



## Evaluating the Effectiveness for a 408(b)(2) Disclosure Requirements

Focus Group Feedback Consent Form

You are being asked to take part in a focus group conversation about your experiences with an EBSA regulation. You're eligible to be in this study because your organization provides a retirement plan for which you have a responsibility to make decisions, which means the regulation impacts your organization.

Please read this form carefully and ask any questions you may have before agreeing to take part in the study.

<u>What the focus group is about:</u> This conversation is focused on understanding the impact of the regulation known as "408(b) (2)" or "service provider fee disclosure," which requires service providers to disclose specified information to retirement plan sponsors or other fiduciaries. In addition, we will ask about whether there is a need for a summary or other guidance to help plan sponsors or other fiduciaries navigate the disclosures.

<u>What we will ask you to do:</u> If you agree to participate in the focus group conversation, we will ask you, along with about six to seven other peers, questions about "408(b)(2)" or "service provider fee disclosure" regulation. The questions will be asked in a group setting. The conversation will take about 90 minutes to complete. The focus group does not require any preparation on your part, but reviewing or bringing the disclosures you have received from your plan's service providers would be helpful to you.

<u>Risks and benefits</u>: We do not anticipate any risks to you participating in this study other than those encountered in day-to-day life. The benefit to participating in this study is that you will provide feedback that may help EBSA better understand the impact of the regulations on regulated entities.

<u>Incentives:</u> Your responses to these questions are a valuable resource for EBSA's review of the regulations. We encourage you to use this focus group as a way to get your voice heard and to inform EBSA's efforts to effectively regulate pension plans.

<u>Confidentiality:</u> Your information and the records of this study will be kept private to the fullest extent permitted by law. This study is being funded by the DOL's EBSA, which is part of the federal government. Therefore, the data collected as part of this study will be made available to researchers. The information we gather will only be shared with EBSA to help them understand the impact of the regulation. Research records will be kept in a locked file; only the ICF International (ICF) team will have access to any information that identifies participants. EBSA will have access to reports resulting from the data; those reports will not include information that allows EBSA to identify any individuals.





<u>Audio recording</u>: Please note that our discussion today is being audio-taped. This helps us to capture all that you are saying so that we are able to write the most comprehensive reports, not for the purposes of identifying any participants. We will keep the audio tapes until we can create written transcripts of the focus group sessions; once those transcriptions have been created, we will destroy the audio recordings.

<u>Taking part is voluntary</u>: Participation in this study is voluntary. You have the right not to participate at all or to leave the study at any time. Deciding not to participate or choosing to leave the study will not result in any penalty or loss of benefits to which you are entitled, and it will not harm your relationship with your employer, DOL, EBSA or ICF. If you decide to take part, you are free to withdraw at any time.

<u>If you have questions</u>: The ICF Project Director and Principal Investigator, respectively, for this project are Mr. William "Ed" Trumbull and Dr. Jonathan Hecht. Please ask any questions you have now. If you have questions later, you may contact William "Ed" Trumbull at <u>William.Trumbull@icfi.com</u> or 703-225-2299. You can reach Dr. Jonathan Hecht at <u>Jon.Hecht@icfi.com</u> or at 415-677-7145. If you have any questions or concerns regarding your rights as a subject in this study, you may contact ICF's Institutional Review Board (IRB) at IRB@icfi.com or 877-556-2218.

Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. The OMB control number is 1210-NEW, and expires XX, XX, 2016.

You will be given a copy of this form to keep for your records.

<u>Statement of Consent:</u> I have read the above information, and have received answers to any questions I asked. I consent to take part in the study.

Your Signature	_ Date	
Your Name (printed)		
Signature of person obtaining consent		Date
Printed name of person obtaining consent		Date
This consent form will be kept by the ICF team for at least three years beyond the end of the		

This consent form will be kept by the ICF team for at least three years beyond the end of the feedback process.