

CLAIM REPORTING AND CONTACTS

Reporting a New Injury

Employee	Contact advice nurse	24/7 Telehealth: (844) 326-2918
Employer	Submit First Notice of Loss (FNOL) claim forms	Email: CWclaims@corvel.com Fax: (866) 774-1846 Mailing: P.O. Box 277550 Sacramento, CA 95827 Questions? (800) 906-4461

Claim Contacts

Office Postings Provider Concerns Claim Reviews	Ted Ursino Account Manager	Phone: (916) 605-5197 Mobile: (916) 439-9998 Email: Ted_Ursino@corvel.com
General Questions	Beth McCormack Claims Supervisor Stephanie Merlino Claims Supervisor	Phone: (916) 605-5202 Email: Beth_McCormack@corvel.com Phone: (916) 605-3860 Email: Stephanie_Merlino@corvel.com
After Hours Contacts/Emergencies	Ted Ursino Account Manager Beth McCormack Claims Supervisor	Phone: (916) 605-5197 Mobile: (916) 439-9998 Phone: (916) 605-5202 Mobile: (916) 693-7353

