

Student Health Insurance

Graduate International Students
2025 – 2026



Sacred Heart
UNIVERSITY



Enrollment

All graduate international students attending Sacred Heart University will be enrolled directly by the school if registered for classes.

Find a Doctor

1. Visit **Student Health Center - [Yale New Haven NEMG](#)**.
2. Or, search for an in-network provider from the **[Aetna network](#)**.
3. Call to schedule the appointment and indicate your plan uses the **[Aetna PPO network](#)**.
4. Providers can call 833-577-2586 to verify eligibility.

Immediate Care

Emergency Room visits are only for life-threatening emergencies. Non-emergency visits may lead to high costs. For urgent but non-life-threatening care, visit an urgent care clinic.

More information




Learn more about your plan coverage:



Find insurance documents

Login using your member ID [here](#) to access insurance ID card, plan brochure, and confirmation letter.

Contact us

-  customercare@isoa.org
-  +1 212-262-8922
-  800-244-1180

ISO Care for Sacred Heart University 2025-2026

Summary Schedule of Benefits

Annual maximum	Unlimited
Annual deductible	\$100
Maximum out-of-pocket	\$6,350
Coinsurance in-network	90%
Copay per visit:	
Student health center (SHC)	\$0
Primary care physician	\$30
Specialist/Urgent care	\$50
Emergency room copay (waived if admitted)	\$200
Hospitalization copay	\$250
Wellness & preventive care	100% in-network or at SHC
Medical evacuation	\$100,000
Repatriation of remains	\$50,000

Claims Process

Ask doctor to file a claim

Most doctors will file a claim for you. At the time of appointment, provide your insurance ID card.

Submit all claim documents

If your doctor will not file a claim, request itemized bills, payment receipts and fill out the [claim form](#) in order to submit the claim.

Check claim status & claim questions

You can check the status by one of the following:

- Under [My claims](#) section in your ISO account.
- Email to ISOservice@siscobenefits.com.
- Call 833-577-2586.

More information

Click [here](#)

Plan Cost

	Annual	Spring 2026	Late Spring 2026
Coverage Period	8/15/2025-8/14/2026	1/1/2026-8/14/2026	3/15/2026-8/14/2026
Premium	\$1,176	\$735	\$490