

ANTHEM LIFE INSURANCE COMPANY  
RAIL MEMBER INSTRUCTIONS FOR FILING A VSTD CLAIM  
(Group Policy Number AL00002625)

**January 2012**

1. Get a copy of the Anthem Claim Form.

Copies are available from several sources. You may download a copy from the UTU website. Get a copy from your local treasurer. Contact the UTUIA at 216-228-9400 and ask for the Claims or Policyholder Service department. Contact Anthem at 800-232-0113.

2. Complete Section 1 of the Anthem Life Claim Form.

Be sure to complete all requested information and sign and date the form where indicated. Incomplete forms will be returned to you and will delay payment of your claim. Please double-check that all information is provided and that you print or write your information clearly.

3. Have your Local Chairman (or other local officer) complete Section 2 of the Claim Form

Once you have completed step 2 above, forward your claim form *along with your most recent pay stub and/or itemized earnings statement* to your Local Chairman. Your Local Chairman will complete Section 2. Be sure your Local Chairman completed all the information requested in Section 2, printed his name and title and signed the form, before you move on to the next step. Incomplete information will delay payment of your claim.

Note: Your local number, city, state and zip code (example: L1999, Cleveland, Ohio, 44114) should appear in boxes 35 (a,b,c,d) of Section 2, and be sure the Local Chairman (or other local officer completing the form) includes their phone number in box 34.

**YOU NEED NOT SEND YOUR PAY STUB OR ITEMIZED EARNINGS STATEMENT TO ANTHEM. IT IS ONLY NEEDED BY YOUR LOCAL CHAIRMAN FOR COMPLETING SECTION 2.**

4. Have your physician complete Section 3 of the Claim Form.

5. Make a copy of the completed Claim Form for your records.

6. Mail your completed Claim Form to Anthem at the address shown in the top right corner of the Claim Form. Contact Anthem, using the 800 number provided on the Claim Form, if you have any questions on any aspect of your claim. The UTU Group Policy Number is AL00002625.