DSRA-BT

Voluntary Life Benefits

Did you know that 61% of Americans have no life insurance coverage? The financial impact of death is not only significant, but the effects can be long-term, lasting five years or more for the surviving family members.

DSRA-BT offers salaried Delphi retirees the opportunity to purchase voluntary life insurance for you and your spouse through Metlife. (NOTE: Delphi hourly retirees are not eligible for this voluntary benefit.) This plan is designed to complement the life insurance benefits you may already have and is 100% retiree-paid. Rates do change every five years on insured's birthdays ending in a 0 or 5. There is a small administrative fee to cover Benistar and DSRA-BT expenses. Notify your bank of the 2024 rate change, if you are set up on auto payments..

If you have elected voluntary coverage in the past, your elected benefit will continue into 2024. **No action is required.** If, however, you wish to make any modifications to your current election (e.g. increase or decrease your elected amount) or wish to elect voluntary term life insurance for the first time, you must complete the MetLife enrollment form and Statement of Health form. If your change is a reduction in benefits, or to cancel your benefits, then only an enrollment form is required, not a Statement of Health. This form can be found on our website - www.dsrabenefittrust.net - or you may contact Benistar, our voluntary life plan administrator, at 1-888-588-6682 to obtain a copy of the form.

The table below provides an overview of the voluntary life benefit. For specific details about the plan, please refer to the summary of benefits on the website at www.dsrabenefittrust.net.

	Retiree	Spouse ¹
Coverage	\$10,000 increments	\$ 10,000 increments
Minimum	\$10,000	\$ 10,000
Maximum	\$120,000	\$ 50,000
i MetLife's Impact of P	remature Death Study, 2010.	The Spousal coverage above \$30,000 requires a physical.

Blue Cross Blue Shield - Monthly DSRA-BT Subsidy

Pre 65 / 2024 Rates (For the months the HCTC is NOT Extended)

One subsidy is available per family with the exception of dual Delphi retiree households who carry separate policies. When a subsidy is available and application has been approved, it is automatically applied by Benistar, our pre-65 plan administrator.

THE HEALTH COVERAGETAX CREDIT (HCTC) HAS EXPIRED.

The Health Coverage Tax Credit (HCTC) has NOT been reauthorized.

HCTC Eligible DSRA-BT Subsidy

Eligibility for a Trust subsidy is generally defined as being a Delphi Salaried Retiree (including spouse and eligible dependents) who retired on or before April I, 2009. The DSRA-BT will continue to provide a health premium subsidy to eligible pre-65 salaried retirees, spouses and dependents who purchase medical insurance from the Trust in 2024.

There are pre-65 salaried retirees that retired before April 02, 2009 that have not initiated their PBGC pension payout. This makes them ineligible for the Trust subsidy. We cannot approve a subsidy for these retirees.

Plan Option	Single	QFM	Family
Under Age 65	\$ 1,579.12	\$1,579.12	\$4,693.03
Under Age 65 & Medicare Disabled BCBS – Silver Plan	\$2,135.00	N/A	N/A
Under Age 65 & Medicare Disabled BCBS MA Diamond	\$364.17	N/A	N/A

Plans are all bundled plans – Medical, Prescription Drug, Dental and Vision

The rates above include the administration fee



Blue Cross Blue Shield – Medical Plan Options Pre 65 / 2024 Rates

COPPER Plan	Medical, RX, High Dental and Vision Rate	Medical, RX, Low Dental and Vision Rate	Medical, RX and Low Dental	Medical and RX only			
Single	\$1,023.15	\$1,015.83	\$1,006.94	\$948.60			
Family	\$3,025.14	\$2,999.51	\$2,970.00	\$2,765.81			
BRONZE Plan	Medical, RX, High Dental and Vision Rate	Medical, RX, Low Dental and Vision Rate	Medical, RX and Low Dental	Medical and RX only			
Single	\$1,243.87	\$1,236.55	\$1,227.66	\$1,169.32			
Family	\$3,687.30	\$3,661.67	\$3,632.16	\$3,427.97			
SILVER Plan	Medical, RX, High Dental and Vision Rate	Medical, RX, Low Dental and Vision Rate	Medical, RX and Low Dental	Medical and RX only			
		Dental and Vision		Medical and RX only \$1,504.57			
Plan	and Vision Rate	Dental and Vision Rate	Low Dental	· ·			
Plan Single	and Vision Rate \$1,579.12	Dental and Vision Rate \$1,571.80	Low Dental \$1,562.91	\$1,504.57 \$4,433.70			
Plan Single Family GOLD	\$1,579.12 \$4,693.03 Medical, RX, High Dental	S1,571.80 \$4,667.40 Medical, RX, Low Dental and Vision	\$1,562.91 \$4,637.89	\$1,504.57 \$4,433.70 Fered as a Bundled			

The rates above include the administration fee



Blue Cross Blue Shield - Dental / Vision (Standalone no Medical) Pre 65 / 2024 Rates

Retirees Under Age 65-

Dental / Vision Dental Only
, , , , , , , , , , , , , , , , , , , ,
\$78.80 \$69.91
rson \$153.35 \$135.57
\$263.58 \$234.07

An administration fee of \$4.25 is included above

An administration fee of \$4.25 is included above

2024 PREMIUM SHEET



The rates below only apply to **pre-65 Medicare disabled** members. BCBSM Medicare Advantage plans are now available to Pre 65 Medicare Disabled members at a much lower premium or cost free to DSRA-BT Subsidy recipients.

SILVER	Medical / High Dental / Vision	Medical /High Dental	Medical / Vision	Medical Only
Single	\$2,372.78	\$2,361.65	\$2,310.51	\$2,303.31

The rates above include the administration fee



Medicare Disabled Retirees or Eligible Dependents Under Age 65 Retirees Post 65

	LOW PLAN		HIGH PLAN						
	Dental / Vision	Dental Only		Dental / Vision	Dental Only				
Single	\$69.79	\$62.59	Single	\$73.72	\$66.52				
Two Person	\$135.33	\$120.93	Two Person	\$143.19	\$128.79				

An administration fee of \$4.25 is included above

An administration fee of \$4.25 is included above

Have Questions or need Assistance,
Please call your Call Center!
Benistar - they are there to help with personalized service!
Call TODAY! 1-888-588-6682

MetLife Insurance Plan Pre 65 Eligible / 2024 Rates

MetLife

Retiree Estimated Monthly Cost i, ii

AGE																
Amount		50-54	5	5-59	6	60-64		65-69		70-74		75-79		80-84		85-89
\$10,000	\$	2.30	\$	4.30	\$	6.60	\$	12.70	\$	20.60	\$	29.83	\$	48.47	\$	63.38
\$20,000	\$	4.60	\$	8.60	\$	13.20	\$	25.40	\$	41.20	\$	59.66	\$	96.94	\$	126.76
\$30,000	\$	6.90	\$	12.90	\$	19.80	\$	38.10	\$	61.80	\$	89.49	\$	145.41	\$	190.14
\$40,000	\$	9.20	\$	17.20	\$	26.40	\$	50.80	\$	82.40	\$	119.32	\$	193.88	\$	253.52
\$50,000	\$	11.50	\$	21.50	\$	33.00	\$	63.50	\$	103.00	\$	149.15	\$	242.35	\$	316.90
\$60,000	\$	13.80	\$	25.80	\$	39.60	\$	76.20	\$	123.60	\$	178.98	\$	290.82	\$	380.28
\$70,000	\$	16.10	\$	30.10	\$	46.20	\$	88.90	\$	144.20	\$	208.81	\$	339.29	\$	443.66
\$80,000	\$	18.40	\$	34.40	\$	52.80	\$	101.60	\$	164.80	\$	238.64	\$	387.76	\$	507.04
\$90,000	\$	20.70	\$	38.70	\$	59.40	\$	114.30	\$	185.40	\$	268.47	\$	436.23	\$	570.42
\$100,000	\$	23.00	\$	43.00	\$	66.00	\$	127.00	\$	206.00	\$	298.30	\$	484.70	\$	633.80
\$110,000	\$	25.30	\$	47.30	\$	72.60	\$	139.70	\$	226.60	\$	328.13	\$	533.17	\$	697.18
\$120,000	\$	27.60	\$	51.60	\$	79.20	\$	152.40	\$	247.20	\$	357.96	\$	581.64	\$	760.56

Spouse Monthly Cost iii

							A	GE								
Amount	5	0-54	5	5-59	6	0-64	6	5-69	7	0-74	7	5-79	8	0-84	8	5-89
\$10,000	\$	2.30	\$	4.30	\$	6.60	\$	12.70	\$	20.60	\$	29.83	\$	48.47	\$	63.38
\$20,000	\$	4.60	\$	8.60	\$	13.20	\$	25.40	\$	41.20	\$	59.66	\$	96.94	\$	126.76
\$30,000	\$	6.90	\$	12.90	\$	19.80	\$	38.10	\$	61.80	\$	89.49	\$	145.41	\$	190.14
\$40,000	\$	9.20	\$	17.20	\$	26.40	\$	50.80	\$	82.40	\$	119.32	\$	193.88	\$ 2	253.52
\$50,000	\$	11.50	\$	21.50	\$	33.00	\$	63.50	\$	103.00	\$	149.15	\$ 2	242.35	\$	316.90

^{&#}x27;The rates above do NOT include the \$3.50 administration fee. A Fee is only added for the Retiree or Surviving Spouse if they elect to continue coverage, vivoluntary life plan rates change in five year increments, i.e. 40, 45, 50, etc. The new rate becomes effective 1/1 after the insured enters a new age category.

IMPORTANT – Spouse of retiree has the option of remaining in the plan at the same rate they paid based on retiree's age until age 80 then move to a whole life plan.

The Health Coverage Tax Credit Expired To date, the Health Coverage Tax Credit (HCTC) has not been extended and funding continues to not be available. If you wish to remain in your VEBA Trust insurance plans, you will pay 100% of the plan premium for each month the HCTC program is not in operation. If Congress extends the HCTC Program after the open enrollment period, there will be a special open enrollment period available at a later date.

viiSpouse costs are based on the retiree's age.