

RESOLUTION NO. 137-23
OF THE GOVERNING BODY OF THE
YAVAPAI-APACHE NATION

**A Resolution Approving Plan Amendments No. 7 and No. 8 to the Yavapai-
Apache Nation Employee Health Benefit Plan**

- WHEREAS:** The Yavapai-Apache Tribal Council (“Council”) is authorized to represent the Yavapai-Apache Nation (“Nation”) and act on all matters that concern the health and welfare of the Nation, and to make decisions not inconsistent with or contrary to the Constitution of the Yavapai-Apache Nation (“Constitution”) as provided under Article V(a) of the Constitution; and
- WHEREAS:** The Council is authorized to manage the economic affairs of the Nation and its enterprises, and to appropriate and regulate the use of the Nation's funds, under Article V (i) and (k) respectively of the Constitution; and
- WHEREAS:** The Council is authorized to prescribe employee benefits in accordance with the Nation's employment policies and procedures as provided under Article V (p) and (q) of the Constitution; and
- WHEREAS:** The Council has established a program of employee health benefits for the Nation's employees, including the employees of the Nation's Subordinate Economic Organizations (“Employee Health Benefit Plan”); and
- WHEREAS:** The Nation’s Benefit Plans Administrative Committee recommends that the Council amend the Employee Health Benefit Plan, as it was previously adopted on January 1, 2020, to clarify language in the Plan pertaining to Plan coverage for Family Medical Leave Act (FMLA) and non-FMLA leaves of absence for consistency with personnel policies and practice, as set forth in Plan Amendment No. 7 (*attached to this Resolution as Exhibit A and incorporated herein by reference*); and
- WHEREAS:** The Nation’s Benefit Plans Administrative Committee also recommends that the Council amend the Employee Health Benefit Plan to rescind previously approved Amendment No. 2 to the Plan addressing COVID-19 testing as such testing will be covered under the Plan on the same basis as other diagnostic testing, as set forth in Plan Amendment No. 8 (*attached to this Resolution as Exhibit B and incorporated herein by reference*); and
- WHEREAS:** The Council has reviewed the recommended amendments to the Yavapai-Apache Nation Employee Health Benefit Plan (*attached to this Resolution as Exhibits A and B*) and deems it in the Nation’s best interest to approve the same.

NOW THEREFORE BE IT RESOLVED that the Yavapai-Apache Tribal Council, in Council assembled, at which a quorum is present, hereby approves Plan Amendments No. 7 and No. 8 to the Yavapai-Apache Nation Employee Health Benefit Plan (*attached to this Resolution as Exhibits A and B, respectively*).

BE IT FURTHER RESOLVED that the Nation's Benefit Plans Administrative Committee is authorized to take such steps as are necessary to implement Plan Amendments No. 7 and No. 8 as part of the Nation's Employee Health Benefit Plan.

BE IT FINALLY RESOLVED that the Chairwoman and Vice-Chairman, or either of them, are hereby authorized to take such further action as deemed necessary to carry out the intent and purposes of this Resolution.


CERTIFICATION

I hereby certify that the foregoing resolution was adopted by an affirmative vote of the Tribal Council, with a quorum in attendance, presented for approval on August 24 2023, by a vote of 7 7 in favor, 0 opposed and 0 abstaining, pursuant to the authority contained under the Constitution of the Yavapai-Apache Nation as cited above.



Tanya Lewis, Chairwoman

ATTEST:



Karla Reimer, Council Secretary

Approved as to Form:



Office of the Attorney General

EXHIBIT A

Amendment No. 7 to the Yavapai-Apache Nation
Employee Health Benefit Plan

YAVAPAI APACHE NATION EMPLOYEE BENEFIT PLAN

Amendment No. 7 Effective January 1, 2023

The Yavapai Apache Nation Employee Benefit Plan (the “Plan”) is hereby amended as follows:

1. To remove the existing language from the section entitled “If You Take a Leave of Absence – FMLA:”

If You Take a Leave of Absence – FMLA

For Casino Employees, coverage may continue for a limited time, contingent upon payment of any required contributions for employees and/or dependents, when the employee is on an authorized personal leave of absence from the employer and if the employee does not qualify for leave under the Family and Medical Leave Act. In no event will coverage continue for more than ninety (90) days in any calendar year (taken in thirty (30) day increments).

For all other employees, coverage may continue for a limited time, contingent upon payment of any required contributions for employees and/or dependents, when the employee is on an authorized leave of absence from the employer. In no event will coverage continue beyond six (6) weeks in any twelve (12) month period following the date on which the employee's active service ends.

...and replace it with the following:

If You Take a Leave of Absence – FMLA

If you take a leave of absence that is treated by the employer as a Family and Medical Leave Act (“FMLA”) covered absence, your coverage will continue for the duration of your FMLA leave, as long as you continue to pay your share of the cost as required under the employer’s FMLA policies and procedures.

If You Take a Leave of Absence – Non-FMLA

If you take an approved leave of absence (paid or unpaid) that is not a covered FMLA leave, your coverage may continue during your leave, provided you continue to pay your share of the cost.

Coverage under the Plan for any and all periods of FMLA and non-FMLA leave will not exceed 120 days in any twelve (12) month period that begins on the date the employee's active service ends, subject to the following two exceptions: (1) coverage will not end during an FMLA leave if you pay the required costs of coverage, and (2) coverage will extend to the end of a calendar month in which the 120 day coverage period ends if you pay the required costs of coverage.

2. To remove the existing language from the section entitled “How Benefit Extensions Impact COBRA:”

How Benefit Extensions Impact COBRA

If you have a qualifying event that could cause you to lose your coverage, the length of any benefit extension period is generally considered part of your COBRA continuation coverage period and runs concurrently with your COBRA coverage. (Also see “Coverage While You Are Not at Work” in the Plan Overview for additional information.)

If you take Family Medical Leave, COBRA begins;

- at the end of the leave if you do not return after the leave; or
- on the date of termination if you decide to terminate your employment during the leave.

... and replace it with the following:

How Benefit Extensions Impact COBRA

If you have a qualifying event that could cause you to lose your coverage, the length of any benefit extension period is generally considered part of your COBRA continuation coverage period and runs concurrently with your COBRA coverage. (Also see “Coverage While You Are Not at Work” in the Plan Overview for additional information.)

If you take Family and Medical Leave, COBRA begins on the earlier of:

- the date on which coverage ends under the Plan following your FMLA leave, if you do not return after the leave;
- the date on which coverage ends under the Plan as the result of your failure to pay the cost of coverage during your FMLA leave; or
- the date of termination of employment if you terminate your employment during the FMLA leave.

The Plan Document will be amended to reflect these changes. All other terms and conditions of the Plan which are not affected by this Amendment are unchanged.

Approved and Accepted:

Yavapai Apache Nation

By: _____

Title: _____

Date: _____

EXHIBIT B

**Amendment No. 8 to the Yavapai-Apache Nation
Employee Health Benefit Plan**

**YAVAPAI APACHE NATION
EMPLOYEE BENEFIT PLAN**

Amendment No. 8

Effective September 1, 2023

The Yavapai Apache Nation hereby amends the Yavapai Apache Nation Employee Benefit Plan, hereinafter referred to as "Plan. This amendment shall be effective on September 1, 2023.

It is the intent of the Yavapai Apache Nation to modify the terms of the Plan as follows:

- Amendment #2 to the Plan, which addressed testing for COVID-19 and was effective March 1, 2020, is hereby rescinded in its entirety.
 - COVID-19 testing will be covered under the Plan on the same basis as any other diagnostic testing, based on deductible and coinsurance.

All remaining provisions of the Plan, as amended, shall remain in force.

BY: Wangyuan Li DATE: 08.24.23