Workers’ Compensation Claims Administration – Directory

**NCCSIF Workers' Compensation Team Contacts**

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| **Barbi Minton,** Claims ExaminerB\_minton@lwpclaims.com Phone: 916-610-1856**Members Served**City of Folsom City of GaltCity of JacksonCity of LincolnCity of Placerville | **Amanda Jinks,** Claims Examinera\_jinks@lwpclaims.comPhone: 916-609-3655**Members Served**City of DixonCity of OrovilleCity of Red BluffCity of Rio VistaCity of RocklinCity of Yuba City | **Ned Popovic,** Claims Examinern\_popovic@lwpclaims.com Phone: 916-610-1851**Members Served** City of Anderson City of Auburn City of Colusa City of Corning City of Elk Grove City of Gridley City of Ione City of Marysville City of Nevada City City of Willows Town of Paradise  |
| **Terri Westerman**FM Claims Examinert\_westerman@lwpclaims.com Phone: 916-610-1351 | **General LWP Contact Information:****Main Phone:** (916) 609-3600 **Mailing:** PO Box 349016, Sacramento, CA 95834**General Fax**: (408) 725-0395**To file a new claim email**: FROI@lwpclaims.com |
| **Members Served**All Members – Future medical claims |