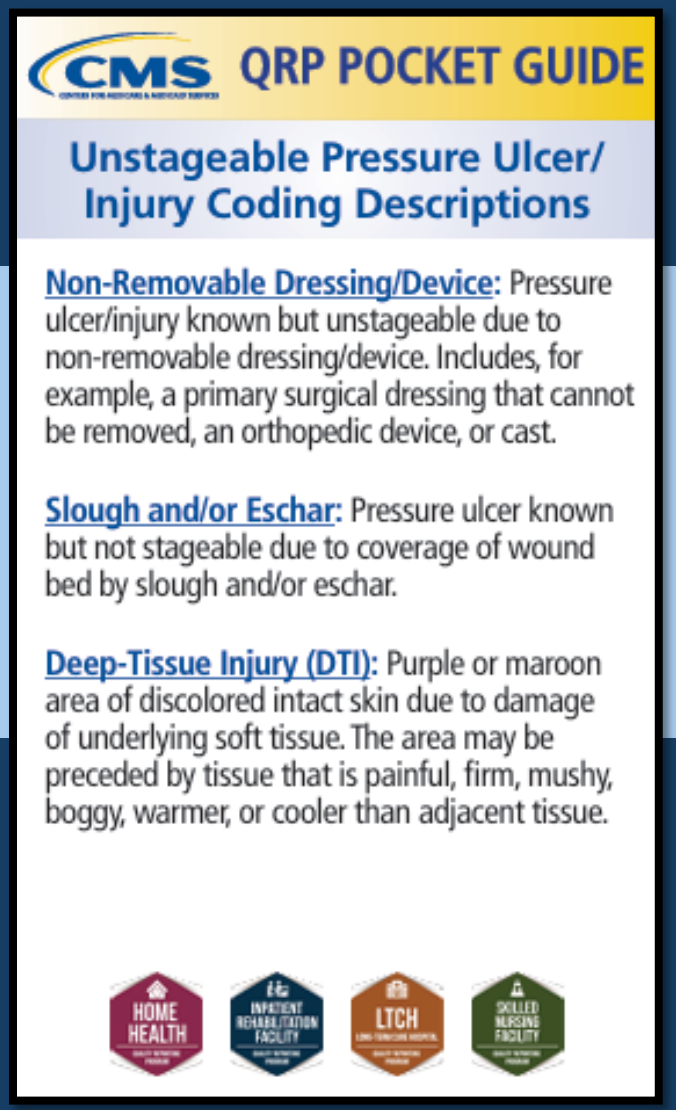
Pressure Ulcer/Injury Coding Stages

Stage 1: Observable pressure-related alteration of intact skin wi[illegible]hable redness of a localized area [illegible]over a[illegible]ny prominence; may include c[illegible]nges [illegible]kin [illegible]mperature, tissue consistency ar[illegible]r sens[illegible]arkly pigmented skin may not hav[illegible]blanching; in dark skin tones only, it may appear with persistent blue or purple hues.

Stage 2: Partial thickness loss of dermis presenting as a shallow open ulcer with a red or pink wound bed, without slough or bruising. May also present as an intact or open/ruptured blister.

Stage 3: Full thickness tissue loss. Subcutaneous fat may be visible, but bone, tendon, or muscle is not exposed. Slough may be present but does not obscure the depth of tissue loss. May include undermining and tunneling.

Stage 4: Full thickness tissue loss with exposed bone, tendon, or muscle. Slough or eschar may be present on some parts of the wound bed. Often includes undermining and tunneling.



CMS QRP POCKET GUIDE

Unstageable Pressure Ulcer/ Injury Coding Descriptions

Non-Removable Dressing/Device: Pressure ulcer/injury known but unstageable due to non-removable dressing/device. Includes, for example, a primary surgical dressing that cannot be removed, an orthopedic device, or cast.

Slough and/or Eschar: Pressure ulcer known but not stageable due to coverage of wound bed by slough and/or eschar.

Deep-Tissue Injury (DTI): Purple or maroon area of discolored intact skin due to damage of underlying soft tissue. The area may be preceded by tissue that is painful, firm, mushy, boggy, warmer, or cooler than adjacent tissue.

HOME HEALTH | INPATIENT REHABILITATION FACILITY | LTCH | SKILLED NURSING FACILITY

Table 8-3
Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury (CMS ID: S038.02)[36]

Measure Description

This measure reports the percentage of Medicare Part A SNF stays with Stage 2-4 pressure ulcers, or unstageable pressure ulcers due to slough/eschar, non-removable dressing/device, or deep tissue injury, that are new or worsened since admission. The measure is calculated by reviewing a resident's MDS pressure ulcer discharge assessment data for reports of Stage 2-4 pressure ulcers, or unstageable pressure ulcers due to slough/eschar, non-removable dressing/device, or deep tissue injury, that were not present or were at a lesser stage at the time of admission.

Measure Specifications[37]

If a resident has multiple Medicare Part A SNF stays during the target 12 months, then all stays are included in this measure.

Numerator

The numerator is the number of Medicare Part A SNF stays (Type 1 SNF Stays only) in the denominator for which the discharge assessment indicates one or more new or worsened Stage 2-4 pressure ulcers, or unstageable pressure ulcers due to slough/eschar, non-removable dressing/device, or deep tissue injury, compared to admission.

1. Stage 2 (M0300B1) - (M0300B2) > 0, OR
2. Stage 3 (M0300C1) - (M0300C2) > 0, OR
3. Stage 4 (M0300D1) - (M0300D2) > 0, OR
4. Unstageable – Non-removable dressing/device (M0300E1) – (M0300E2) > 0, OR
5. Unstageable – Slough and/or eschar (M0300F1) – (M0300F2) > 0, OR
6. Unstageable – Deep tissue injury (M0300G1) – (M0300G2) > 0

Denominator

The denominator is the number of Medicare Part A SNF stays (Type 1 SNF Stays only) in the selected time window for SNF residents ending during the selected time window, except those that meet the exclusion criteria.

Exclusions

Medicare Part A SNF stays are excluded if:

1. Data on new or worsened Stage 2, 3, 4, and unstageable pressure ulcers, including deep tissue injuries, are missing [-] at discharge, i.e.:
   a. (M0300B1 = [-] or M0300B2 = [-]) and (M0300C1 = [-] or M0300C2 = [-]) and (M0300D1 = [-] or (M0300D2 = [-]) and (M0300E1 = [-] or M0300E2 = [-]) and (M0300F1 = [-] or M0300F2 = [-]) and (M0300G1 = [-] or M0300G2 = [-])
2. The resident died during the SNF stay (i.e., Type 2 SNF Stays).
   a. Type 2 SNF Stays are SNF stays with a PPS 5-Day Assessment (A0310B = [01]) and a matched Death in Facility Tracking Record (A0310F = [12]).

(continued)

Table 8-3 (continued)
Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury (CMS ID: S038.02)

Covariates

1. Functional Mobility Admission Performance:

   Coding of dependent or substantial/maximal assistance for the functional mobility item Lying to Sitting on Side of Bed at admission

   a. Covariate = [1] (yes) if GG0170C1 = [01, 02, 07, 09, 10, 88] ([01] = Dependent, [02] =Substantial/maximal assistance, [07] = Resident refused, [09] = Not applicable, [10] = Not attempted due to environmental limitations, [88] = Not attempted due to medical condition or safety concerns)

   b. Covariate = [0] (no) if GG0170C1 = [03, 04, 05, 06, -] ([03] =Partial/moderate assistance, [04] =Supervision or touching assistance, [05] =Setup or clean-up assistance, [06] = Independent, [-] =No response available)

2. Bowel Incontinence:

   Bowel Continence (H0400) at admission

   a. Covariate = [1] (yes) if H0400 = [1, 2, 3] ([1] = Occasionally incontinent, [2] = Frequently incontinent, [3] = Always incontinent)

   b. Covariate = [0] (no) if H0400 = [0, 9, -] ([0] = Always continent, [9] = Not rated, [-] = Not assessed/no information)

3. Peripheral Vascular Disease / Peripheral Arterial Disease or Diabetes Mellitus:

   a. Covariate = [1] (yes) if any of the following are true:

      i. Active Peripheral Vascular Disease (PVD) or Peripheral Arterial Disease (PAD) in the last 7 days (I0900 = [1] (checked))

      ii. Active Diabetes Mellitus (DM) in the last 7 days (I2900 = [1] (checked))

   b. Covariate = [0] (no) if I0900 = [0, -] AND I2900 = [0, -] ([0] = No, [-] = No response available)

4. Low body mass index (BMI), based on height (K0200A) and weight (K0200B):

   a. Covariate = [1] (yes) if BMI ≥ [12.0] AND ≤ [19.0]

   b. Covariate = [0] (no) if BMI < [12.0] OR BMI > [19.0]

   c. Covariate = [0] (no) if K0200A = [0, 00, -] OR K0200B = [-] ([-] = not assessed/no information)

   Where: BMI = (weight * 703 / height^2) = ([K0200B] * 703) / (K0200A^2) and the resulting value is rounded to one decimal place.[38]

See covariate details in ***Table RA-3*** and ***Table RA-4*** in the associated Risk-Adjustment Appendix File.

NUMERATOR

Numerator

The numerator is the number of Medicare Part A SNF stays (Type 1 SNF Stays only) in the denominator for which the discharge assessment indicates one or more new or worsened Stage 2-4 pressure ulcers, or unstageable pressure ulcers due to slough/eschar, non-removable dressing/device, or deep tissue injury, compared to admission.

1. Stage 2 (M0300B1) - (M0300B2) > 0, OR
2. Stage 3 (M0300C1) - (M0300C2) > 0, OR
3. Stage 4 (M0300D1) - (M0300D2) > 0, OR
4. Unstageable – Non-removable dressing/device (M0300E1) – (M0300E2) > 0, OR
5. Unstageable – Slough and/or eschar (M0300F1) – (M0300F2) > 0, OR
6. Unstageable – Deep tissue injury (M0300G1) – (M0300G2) > 0

Measure Description	CMS ID	Numerator	Denominator
Pressure Ulcer/Injury[2]	S038.02	3	200

Question	Answer
○ **Who is included in the Numerator for this measure?**	**Type 1 Part A SNF Stays (only)** in which the Discharge MDS includes **new and/or worsened** Pressure Ulcers (Stage 2-4 or Unstageable) when compared to admission
○ **What is a "Type 1 SNF Stay"?**	○ **Type 1 SNF Stay** = A SNF stay with a matched pair of PPS 5-Day Assessment (A0310B = [01]) & PPS Discharge Assessment (A0310H = [1]) with **NO** "Death in Facility" tracking record (A0310F = [12]) within the SNF stay
○ **What is a "Type 2 SNF Stay"?**	○ **Type 2 SNF Stay** = A SNF stay with a PPS 5-Day Assessment (A0310B = [01]) & a matched "Death in Facility" tracking record (A0310F = [12])

DENOMINATOR

Denominator

The denominator is the number of Medicare Part A SNF stays (Type 1 SNF Stays only) in the selected time window for SNF residents ending during the selected time window, except those that meet the exclusion criteria.

Measure Description	CMS ID	Numerator	Denominator
Pressure Ulcer/Injury[2]	S038.02	3	200

Question	Answer
○ **Who is included in the Denominator for this measure?**	**Type 1 Part A SNF Stays (only)** in the selected time window for SNF residents ending during the selected time window (except those with exclusions)
○ **Reminder-What is a "Type 1 SNF Stay"?**	○ **Type 1 SNF Stay** = A SNF stay with a matched pair of PPS 5-Day Assessment (A0310B = [01]) & PPS Discharge Assessment (A0310H = [1]) with **NO** "Death in Facility" tracking record (A0310F = [12]) within the SNF stay

EXCLUSIONS

Exclusions

Medicare Part A SNF stays are excluded if:

1. Data on new or worsened Stage 2, 3, 4, and unstageable pressure ulcers, including deep tissue injuries, are missing [-] at discharge, i.e.:
   a. (M0300B1 = [-] or M0300B2 = [-]) and (M0300C1 = [-] or M0300C2 = [-]) and (M0300D1 = [-] or (M0300D2 = [-]) and (M0300E1 = [-] or M0300E2 = [-]) and (M0300F1 = [-] or M0300F2 = [-]) and (M0300G1 = [-] or M0300G2 = [-])
2. The resident died during the SNF stay (i.e., Type 2 SNF Stays).
   a. Type 2 SNF Stays are SNF stays with a PPS 5-Day Assessment (A0310B = [01]) and a matched Death in Facility Tracking Record (A0310F = [12]).

Question	Answer
○ **What is an "Exclusion" as it pertains to S038.02?**	Medicare Part A stays deemed ineligible from measure calculations for outcomes/circumstances considered beyond facility control
○ **What are the Exclusions for this measure?**	○ **MDS Data: Section M (on the Discharge assessment)** **M0300B1/B2** = [-] DASH **M0300C1/C2** = [-] DASH **M0300D1/D2** = [-] DASH **M0300E1/E2** = [-] DASH **M0300F1/F2** = [-] DASH **M0300G1/G2** = [-] DASH ○ **Type 2 SNF Stay:** Resident died during the SNF stay (DIF)

COVARIATES

Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury (CMS ID: S038.02)

Covariates

1. Functional Mobility Admission Performance:

   Coding of dependent or substantial/maximal assistance for the functional mobility item Lying to Sitting on Side of Bed at admission

   a. Covariate = [1] (yes) if GG0170C1 = [01, 02, 07, 09, 10, 88] ([01] = Dependent, [02] =Substantial/maximal assistance, [07] = Resident refused, [09] = Not applicable, [10] = Not attempted due to environmental limitations, [88] = Not attempted due to medical condition or safety concerns)

   b. Covariate = [0] (no) if GG0170C1 = [03, 04, 05, 06, -] ([03] =Partial/moderate assistance, [04] =Supervision or touching assistance, [05] =Setup or clean-up assistance, [06] = Independent, [-] =No response available)

2. Bowel Incontinence:

   Bowel Continence (H0400) at admission

   a. Covariate = [1] (yes) if H0400 = [1, 2, 3] ([1] = Occasionally incontinent, [2] = Frequently incontinent, [3] = Always incontinent)

   b. Covariate = [0] (no) if H0400 = [0, 9, -] ([0] = Always continent, [9] = Not rated, [-] = Not assessed/no information)

3. Peripheral Vascular Disease / Peripheral Arterial Disease or Diabetes Mellitus:

   a. Covariate = [1] (yes) if any of the following are true:

      i. Active Peripheral Vascular Disease (PVD) or Peripheral Arterial Disease (PAD) in the last 7 days (I0900 = [1] (checked))

      ii. Active Diabetes Mellitus (DM) in the last 7 days (I2900 = [1](checked))

   b. Covariate = [0] (no) if I0900 = [0, -] AND I2900 = [0, -] ([0] = No, [-] = No response available)

4. Low body mass index (BMI), based on height (K0200A) and weight (K0200B):

   a. Covariate = [1] (yes) if BMI ≥ [12.0] AND ≤ [19.0]

   b. Covariate = [0] (no) if BMI < [12.0] OR BMI > [19.0]

   c. Covariate = [0] (no) if K0200A = [0, 00, -] OR K0200B = [-] ([-] = not assessed/no information)

   Where: BMI = (weight * 703 / height^2) = ([K0200B] * 703) / (K0200A^2) and the resulting value is rounded to one decimal place.[38]

See covariate details in ***Table RA-3*** and ***Table RA-4*** in the associated Risk-Adjustment Appendix File.

Question	Answer
○ **What is a "Covariate"?**	Pre-existing (generally) factors that may increase the likelihood of an outcome
○ **What are the Covariates for this measure?**	○ **GG0170C1: "Lying to Sitting on Side of Bed" at Admission =** 01, 02, 07, 09, 10, 88 ○ **H0400: Bowel Incontinence =** 1 = Occasionally Incontinent 2 = Frequently Incontinent 3 = Always Incontinent (a ***single*** incontinent episode within the 7-day lookback will capture the covariate) ○ **I0900: PVD/PAD =** Yes ***OR*** **I2900: Diabetes Mellitus =** Yes ○ **K0200A & K0200B =** Low BMI

IQIES Report – Drill Down

iQIES Report

MDS 3.0 Facility-Level Quality Measure (QM) Report

Report Period: 04/01/2026 - 06/30/2026
Comparison Group: 10/01/2025 - 03/31/2026
Report Run Date: 06/30/2026
Data Calculation Date: 06/30/2026
Report Version Number: 3.06

Legend

Note: Dashes represent a value that could not be computed
Note: S = short stay, L = long stay
Note: C = complete; data available for all days selected, I = incomplete; data not available for all days selected
Note: * is an indicator used to identify that the measure is flagged

Facility ID: **Facility Name:** **CCN:** **City/State:**

MDS Measures

Measure Description	CMS ID	Data	Num	Denom	Facility Observed Percent	Facility Adjusted Percent	Comparison Group State Average	Comparison Group National Average	
Pressure Ulcers (L)	N045.02	C	5	183	2.7%	3.6%	6.1%	5.7%	
Phys restraints (L)	N027.02	C	0	193	0.0%	0.0%	0.2%	0.1%	
Falls (L)	N032.02	C	74	193	38.3%	38.3%	46.8%	44.2%	
Falls w/Maj Injury (L)	N013.02	C	2	193	1.0%	1.0%	3.2%	3.4%	
Antipsych Med (S)	N011.03	C	0	39	0.0%	0.0%	1.4%	1.7%	0
Antianxiety/Hypnotic Prev (L)	N033.03	C	1	57	1.8%	1.8%	6.8%	7.4%	23
Antianxiety/Hypnotic % (L)	N036.03	C	41	189	21.7%	21.7%	20.4%	19.7%	63
Behav Sx affect Others (L)	N034.02	C	12	175	6.9%	6.9%	16.7%	18.2%	27
Depress Sx (L)	N030.03	C	172	179	96.1%	96.1%	15.3%	13.9%	98*
UTI (L)	N024.02	C	4	183	2.2%	2.2%	1.6%	1.7%	73
Cath Inser/Left Bladder (L)	N026.03	C	4	166	2.4%	1.8%	1.0%	1.0%	81*
New or Worsened B/B (L)	N046.02	C	65	160	40.6%	37.5%	26.7%	20.1%	94*
Excess Wt Loss (L)	N029.03	C	3	179	1.7%	1.7%	6.9%	5.8%	20
Incr ADL Help (L)	N028.04	C	9	177	5.1%	5.1%	17.6%	14.5%	17
Move Indep Worsens (L)	N035.06	C	1	94	1.1%	1.2%	18.8%	15.8%	10

MDS Hybrid Measures

Measure Description	CMS ID	Numerator	Denominator	Facility Observed Percent	State Average	National Average	National Percentile
Antipsych Med (L)[1]	N047.01	22	125	17.6%	17.6%	15.5%	65

[1] The Percent of Long-Stay Residents Who Received an Antipsychotic Medication measure is based on 3 months of data (10/01/2025 - 12/31/2025) and is calculated using MDS and Medicare/Medicaid claims and encounter data.

SNF Measures

Measure Description	CMS ID	Numerator	Denominator	Facility Observed Percent	Facility Adjusted Percent	National Average
Pressure Ulcer/Injury[2]	S038.02	3	200	1.5%	1.6%	2.6%

[2] The Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury measure is calculated using the SNF QRP measure specifications and is based on 12 months of data (07/01/2025 - 06/30/2026).

SNF Measures

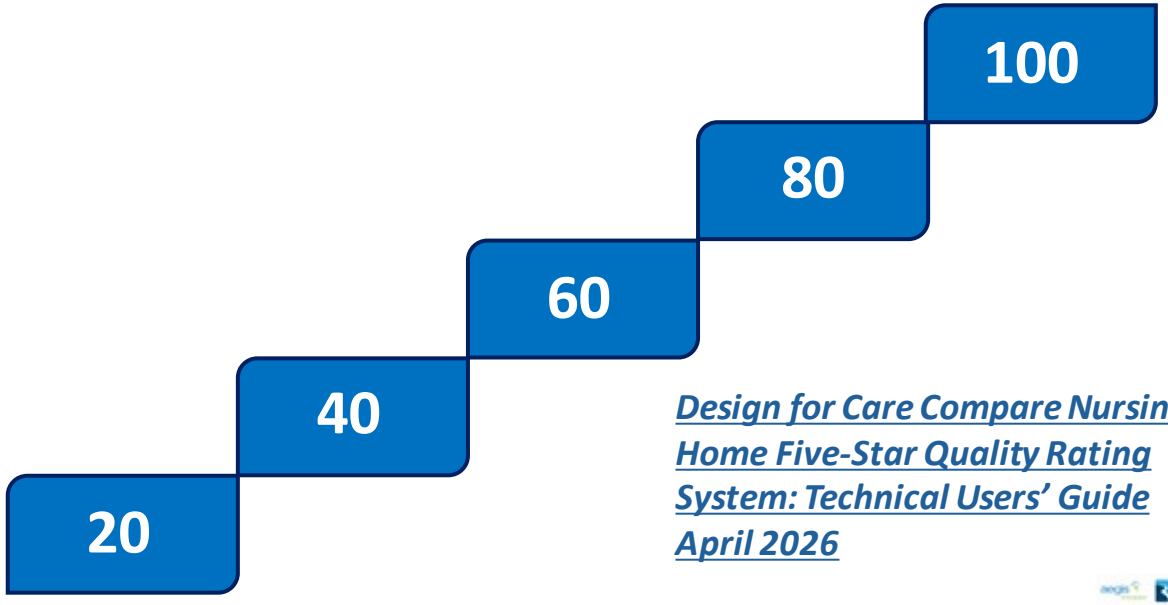
Measure Description	CMS ID	Numerator	Denominator	Facility Observed Percent	Facility Adjusted Percent	National Average
Pressure Ulcer/Injury[2]	S038.02	3	200	1.5%	1.6%	2.6%

[2] The Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury measure is calculated using the SNF QRP measure specifications and is based on 12 months of data (07/01/2025 - 06/30/2026).

CASPER Terms	Definitions
Facility Observed % = 1.5%	**Calculation = Numerator/Denominator x 100** **3/200 = 0.015 x 100 = 1.5%**
Facility Adjusted % = 1.6%	Facility percentage after the "Facility Observed Percent" has been risk adjusted
National Average = 2.6%	Nationwide performance

CMS 5-STAR REPORT & POINT CAPTURE

	Provider [redacted]							US
MDS Short-Stay Measures	2025Q1	2025Q2	2025Q3	2025Q4	4Q avg	Rating Points	4Q avg	4Q avg
Lower percentages are better.								
Percentage of residents who newly received an antipsychotic medication	2.3%	1.1%	1.2%	0.0%	1.2%	60	1.4%	1.5%
The time period for data used in reporting is 7/1/2024 through 6/30/2025.								
Percentage of SNF residents with pressure ulcers/pressure injuries that are new or worsened[1]					1.5%	80	2.7%	2.4%



Design for Care Compare Nursing Home Five-Star Quality Rating System: Technical Users' Guide April 2026

Table A3
Ranges for Point Values for Quality Measures, Using Four Quarter Average Distributions[1]

Quality Measure	Points	Min	Max
Percentage of SNF residents with pressure ulcers/pressure injuries that are new or worsened (short-stay)	100	0.0000	0.0000
	80	0.0001	0.0219
	60	0.0220	0.0395
	40	0.0396	0.0647
	20	0.0648	1.0000

Next Steps

- ✓ *Managing this quality measure and the implications should always be an IDT approach.*
- ✓ *MDS coding accuracy is paramount-determine the etiology of the wound is accurate to support MDS coding and confirm pressure ulcer was present during the assessment lookback period.*
- ✓ *Ensure appropriate interventions for pressure ulcer prevention/management have been initiated.*
- ✓ *Take a proactive approach to the IQIES reports. Double check numerator criteria are met, covariate & exclusion items are appropriately captured, dashes are mitigated, etc.*

Thank you!

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