

**Instructions for Completion of
Transfer Out Adjustment
Admissions 07/01/95 and After**

Line Field Explanation

- Line 1 Enter the patient discharge status code under which the claim was billed.
- Line 2 Obtain the DRG under which the claim was paid from the hospital's remittance advice.
- Line 3 Enter patient length-of-stay (covered days) under which the claim was billed.
- Line 4 Enter Geometric Mean Length of Stay (GLOS) from Table B for the DRG entered in Line 2.
- Line 5 Divide line 3 by line 4.
- Line 6 Enter the result from line 5 or 1.0000, whichever is lower.
- Line 7 Enter 1.0000 if the DRG in line 2 is 385, 456, or 985, otherwise enter zero (0).
- Line 8 Enter the result from line 6 or line 7 whichever is greater. Enter the result from line 8 to line 7, HFSWEB 010.