

**Instructions for Completion of
Length-of-Stay Outlier
Admissions 07/01/95 and After**

Line Field Explanation

- Line 1 Obtain the DRG under which the claim was paid from the hospital's remittance advice (voucher).
- Line 2 Enter the patient length-of-stay (covered days) from claim.
- Line 3 Enter the applicable DRG Outlier Cutoff Threshold (OCT) from Table B for the DRG code listed in line 1.
- Line 4 Subtract line 3 from line 2. If the result is zero or less than zero, go to line 10 and enter zero (0).
- Line 5 Enter the result of the Federal rate portion from Table A, item 6 times the transfer adjusted DRG applicable DRG weight computed on HFSWEB 010, line 5.
- Line 6 Enter the Geometric Mean Length-of-Stay (GLOS) from Table B for the DRG entered in line 2.
- Line 7 Divide line 5 by line 6.
- Line 8 No entry required.
- Line 9 Multiply line 7 times 0.47 Marginal Cost Factor.
- Line 10 Multiply line 4 times line 9. Enter the result from line 10 to line 9, HFSWEB 010.