



Anthem Voluntary Short Term Disability Plan

Frequently Asked Questions

This document provides a brief overview of the Anthem Life Insurance Company (Anthem) Voluntary Short-Term Disability (VSTD) insurance plan sponsored by the UTU. This document is not comprehensive in nature or intent and does not address all conditions and qualifications to which benefits may be subject. The plan documents, including but not limited to the Group Policy and Certificate, govern the operation of the plan. Airline and Bus crafts are not eligible for this plan.

COVERAGE INFORMATION

How do I know if I am covered under this plan? You are covered if you are an actively at work (at least 30 hours per week) dues paying member of the UTU, and making a premium contribution via payroll deduction. Once covered, if you are placed on active E-49 status, your coverage will be suspended until you are once again actively at work, paying dues and premiums. Being placed on E-49 status because you become disabled does not prevent you from filing a disability claim with Anthem.

What happens if I am on active E-49 status during the initial enrollment – am I covered? No. You are not eligible unless you are actively at work and paying dues. When you return to work you will be eligible for coverage and premiums will be deducted automatically by your treasurer - unless you have at any time waived your coverage by submitting a Waiver form to the International.

What if I don't want or need the coverage – do I still have to pay for it? NO. You may waive (opt out) of the coverage at any time and owe no further premiums. We automatically enroll everyone to be certain that no one who wants coverage is accidentally overlooked. You will have an opportunity to decline coverage, if you so choose. Simply complete the Waiver form and mail it to the International. If we don't receive a Waiver form, we assume you want coverage and will deduct the premiums from your pay.

If I choose to waive (opt out) of the coverage, can I sign up at a later time? YES, but you will be subject to full underwriting (at your expense) and you may not qualify for coverage. Think carefully before deciding to waive coverage. Your decision to "opt out" may be irreversible.

If I own a UTUIA disability plan, will I be able to collect benefits on the UTUIA plan if I purchase the Anthem plan? YES. UTUIA benefits are always payable at full value without offset. Additionally, no group carrier, including Anthem, may reduce their benefits because you own a UTUIA plan. UTUIA benefits are always tax-free.

Will I be taxed on the benefits I receive from Anthem? NO. Since you are paying 100% of the premiums and your premiums are paid with after-tax dollars, any benefits paid to you by Anthem are tax-free.

BENEFIT AND PREMIUM INFORMATION

The RAIL plan pays \$346 per week (approximately \$1,500 per month) and costs \$34.50 per month. You are covered 24/7 for disabilities that result from accident or illness. See the Anthem RAIL flyer for a more detailed description of the benefit information.

What is the basic disability benefit amount for the RAIL plan? The maximum weekly benefit is \$346 per week for up to 26 weeks. This benefit may be reduced if you are receiving disability benefits from sources other than RRB Sickness benefits. You may receive up to \$693 per week (or 67% of your weekly pay, whichever is less) of disability benefits from all sources (UTUIA disability benefits are excluded from the “all sources” calculation), including Anthem, before Anthem may reduce your weekly benefit.

Why does Anthem reduce my benefit if I have other sources of disability income? Most disability plans have a limit on the amount of disability benefits you may collect. Usually it is a percentage of your average pre-disability earnings. This safeguard ensures that individuals are not “over-insured” and without incentive to return to work in a timely fashion. Without this provision, disability insurance would be excessively costly. This only applies to other sources of disability benefits, not income from sources such as savings, 401-K plans and IRA’s.

Am I covered on and off the job? Yes. You are covered 24/7 for disabilities that result from accident or illness.

How long are maternity benefits payable? Typically, benefits are allowed for up to 6 weeks following delivery. Benefits payable would represent 6 weeks minus the 30 day elimination period. If your physician determines, however, that you can’t work prior to delivery or need to be off longer than 6 weeks following delivery, Anthem will request medical records to determine if additional benefits are allowed. Each claim is reviewed on a case by case basis.

May I use vacation time concurrently with disability benefits? YES. Vacation time may be used to supplement disability benefits.

May I collect Railroad Retirement Benefits and disability benefits simultaneously? YES. You may collect disability benefits concurrently with your Railroad Retirement Benefits. Your Anthem disability benefit will be reduced if the combined total disability benefits you receive from all sources (Railroad Retirement, other supplemental group plans, and Anthem) exceed \$693 weekly (approximately \$3,000 monthly). Your Anthem benefit will be reduced by the amount you exceed \$693 weekly.

I belong to a RAIL craft and have a supplemental group disability policy as part of my contract, should I purchase the Anthem plan also? IT DEPENDS. The best thing to do is check with your General Committee for their recommendation. Each supplemental group disability policy is different. In general, the Anthem plan provides a \$346 weekly benefit, and if you qualify for RRB Sickness benefits you may come close to the \$693 weekly limit from all sources. The RRB Sickness benefits generally cut-off at the end of 26 weeks. Your General Committee is best able to advise you on your options and what may work best for your situation.

Will the disability benefit be paid concurrently with an Individual Disability Policy? YES. If you are deemed disabled and entitled to receive disability benefits, any Individual policy that you have purchased (UTUIA or otherwise) may be paid concurrently without a reduction to your Anthem benefits.

Will any other income reduce the disability benefits which I may be paid? There are several other sources of disability income payments that may reduce the benefits you receive from Anthem. Those sources will be detailed in your plan certificate. Also detailed in your plan certificate are sources of income that do not reduce your disability benefit payments from Anthem.

FILING A DISABILITY INCOME CLAIM

If I am covered, how do I qualify to receive disability benefits from the plan? To qualify for benefits from the disability plan:

- You must be under the care of a qualified physician;
- You must be unable to perform the duties of your occupation;
- You must be disabled beyond 30 calendar days;
- Anthem must receive supporting medical information from your doctor and approve your claim; and
- You must not be earning more than 80% of your pre-disability income.

How do I file a claim for benefits? Contact the Anthem Claims Department at **800-232-0113** to request a claim form or visit the UTU website and click on the Disability Insurance link on the homepage. There you may download a claim form along with filing instructions. Your local treasurer may also have a supply of claim forms available. To expedite your claim, follow all the instructions exactly and provide all the requested information. Mail the completed claim form to:

Anthem Life Insurance Company
Disability Claims Service Center
P.O. Box 105426
Atlanta, GA 30348-5426

You must have all three sections of the claim form completed before mailing it to the Anthem Claims Department. You should complete Employee Section I, have your local chairman complete Employer Section II, and have your doctor complete Physician Section III. If the form is incomplete it may be returned to you.

CLAIMS PROCESSING

Who at Anthem will be handling my claim? A team of dedicated Disability Claim Managers (DCM) within Anthem will handle all disability claims.

How do I check the status of my claim? You may contact Anthem's Customer Service Department by calling **800-232-0113**.

Where should my physician or I send information regarding my claim? All information should be mailed to:

Anthem Life Insurance Company
Disability Claims Service Center
P.O. Box 105426
Atlanta, GA 30348-5426

Information may be faxed to:
800-850-0017

How will my claim for disability benefits be evaluated? Within a few business days from your initial claim notification, you may receive a call from the DCM assigned to your claim. The DCM may ask additional questions and describe the steps that will be taken to evaluate your claim for benefits. In evaluating your claim, the DCM will consider several factors including:

- Medical information
- Activities you can and cannot perform
- Your medical treatment plan and prognosis for recovery
- Your job description and functional requirements.

Will Anthem contact my physician? YES. Anthem may need to contact your physician if additional information is necessary to process your claim. The claim form includes a statement of authorization that you sign, giving Anthem permission to contact your physician if necessary. This will avoid delays in the evaluation of your claim. You are ultimately responsible for ensuring that your physician(s) provide Anthem with the needed information.

What are some reasons the processing of my claim may be delayed?

- You failed to call and report your claim in a timely manner
- Your eligibility status with your railroad cannot be confirmed
- Your DCM is having difficulty obtaining necessary information from your physician
- The medical information provided is insufficient and your DCM must request further information
- You failed to provide additional information that your DCM requested

Your DCM will advise you as to the cause of any delay.

What should I expect if my claim is approved? If your claim is approved, benefits will be paid weekly as long as you meet the definition of disability. Checks will generally be processed by Anthem within 2-3 business days of receipt of the necessary supporting documentation. You will also receive an Explanation of Benefits (EOB) statement with each of your benefit checks.

Your benefit payments will end on the day prior to your expected return to work date. You will be expected to return to work on that date

unless medical documentation of your continued disability is received which supports continued benefit payments. Of course, if you return to work prior to the expected date, your benefit payments will end on that date.

Will taxes be withheld from my disability benefits? NO. Your benefits are tax-free.

If approved, how will my disability claim continue to be monitored? Frequent and open communication between you and your DCM is important if you are to return to work quickly and safely. Therefore, your DCM will call you from time to time to discuss your recovery, return to work alternatives, and answer any questions you may have.

The DCM will also follow-up periodically with your physician to see how your treatment plan and recovery are progressing. Additional information from your physician may be necessary to continue disability benefits.

What should I expect if my claim for disability benefits is not approved? If your claim is not approved, you will receive a letter stating the reason(s) for denial. The letter will also outline the appeals process. That process includes a requirement that you send written appeal notification to the Anthem claims unit within 180 days of your receipt of the denial letter. Appeals are normally processed within 45 days.

What should I do when I return to work? Call your DCM immediately with your return to work date. This will avoid overpayments for which you will be required to reimburse to the plan.

This benefit description is intended to be a brief outline of benefits available. It does not include all of the terms of coverage offered by Anthem Life Insurance Company. The entire terms are contained in the contract documents (the applicable Certificate, Policy, and/or Trust Agreement). In the event of a conflict between the contract documents and this benefits description, the contract documents will prevail.

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To better control plan costs and streamline the processes related to the Anthem VSTD plan, the UTU has assumed responsibility for some of the administrative duties typically performed by the insurance carrier. These duties include such things as routine communication of information to our members, billing collecting and remitting monthly premiums, recordkeeping, call center, claim filing assistance, new member enrollments, general correspondence, and billing reconciliations. To offset these costs, a portion of your monthly payment is used for the administrative duties performed by UTU and not for VSTD insurance coverage.