

**RESOLUTION OF THE  
WHITE MOUNTAIN APACHE TRIBE OF THE  
FORT APACHE INDIAN RESERVATION**

**WHEREAS,** Tribal Council Member, Judy DeHose has presented to the Tribal Council proposed enhancements to the White Mountain Apache Tribe's Health & Welfare Benefit Plan to include optional coverage for dental, vision and term life as described in the attached outline of coverage and costs; and

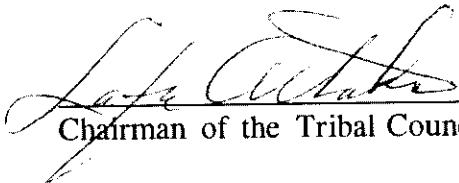
**WHEREAS,** the attached enhancements would be entirely at the option of the Tribal employee; and

**WHEREAS,** the Tribal Council concludes that the enhancements should be made a part of the Health & Welfare Benefit Plan for Tribal employees.


**BE IT RESOLVED** by the Tribal Council of the White Mountain Apache Tribe that it hereby approves and directs that the attached enhancements to the White Mountain Apache Tribe's Health & Welfare Plan be included as an option for Tribal employees.

The foregoing resolution was on July 14, 1994, duly adopted by a vote of nine for and zero against by the Tribal Council of the White Mountain Apache Tribe, pursuant to authority vested in it by Article IV, Section 1 (a), (i), (k), (s), (t) and (u) of the Constitution of the Tribe, ratified by the Tribe September 30, 1993, and approved by the Secretary of the Interior on November 12, 1993, pursuant to Section 16 of the Act of June 18, 1934 (48 Stat. 984).

**ACTING**

  
Chairman of the Tribal Council

**ACTING**

  
Secretary of the Tribal Council

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## ENHANCEMENTS TO THE WHITE MOUNTAIN APACHE TRIBE'S HEALTH & WELFARE PLAN

A. **DENTAL**

1. **HIGHLIGHTS**

- a. Periodontics
- b. Dentures/Bridges
- c. Crowns
- d. Orthodontia

2. **ADDITIONAL COST**

- a. Employee Only                   \$ .86 ppd
- b. Employee & Family             \$2.69 ppd

B. **VISION**

1. **HIGHLIGHTS**

- a. Frames once every 12 months
- b. Tinted or Photochromic Lenses

2. **ADDITIONAL COST**

- a. Employee Only                   \$ .38 ppd
- b. Employee & Family             \$1.54 ppd

C. **TERM LIFE**

1. **HIGHLIGHTS**

- a. Voluntary Term Life Insurance
- b. Group Rates
- c. Underwriting Concessions
- d. Portable

2. **ADDITIONAL COST**

- a. Depends On Amount Desired

**IF THE TRIBE ELECTS TO PAY FOR THE ENTIRE COST OF THE DENTAL AND VISION ENHANCEMENTS, IT WILL HAVE AN ANNUAL FINANCIAL IMPACT OF \$60,000, APPROXIMATELY.**

ppd - (per pay period)