ELIGIBILITY & PLAN RATES



TECHNOLOGY PROFESSIONALS CANADA – NEW BRUNSWICK SOCIETY OF CERTIFIED ENGINEERING TECHNICIANS AND TECHNOLOGISTS (NBSCETT)

Membership Requirements

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

- A NBSCETT member in good standing for at least two (2) years
- 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.

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)**.



	BUILD-YOUR-OWN PLANS									
MONTHLY PREMIUMS	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	\$168.00	\$234.25	\$170.50	\$230.00	\$206.00	\$272.00	\$204.75	\$263.75		
Couple	\$328.25	\$461.75	\$333.75	\$453.00	\$403.75	\$536.75	\$401.50	\$521.00		
Family	\$398.50	\$556.75	\$399.00	\$542.75	\$488.75	\$646.75	\$480.75	\$625.00		
Age restrictions (based on primary plan member)	AGE 75 TO 84									
Single	\$168.00	\$234.25	\$229.25	\$294.50	\$206.00	\$272.00	\$263.50	\$328.00		
Couple	\$328.25	\$461.75	\$449.50	\$582.00	\$403.75	\$536.75	\$518.25	\$649.00		
Family	\$398.50	\$556.75	\$540.75	\$701.75	\$488.75	\$646.75	\$623.75	\$782.25		
Age restrictions (based on primary plan member)	AGE 85+									
Single	\$168.00	\$234.25	\$404.50	\$484.25	\$206.00	\$272.00	\$438.75	\$518.75		
Couple	\$328.25	\$461.75	\$799.00	\$959.75	\$403.75	\$536.75	\$867.75	\$1,029.25		
Family	\$398.50	\$556.75	\$968.25	\$1,160.50	\$488.75	\$646.75	\$1,050.50	\$1,243.25		

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

	BUILD-YOUR-OWN PLANS				
MONTHLY DENTAL PREMIUMS	OPTION A	OPTION B	OPTION C		
Single	\$82.75	\$66.50	\$50.50		
Couple	\$165.50	\$133.25	\$100.50		
Family	\$197.25	\$158.25	\$119.50		

	INTRO PLAN	COMPREHENSIVE PLANS				
MONTHLY PREMIUMS	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	\$194.75	\$161.25	\$184.25	\$230.00		
Couple	\$361.50	\$320.25	\$364.25	\$455.00		
Family	\$496.50	\$381.00	\$432.50	\$541.25		



General Inquiries

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

Benefit Specific Inquiries

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

artabenefits.net