

Not for Profit Reassignment Procedure (MLR)

May 2014

Generally, participant account reassignments are approved by a Firm Manager (ASD, ML, MD, MP) together with the Workplace Sales Director (WSD).

MetLife Resources business generally will not be reassigned except in limited circumstances. A client cannot be assigned away from an active servicing agent if the agent is the original writing agent or is the original writing agent on one or more additional in-force policies or contracts with the same plan sponsor client. If the servicing agent is not the original writing agent and is not the original writing agent for in-force policies or contracts with the same plan sponsor client, then a Firm Manager and/or RVP may transfer the assigned client away from the active servicing agent.

A Firm Manager must reassign an account from an active servicing agent to a MLR-certified representative in the following circumstances:

- To meet the guidelines of a team agreement when an agent is assigned to a team
- When changing or rebalancing the percentage of team members, in accordance with the provisions of the team agreement.

A Firm Manager **MUST** reassign an account:

- MetLife receives a Broker of Record letter requesting a change in agent or broker. These instances will be reviewed on a case by case basis and requires a selling agreement with agent
- MetLife determines a reassignment is necessary for legal or compliance reasons
- A client that is part of a Deferred Compensation or Defined Contribution Plan, defaults to a MetLife (Unit Reserve Acct) House Account, in which there is an active agent servicing the group.

Reassignments on both the MetLife Annuity Platform(s) as well as the FASCore recordkeeping platform require the completion of separate forms (see sample form included). Representative should establish a relationship with a participant prior to reassignment of accounts to a new representative.

If any reassignment out of the Firm's House Account (MLR Unassigned) is greater than 25 participants, or there will be an aggregate of 100 over a 3 month period to a single FSR or team of FSR, the RVP must send the request to Kumar Das Gupta and Derrick Kelson for final approval.

For the remainder of 2014, the MetLife Premier Client Group management team will not support or authorize any reassignments out of the existing MLR House Accounts. Exceptions only to be made for legal or compliance required reassignments.

Steps for a Reassignment:

- I. Participant Specific Reassignment** request is used to reassign a specific participant from a former agent to another current agent, or to reassign a specific participant from a single agent to multiple agents based on a team selling arrangement.
- II. Provide a reason** for the reassignment request. You must check one of the following as a reason for the reassignment of accounts:
 - Agent termination – replacing with an active agent
 - Agent being added to a team, existing agreement and split of accounts

Agent being removed from a team

New agent(s) being assigned to an account, currently assigned to the firm's house account.

Please note: Reassignments requests from the house account for more than 25 participants require approval by Derrick Kelson or Kumar Das Gupta.

- III. Obtain Authorization** for reassignment requested. A Firm Manager (ASD, ML, MD, MP) is required to approve the reassignment request as well as the Regional Workplace Sales Director. The request must be submitted to the appropriate party from the Workplace Sales Director's email address.
- IV. Provide Agent Specific Information being removed** – The form requires the prior agent DAI, and name, as well as the new agent's or agents' DAI and name(s) and splits, if applicable.
- V. Provide Agent Specific Information being added** – Include new agent information, whether it is for a single representative or for a team assignment based on an existing team selling agreement.
- VI. Provide Specific Participant Account Information-** Provide the plan number, participant social security number, participant name along with the new agent information, and applicable split percentage of the account. A separate excel spreadsheet can be submitted, please mark box at the beginning of the form, along with the file name attached.
- VII. Submission of paperwork** – Forms can ONLY be submitted for processing from the Workplace Sales Director's email address.

Annuity Reassignments should be sent to annuityreass@metlife.com
With *Not for Profit Group Reassignments* in the subject line

FASCore Reassignments should be sent to methome@retirementpartner.com
With *Not for Profit Group Reassignments* in the subject line

MLR Reassignments will only be processed when request is submitted directly from the Workplace Sales Director email address.

MetLife FASCORE Financial Services Representative (Agent) Reassignment Request Form
--

Part I: Type of Request –
☐ Spreadsheet Provided - File Name: _____

Request Details: (Select only one.)	
Participant Specific Reassignment	<input type="checkbox"/> Reassigning specific participant(s) from one agent to another single agent at 100% share. (this option is used for house acct changes) <input type="checkbox"/> Reassigning specific participant(s) from one agent to multiple agents by share percent.
<i>FAScore Plan #</i>	<i>Plan Name:</i>

Part II: Reason for Request –

Request Details: (Select only one.)
<input type="checkbox"/> Agent termination – a new Active (MLR certified) agent has been assigned
<input type="checkbox"/> Agent being added to an existing team split (Detail new agent split by share percent to total 100%)
<input type="checkbox"/> Agent being removed from an existing team split (Detail new agent split by share percent to total 100%)
<input type="checkbox"/> New (MLR certified) agent has been assigned to the participant(s)

Part III: Authorizations and Approvals –

Both sections to be completed or form will be returned for required information.

Firm Manager / Direct Supervisor to provide Name and Check box to acknowledge their approval.

Firm Manager/Direct Supervisor (Agency Sales Director (ASD), Market Leader (ML), Managing Director (MD), or Managing Partner (MP)).
Name of Direct Supervisor approving this request. Please type or print clearly.
<input type="checkbox"/> By checking this box the above Direct Supervisor acknowledges their approval.

Workplace Sales Director (WSD) to provide Name and Check box to acknowledge this request for processing.

Workplace Sales Director (WSD) – WSD for clients associated with the not-for-profit entity and/or have any employee benefit plan.
Name of Workplace Sales Director Please type or print clearly.
<input type="checkbox"/> By checking this box the above Workplace Sales Director acknowledges this request and will forward for processing.

MLR Reassignments will only be processed when request is submitted directly from the Workplace Sales Director email address.

Part IV: Agent information that is being removed –

Request Details:		
Prior Agent DAI/BAI #	Prior Agent Name:	PartnerLink ID:

Part V: New Agent Information –

Agent Assignment Details: <i>(Select only one.)</i>	
<input type="checkbox"/> Single Agent Assignment (100% Share)	<input type="checkbox"/> Multiple Agent Assignment (Total Share must equal 100%)

New Replacing Agent Information (Agent One):	
New Agent Name:	PartnerLink ID:
New Agent DAI and Distribution Channel: <i>(Select only one.)</i>	
<input type="checkbox"/> MetLife Career Agency (MLIFE) DAI #: A _____	<input type="checkbox"/> Broker (IND) BAI #: B _____ (all numeric)
<input type="checkbox"/> New England Financial (NEF) DAI #: B _____	

New Replacing Agent Information (Agent Two):	
New Agent Name:	PartnerLink ID:
New Agent DAI and Distribution Channel: <i>(Select only one.)</i>	
<input type="checkbox"/> MetLife Career Agency (MLIFE) DAI #: A _____	<input type="checkbox"/> Broker (IND) BAI #: B _____ (all numeric)
<input type="checkbox"/> New England Financial (NEF) DAI #: B _____	

New Replacing Agent Information (Agent Three):	
New Agent Name:	PartnerLink ID:
New Agent DAI and Distribution Channel: <i>(Select only one.)</i>	
<input type="checkbox"/> MetLife Career Agency (MLIFE) DAI #: A _____	<input type="checkbox"/> Broker (IND) BAI #: B _____ (all numeric)
<input type="checkbox"/> New England Financial (NEF) DAI #: B _____	

New Replacing Agent Information (Agent Four):	
New Agent Name:	PartnerLink ID:
New Agent DAI and Distribution Channel: <i>(Select only one.)</i>	
<input type="checkbox"/> MetLife Career Agency (MLIFE) DAI #: A _____	<input type="checkbox"/> Broker (IND) BAI #: B _____ (all numeric)
<input type="checkbox"/> New England Financial (NEF) DAI #: B _____	

If additional agents are required due to a multiple share assignment request please provide details with the same information as above for each agent.

Part VI: Sample of required data to be provided:

List all participants that the need to be reassigned. Please provide information for all columns listed below or request will be returned for required information.

Single Agent at 100% Share:

Plan #	Participant SSN	Participant Last Name	Full Agent Name	New DAI #	Share %
9999999-01	111-11-1111	PARKER	William Smith	A01Z1234	100.00

Multiple Agents by Share percent:

If the share % is to be split between multiple agents, please list on separate rows *(whole percentages only)* **total share for each participant must equal 100%.**

Plan #	Participant SSN	Participant Last Name	Full Agent Name	New DAI #	Share %
9999999-01	111-11-1111	PARKER	William Smith	A01Z1234	70.00
9999999-01	111-11-1111	PARKER	Sally Jones	A01Z5678	30.00

If additional space is needed, please provide a complete listing in Excel with the above column headers and formatting as defined above or request will be returned for required information.

Workplace Sales Directors should submit reassignment request to:

FASCore Reassignments should be sent to methome@retirementpartner.com

With *Not for Profit Group Reassignments* in the subject line

Please note, for access to Partnerlink for plans on the FASCore recordkeeping platform, please follow Partnerlink Access Procedures.