ELIGIBILITY & PLAN RATES



PUBLIC AND PRIVATE SECTOR

Membership Requirements

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

- An affiliate member in good standing with ARTA
- A permanent resident of Canada
- 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 TOTAL HEALTH™ HEALTH WISE + TRAVEL ULTIMATE HEALTH™ HEALTH WISE PLUS + TRAVEL HEALTH WISE™ HEALTH WISE PLUS™ **PREMIUMS Drug Maximum** \$1,200 \$2,000 \$1,200 \$2,000 \$1,200 \$2,000 \$1,200 \$2,000 per Calendar Year Age restrictions **UNDER AGE 75** (based on primary plan member) \$185.25 Single \$112.75 \$157.00 \$122.75 \$162.50 \$138.00 \$182.25 \$145.50 \$220.00 \$309.75 \$240.25 \$320.25 \$271.00 \$360.00 \$286.00 \$365.75 Couple **Family** \$267.00 \$373.50 \$286.50 \$382.75 \$327.75 \$433.75 \$341.50 \$437.75 Age restrictions **AGE 75 TO 84** (based on primary plan member) \$138.00 Single \$112.75 \$157.00 \$174.00 \$217.75 \$182.25 \$196.75 \$240.25 Couple \$220.00 \$309.75 \$342.00 \$430.75 \$271.00 \$360.00 \$388.00 \$475.50 **Family** \$267.00 \$373.50 \$412.25 \$520.00 \$327.75 \$433.75 \$467.50 \$573.75 Age restrictions **AGE 85+** (based on primary plan member) \$112.75 \$326.25 \$379.50 \$138.00 \$182.25 \$348.75 Single \$157.00 \$402.75 Couple \$220.00 \$309.75 \$645.50 \$753.00 \$271.00 \$360.00 \$691.25 \$799.75 **Family** \$267.00 \$373.50 \$783.00 \$912.00 \$327.75 \$433.75 \$838.25 \$967.50

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	\$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).

	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	\$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	



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