Plan Services Fee Form –
Updates / Changes to Existing Plans

Once a pricing offer has been accepted by the client and the Services Agreement has been amended, the associated RMT will need to complete the Plan Services Fee form. This form is required in order to implement the change in pricing fees at Empower and needs to be completed by the RMT and signed. It then needs to be submitted to MLR Pricing and Plan Doc Group for review and signature.

(This form is only to be used when modifying MetLife's fees. Any fees we've agreed to collect for another organization should be modified using the Third-Party Payment Request form).

PLAN SERVICES FEE FORM

The form is comprised of 4 pages with 7 sections that need to be completed as applicable. It is important to remember that the fees are processed quarterly and run on or about the 15th calendar day of the last month of the calendar quarter. Accuracy and clarity of the completed information is very important, since otherwise the form may be rejected by Empower when it is submitted.

Plan Services Fee
Updates / Changes to Existing Plans

MetLife

Metropolitan Life Insurance Company

Things to Know Before You Begin

- This form is used to add, remove, or update the Plan Services Fee on an existing plan only.
- Return completed form to the MLR Pricing Team and Plan Doc Group.
- Fee Changes **will not** be made unless a fully executed services agreement amendment or restatement reflecting the new fee(s) is in place.
- Please allow 20 business days for processing.
- Prior approval by MLR Pricing is required.
- Fees are run on the 15th of the last month of the calendar quarter.

To be completed by RMC/SAE.

SECTION 1 – PLAN/REQUESTER INFORMATION

The following information must be clearly indicated in section 1 of the form:

- Plan Name(s)
- Plan Number(s)
- Requestor name, phone number, and e-mail
- The quarter and year the change is effective (don't use a specific date)

SECTION 1: Plan / Requestor Information

Plan Name	Plan Number
Requestor Name	Requestor Phone Number
Requestor Email	Specify Quarter / Year Request to be Effective

SECTION 2 -REASON FOR REQUEST

Select only one of the options:

- Add New Plan Services Fee .
- Remove Existing Plan Services Fee – only for fees that will no longer apply.
- Change Plan Services Fee – most frequently used and requires completion of Sections 3 and 4.
- Add Wrap Fee to specific fund(s).

SECTION 2: Reason for Request (Please select only one option for Plan Services Fee).

☐	ADD New Plan Services Fee – Complete Section 3
☐	REMOVE Existing Plan Services Fee – Complete Section 4
☐	CHANGE Plan Services Fee – Complete Section 3 to add new fee & Section 4 to remove existing fee
☐	ADD Wrap Fee to specific funds – Complete Section 5 and Section 6 for comments, if applicable

SECTION 3 - ADD NEW PLAN SERVICES FEE

This section has multiple areas that may need to be completed, based on the selection chosen.

I. Pricing Model I: Offset – This pricing model is the one most often being used currently and one that we try to institute for plans that are currently using a Non-Offset pricing model.

A. Select the type of fee - MetLife charges plan and/or participant accounts a set fee. It could be a basis point (bps) fee, a per participant fee, or a combination of both. In addition, it is critical to include the SDIO information for any products to be excluded from the fee (i.e. GTS, SVA, and GAA).

B. Select Offset Method – The process by which MetLife's fees are assessed, and the mutual fund reimbursements are used to offset them, are determined by the Offset method selected.

a. **Option #1 – Participant Account –** The most transparent option, all fees are debited directly from participants' accounts, and all mutual fund revenue share is credited to their accounts.

b. **Option #2 – Group Account (Unallocated Plan Assets-UPA) –** Revenue share is credited to UPA quarterly. Plan fees are assessed against the UPA/Forfeiture balance. If the UPA/Forfeiture balance is insufficient to cover the fees, the shortfall is charged on a pro-rata basis to participant accounts.

c. **Option #3 – Group Account (UPA) with direct bill to Employer –** Revenue share is credited to UPA. Employer is billed for the total amount of fees due to MetLife. Must complete section C for this option.

C. Billing Receiver Contact Information – This section must be completed if Offset Method Option # 3 was selected.

D. Unallocated Plan Asset Account-UPA – Complete for Offset Method Options # 2 and #3. Designate the fund(s) for UPA.

SECTION 3: ADD New Plan Services Fee (Please select only one Pricing Model to add new fee).

☐ **Pricing Model I: Offset –** MetLife charges plan and/or participant accounts a set fee for revenue requirements to operate plan and mutual fund reimbursements received are credited back based upon the Offset Method selected below in Section B.

A. Select type of fee: (Expressed as an **ANNUAL Dollar or Basis Points Fee ("BPS")** – assessed on a quarterly basis)

$____ Dollar per participant

____ BPS per plan – Express annual rate – example please note 0.30 instead of 30 bps or .003

List below the SDIO's for ANY fixed / Self Directed that **should be excluded.**
(Including SDIO's for GTS Fixed, SVA, GAA, SA Institutional, CIT, or Self Directed Accounts)

Fund Name	SDIO	Fund Name	SDIO

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MetLife

SECTION 3: ADD New Plan Services Fee (continued)

B. Select Offset Method: (MetLife charges the plan and/or participant accounts a set fee for revenue requirements to operate the plan and all mutual fund reimbursements are credited to the offset method selected).

☐	Option 1 – Participant Account
☐	Option 2 – Group Account (Unallocated Plan Assets, "UPA") – if fee exceeds balance in UPA/Forfeiture, shortfall of fees to be charged to participant accounts (Forfeiture assets will only be taken from available sources).
☐	Option 3* – Group Account (UPA) with direct bill to Employer for the total amount of fees due to MetLife (Complete Section C).

* Prior approval is required by MLR Pricing for Option 3

C. Billing Receiver Contact Information (Complete if Offset Method Option 3 above was selected).

Contact Name

Address

City | State | Zip Code

Contact Email | Contact Phone Number

D. Unallocated Plan Asset Account (UPA): (To be completed for Offset Method Option 2 and Option 3 selected above. Designate the following fund(s) for unallocated plan assets. Percentages must total 100%).

Fund Name	SDIO	Ticker	Percentage
			%
			%

II. Pricing Model II: No Offset - MetLife charges plan and/or participant accounts a fee and retains fund reimbursements to meet revenue requirements. Currently this pricing model is offered only to those plans using it, and who insist on not switching to an offset option.

A. Select the type of fee - MetLife charges plan and/or participant accounts a set fee. It could be a bps fee, a per participant fee, or a combination of both. It is critical to include SDIO codes for any product to be excluded from the fee (i.e. GTS, SVA, and GAA).

B. Select No Offset Method - MetLife fees are charged to the plan and/or participant accounts. Mutual fund reimbursements are retained by MetLife.

a. **Option #1 – participant Account –** Fees charged to participant accounts.

b. **Option #2 – Employer to be billed via Quarterly Invoice –** Section C of the form must be completed.

C. Billing Receiver Contact Information – This section must be completed if No Offset Method Option # 2 was selected

☐ **Pricing Model II: No Offset** – MetLife charges plan and/or participant accounts a fee and keeps the mutual fund reimbursements to meet revenue requirements to operate the plan

A. Select type of fee: (Expressed as an **ANNUAL Dollar or Basis Points Fee ("BPS")** – assessed on a quarterly basis)

$______ Dollar per participant

______ BPS per plan – Express annual rate – example please note 0.30 instead of 30 bps or .003

List below the SDIO's for ANY fixed / Self Directed that **should be excluded.**
(Including SDIO's for GTS Fixed, SVA, GAA, SA Institutional, CIT, or Self Directed Accounts)

Fund Name	SDIO	Fund Name	SDIO

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SECTION 3: ADD New Plan Services Fee (continued)

B. Select No Offset Method: (MetLife charges the plan and/or participant accounts a set fee for revenue requirements to operate the plan and all mutual fund reimbursements are credited to the offset method selected).

☐	Option 1 – Participant Deducted – MetLife retains
☐	Option 2** – Employer to be billed via Quarterly Invoice (Complete Section C)

** Prior approval is required by MLR Pricing for Option 2

C. Billing Receiver Contact Information (Complete if No Offset Method Option 2 above was selected).

Contact Name

Address

City | State | Zip Code

Contact Email | Contact Phone Number

Section 4 - Remove Existing Plan Services Fee

Complete information on existing fee(s) to be removed.

A. Select Fee to be Removed – Enter applicable fees to be removed from existing fee arrangement.

SECTION 4: REMOVE Existing Plan Services Fee (Please provide information on existing fee to be removed).

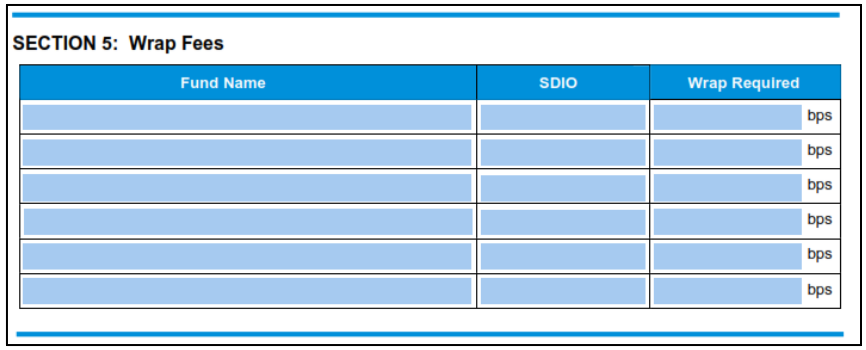
A. Select fee to be removed: (Expressed as an **ANNUAL Dollar or Basis Points Fee ("BPS")** – assessed on a quarterly basis).

$______ Dollar per participant

______ BPS per plan – Express annual rate – example please note 0.30 instead of 30 bps or .003

Section 5 – Wrap Fees

This section is add wrap fees, an additional charge at the fund level in non-offset plans where specific funds do not offer sufficient revenue share. This section should be completed to add these wrap fee requirements.

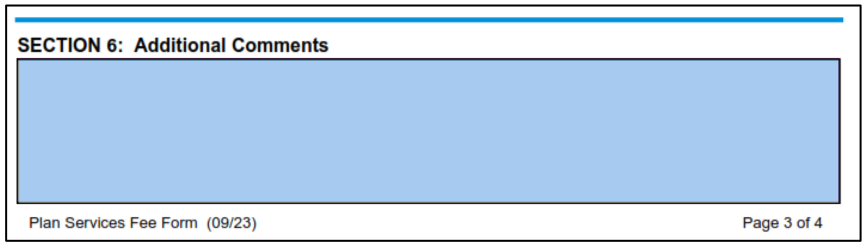


SECTION 5: Wrap Fees

Fund Name	SDIO	Wrap Required
		bps
		bps
		bps
		bps
		bps
		bps

Section 6 - Additional Comments

This section is used to add comments that further explain the changes that will be taking place regarding the fees for the affected plans. For example, you may want to include information regarding a specific fee identifier, include information about a pricing model change, or include information about a wrap fee being applied to specific funds.



SECTION 6: Additional Comments

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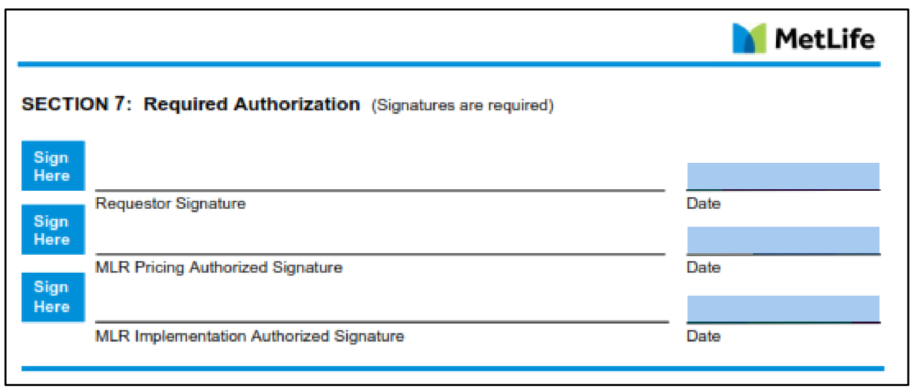
Section 7 – Required Authorization

The signature section requires three signatures before it is submitted to Empower for processing. A certificate signature is most effective, but it can also be signed with a name, as shown on the sample

The person from the RMT completing the form must sign and date the form prior to sending e-mail to MLR Pricing and Plan Doc Group



MetLife

SECTION 7: Required Authorization (Signatures are required)

Sign Here

Requestor Signature Date

Sign Here

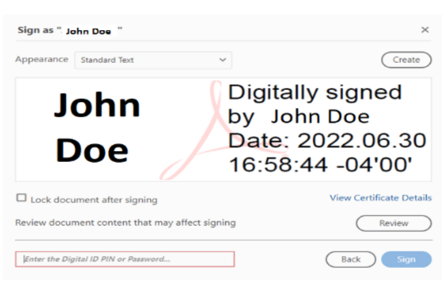
MLR Pricing Authorized Signature Date

Sign Here

MLR Implementation Authorized Signature Date

MLR Pricing will review the form and ask for any corrections that may be identified. Once the form is in good order it will be signed by the MLR Pricing Team. An e-mail will then be sent to the Plan Doc Group, with cc to RMT, for final review and approval prior to implementation.

Once final approval from Plan Doc Group is given & form signed, it will be sent to Empower with cc to RMT and other required personnel.



SECTION 8 – HOW TO SUBMIT THIS FORM

Returned completed form via email to MLR_pricing@metlife.com and Cc plandocgroup@metlife.com. Another option would be to use the Submit Form button which will automatically open an email with both email addresses, prepopulated subject line using plan name/number, prepopulated email message, & it will attach the form to the email.

SECTION 8: How To Submit This Form

Please return completed form to:

Email:
mlr_pricing@metlife.com

Cc:
plandocgroup@metlife.com

Click Submit Form:

Submit Form