



THANK YOU FOR CHOOSING ISO AS YOUR PLAN MANAGER.

Getting started

ISO's customer service team is standing by to assist with questions and concerns. Present this insurance card when visiting any physician or pharmacy.

Find doctors, clinics & hospitals

1. We recommend students to use the student health center at your school.
2. If not available, search for an in-network provider by using either provider networks.
 - ▶ First Health: (800) 226-5116 www.myfirsthealth.com
 - ▶ MultiPlan: (888) 342-7427 www.multiplan.com
3. Call the provider to schedule the appointment and **indicate your plan uses the First Health and MultiPlan network.**

How to file a claim

You should ask the medical provider offices to file the claim to ISO claims department, Wellfleet.

Claim address: Wellfleet, PO Box 15369, Springfield MA, 01115.

If they cannot file a claim on your behalf, you can submit the claim yourself by visiting www.isoa.org/claim_procedure

Check claim status

To check your claim status online, please visit www.wellfleet-iso.com

Pharmacy

Present your Insurance ID card when visiting the pharmacy to receive a discount. To file a prescription claim, please submit the receipt and pharmacy slip to Wellfleet.

CareConnect
(Behavioral and Mental Health Counseling):

All members have 24/7/365 access via telephone to licensed behavioral health clinicians. Just contact **CareConnect (888) 857-5462** and identify yourself as an ISO Member.

Best Health,
ISO Customer Service Team

ISO – For International Students, By International Students



FOR CARE COORDINATION, SEEK CARE FROM YOUR STUDENT HEALTH CENTER, IF AVAILABLE.

Find doctors, clinics and hospitals:

First Health: 800.226.5116 | www.myfirsthealth.com **MultiPlan:** 888.342.7427 | www.multiplan.com

CLAIM STATUS AND ELIGIBILITY: Wellfleet: 855.664.5837

Submit all claims to:

Wellfleet, PO Box 15369
Springfield, MA 01115-1536
EDI Payer ID: 87843

Check Claim Status Online:
www.wellfleet-iso.com

Travel assistance service only:

Inside US/Canada: 866.509.7715 | International Call: 603.328.1728

POSSESSION OF THIS CARD DOES NOT GUARANTEE COVERAGE



First Health Network



MultiPlan
Complementary network

Name:
Rithesh Prodduturi

Insurance ID: 282068307
Effective Date: 6/1/2022

Policy Number:
47250153ION0209

Group Number:
IS1362SH

RX BIN: 012882
RX Group: KU029
RX PCN: KPP

ER Copay: \$350
Deductible per event: \$400

NO REFERRAL REQUIRED

Claim status and eligibility:
Wellfleet: 855.664.5837
Pharmacy help desk:
888.265.7884
Behavior health counselling hotline:
CareConnect: 888.857.5462