



Workers' Compensation Claims Administration  
For the **Oryx Insurance Brokerage, Inc.** Program  
Contacts for New York Claims

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**Claim Reporting:**

**Fax First Report to 1-877-217-0603**

**All medical bills, forms, etc. should be mailed to:**

Oryx Insurance Claims  
P. O. Box 2849  
Syracuse, NY 13220