

ELIGIBILITY & PLAN RATES

MNP - NOVA SCOTIA

ARTA
BENEFIT PLANS
artabenefits.net

Membership Requirements

To participate in the ARTA Benefit Plans, you must be:

- An MNP employee in good standing for at least two (2) years. Previous employment tenure from an acquired company is accepted
- An affiliate member in good standing with ARTA
- Enrolled in all provincial or territorial health care plans for which you are eligible

NOTE: Refer to artabenefits.net for specific membership requirements. Premiums vary for each province.

Coverage is also available to the surviving spouse of an eligible member.

If you have membership eligibility questions, please contact the Member Support Centre at **1-855-444-ARTA (2782)**.

MNP



MONTHLY PREMIUMS





	BUILD-YOUR-OWN PLANS							
	HEALTH WISE™		TOTAL HEALTH™ HEALTH WISE + TRAVEL		HEALTH WISE PLUS™		ULTIMATE HEALTH™ HEALTH WISE PLUS + TRAVEL	
Drug Maximum per Calendar Year	\$1,200	\$2,000	\$1,200	\$2,000	\$1,200	\$2,000	\$1,200	\$2,000
Age restrictions (based on primary plan member)	UNDER AGE 75							
Single	\$139.00	\$194.00	\$141.00	\$187.25	\$170.25	\$225.00	\$167.50	\$213.75
Couple	\$271.75	\$382.50	\$275.50	\$369.00	\$334.75	\$444.50	\$329.00	\$422.25
Family	\$329.50	\$461.00	\$329.00	\$441.25	\$404.75	\$535.50	\$393.25	\$505.50
Age restrictions (based on primary plan member)	AGE 75 TO 84							
Single	\$139.00	\$194.00	\$197.25	\$248.50	\$170.25	\$225.00	\$223.75	\$274.50
Couple	\$271.75	\$382.50	\$387.75	\$491.25	\$334.75	\$444.50	\$441.25	\$543.50
Family	\$329.50	\$461.00	\$467.25	\$592.75	\$404.75	\$535.50	\$531.50	\$655.50
Age restrictions (based on primary plan member)	AGE 85+							
Single	\$139.00	\$194.00	\$365.25	\$427.50	\$170.25	\$225.00	\$391.50	\$454.50
Couple	\$271.75	\$382.50	\$722.75	\$848.00	\$334.75	\$444.50	\$776.00	\$902.75
Family	\$329.50	\$461.00	\$876.50	\$1,027.00	\$404.75	\$535.50	\$941.00	\$1,091.50

Premium increases based on age group are related to increased emergency travel risk.

MONTHLY DENTAL PREMIUMS

	BUILD-YOUR-OWN PLANS		
	OPTION A	OPTION B	OPTION C
Single	\$79.75	\$64.50	\$48.25
Couple	\$159.75	\$128.00	\$96.75
Family	\$189.75	\$153.00	\$115.75

QUESTIONS?
Please contact the
Member Support
Centre at
1-855-444-ARTA
(2782).

MONTHLY PREMIUMS	INTRO PLAN	COMPREHENSIVE PLANS			
	 PRIMARY HEALTH	 CORE HEALTH	 ESSENTIAL HEALTH	 ENHANCED HEALTH	
	Drug Maximum per Calendar Year	Year 1: \$600 Year 2: \$900 Year 3+: \$1,200	\$1,500	\$2,500	\$5,000
	Age restrictions (based on primary plan member)	UNDER AGE 65			
	Single	\$189.00	\$156.75	\$178.50	\$223.00
Couple	\$351.25	\$311.25	\$353.75	\$441.25	
Family	\$481.75	\$369.50	\$420.00	\$525.25	

ARTA BENEFIT PLANS

General Inquiries

1-855-212-2400
780-822-2400
info@arta.net

Benefit Specific Inquiries

1-855-444-ARTA(2782)
780-989-8709

