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## **Enrollment is Easy!**

1. Complete Section I of the Enrollment Form
  - Name, Address, etc.
2. Select **ONE** option from Option A through D that best fits your needs.
  - Option A is for the (VSTD) Plan only. If a member opted out or was denied coverage and now desires to get back into the Plan and has no interest in the (VLTD) they should check this box. If a member is currently enrolled in the (VSTD) and has no interest in the (VLTD) no action is required at this time.
  - Option B is for members who desire the (VLTD) coverage only.

**IMPORTANT:** Selecting this option will automatically cancel the member's existing (VSTD) coverage (*no waiver is needed - this will be considered a waiver of coverage "opt out form"*).
  - Option C & D is for members who desire both the (VSTD) and (VLTD) coverage.

**IMPORTANT:** A member who is currently enrolled in the (VSTD) and desires the additional (VLTD) coverage would complete this section. Additionally, any member who previously opted out or was denied coverage in the (VSTD) and now desires coverage on both (VSTD) and (VLTD) would select one of these options.
3. Sign and Date your Application
4. Mail your completed form to:

SMART  
Attn: Updating Department  
24950 Country Club Blvd  
STE 340  
North Olmsted, OH 44070



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