

EXHIBIT A

Health Insurance Opt Out Benefit January 1, 2027 - December 31, 2027		
<i>Type of Insurance Plan</i>	<i>Opt-Out Incentive Paid to Employee *</i>	<i>Payment Frequency</i>
Employee +Family	\$ 3,500	Bi-Weekly (26)
Employee+1/Children	\$ 3,000	Bi-Weekly (26)
Employee Only	\$ 2,500	Bi-Weekly (26)
*Requires annual form approval & proof of alternative insurance		