

**NOTE:** Contains information intended for benefit-eligible State Agency, K12 (School District and Charter School), DTCC and DSU employees. The "Help us help you" article does not apply to Delaware Transit Corporation employees.



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Issue

Benefits Made Easy

e - Newsletter

## "Help us help you" - Important Reminders

### Call To Action

➔ Login to PHRST Employee Self-Service at [employeeselfservice.omb.delaware.gov](http://employeeselfservice.omb.delaware.gov) and do the following:

This ensures you receive important materials and updates from SBO and your benefit plan vendors

**1** Review and update your Personal Contact Information. Choose your Preferred Choice for each category.

Navigation: *DE Employee Self-Service* ➔ *Personal Information*

• Home Address • Phone Numbers • Email Addresses

**2** Consent to receive your W-2 Form online.

Navigation: *DE Employee Self-Service* ➔ *Payroll and Compensation* ➔ *W-2/W-2c Consent*

If you consent after 12/22/2017, your 2017 W-2 will be sent via mail.

**3** Consent to receive your IRS Form 1095-C online.

Navigation: *DE Employee Self-Service* ➔ *Benefits* ➔ *1095-C Consent*

If you consent after 1/12/2018, your 2017 1095-C will be sent via mail.

**4** Consent to receive your Benefits Open Enrollment packet materials and required federal notices online.

Navigation: *DE Employee Self-Service* ➔ *Benefits* ➔ *Benefits Notices Consent*

If you consent after 3/15/2018, your 2018 Open Enrollment materials will be sent via mail.

This is a quicker and more cost effective way to receive materials rather than through U.S. mail

## Being a Wise Health Care Consumer - Save time and money on outpatient lab and imaging services

**DID YOU KNOW?** Imaging (i.e., CT scans, MRI) and laboratory (i.e., blood work) services **cost less** at non-hospital affiliated freestanding facilities and are often more convenient.

### Outpatient High-Tech Imaging Services (i.e., CT scans, MRI)

Average total cost per visit = \$1,249 (Hospital Affiliated Facility) \$453 (Non-Hospital Affiliated Facility)

Average out-of-pocket cost to State of Delaware non-Medicare members\* per visit = \$35 (Hospital Affiliated Facility); \$0 (Non-Hospital Affiliated Facility)

### Outpatient Laboratory Services (i.e., Blood Work)

Average total cost per visit = \$154 (Hospital Affiliated Facility); \$70 (Non-Hospital Affiliated Facility)

Average out-of-pocket cost to State of Delaware non-Medicare members\* per visit = \$10

### Call To Action

➔ Visit [de.gov/healthconsumer](http://de.gov/healthconsumer) to learn more and access lists of in-network, non-hospital affiliated freestanding facilities (including locations and hours of operation).

*\*Includes employees, non-Medicare pensioners, spouses and dependents*

This newsletter is published by the State of Delaware Statewide Benefits Office.

To view other SBO e-Newsletters, visit

<https://ben.omb.delaware.gov/communication.shtml>.