

Quick Reference Guide

KEY CONTACTS

WorkersFirst Office

4314 Eagle Point Parkway
Birmingham, AL 35242
(205) 981-0086

CEO

David Feemster
david@workersfirst.net
(205) 981-7728

CFO/CPA

Donna Feemster
(205) 981-9787
Donna@subala.org

Underwriter & Marketing Manager

Emily Sanders
(205) 981-9059
(205) 253-2404 Cell
emily@workersfirst.net

Loss Control

Robert Moore
(205) 981-3029
Cell: (334) 322-9497
robert@workersfirst.net

CCMSI Birmingham Office

(888) 603-4846

Account Manager

John Burns
(601) 608-1006
jburns@ccmsi.com

Claims Supervisor

Kyle Ziglar
(205) 545-2803
kziglar@ccmsi.com

Claims Adjuster

(Lost Time)
Andrew Glass
(205) 545-2801
aglass@ccmsi.com

Claims Adjuster

(Medical Only)
Eric Skipwith
(205) 545-2802
eskipwith@ccmsi.com

Third-Party Administrator

CCMSI serves as the third-party administrator of the Fund. The individuals listed on the left side of this reference guide are available to assist you with claims, underwriting and billing questions.

Loss Control

The fund has a full time loss control team designed to help you develop, implement and/or improve your safety program. For more information, please contact Robert Moore at (205) 981-3029 or by email at robert@workersfirst.net.

Where Do I Send My Contribution Payments?

All payments for your WorkersFirst policy must be mailed to one of the following:

WorkersFirst

P.O. Box 381236
Birmingham, AL 35238
(205) 981-0086

Overnight

4314 Eagle Point Parkway
Birmingham, AL 35242
(205) 981-0086

Billing/Audit Questions?

Contact your WorkersFirst administrator, Cindy Burttram, with any questions about a bill. Her number is (205) 981-3030 or email her at cindy@workersfirst.net.

How Do I Request A Certificate of Insurance?

CCMSI will issue all certificates of insurance. To request a certificate, send the following information to workersfirst@ccmsi.com or fax to (217) 477-6772.

1. Your company name and contact information (Fax/Email/Name)
2. The name, address and contact email info of the certificate holder or company receiving the certificate
3. Description of the operation or activity to be covered by the certificate or special instructions

*** Please contact the underwriter if a Waiver of Subrogation is requested, as additional information is required. ***

Who Do I Contact If I Have Payroll Changes or Changes In Operations?

Contact Cindy Burttram at (205) 981-3030 or cindy@workersfirst.net.

How Do I Report A Claim?

To report a claim you must complete the **first report of injury** form located in your claims kit.

Mail: CCMSI, P.O. Box 1378, Ridgeland, MS 39158-1378

Fax: (601) 899-0160

E-mail: workersfirstnewclaim@ccmsi.com

Your claim will receive immediate attention. If you have questions about your claims, please contact CCMSI's claims department at (888) 603-4846 and ask for your WorkersFirst adjuster.