

# Consent and power of attorney under data protection law

Pension fund reinsurance

Pension fund (employee benefits institution):

Insurance contract number:

Case number:

Insured person:

Date of birth:

In connection with the review of the above-mentioned claim, by signing below you consent to the processing of your data, in particular for the procurement of health data and other highly sensitive personal data, by Elips Life Ltd (hereinafter "elipsLife") from bodies subject to a duty of confidentiality, such as doctors, hospitals and other insurers. These declarations of consent and release from the duty of confidentiality are indispensable for the assessment of the claim. If you do not submit them, the provision of services will generally not be possible.

The following information relates to the handling of your health data and other highly sensitive personal data:

- by elipsLife itself (below under no. 1),
- when disclosing information to persons or entities outside elipsLife (below under no. 2),
- in connection with enquiries from third parties (see point 3 below),
- as part of case management at elipsLife (below under no. 4.).

#### 1. Procurement, storage, use and deletion of your health data by elipsLife

elipsLife processes this benefit claim on behalf of the pension scheme established by your employer pursuant to the Occupational Pensions Act (OPA) in Switzerland (Bundesgesetz über die berufliche Vorsorge, BVG) or Liechtenstein (Gesetz über die betriebliche Personalvorsorge, BPVG), or the pension scheme with which your employer is affiliated. To the extent necessary for the assessment of benefits and the provision of services, elipsLife procures, saves and uses the personal data communicated by you in this claim and in the future. This comprises information regarding your health as well as information that elipsLife obtains, with your consent, from medical service providers (doctors, hospitals, physiotherapists, etc.) and other insurers (disability insurance, unemployment insurance, military insurance, occupational benefits institutions, private insurance, etc.). In connection with the provision of services, this may also include information that elipsLife requires for the payment of benefits (such as account details, etc.). elipsLife uses this information to review the claim, to provide services, if necessary to reclaim benefits from other compulsory insurance providers and for quality assurance. The data concerning your claim is stored electronically at elipsLife and deleted after expiry of the legally prescribed archiving obligation.

#### 2. Disclosure of your health data to entities outside elipsLife

#### 2.1 Transfer for medical examination

It may be necessary to consult a medical expert to review your claim. By signing below, you consent to the transmission of your personal data to medical experts, to the extent necessary for the review of the obligation to pay benefits and as long as your data is used there accordingly and until the results are transmitted back to elipsLife. The persons working for elipsLife and the experts are released from their duty of confidentiality with regard to this data.

#### 2.2 Assignment of tasks to other bodies (companies or persons)

elipsLife may delegate certain tasks, such as contract administration or benefit case processing, which may involve the collection, processing or use of your personal data, to third parties. These may be either affiliated Group companies or other entities in Switzerland or the European Economic Area (EEA). According to the Federal Council, these states guarantee secure and trustworthy data protection.

elipsLife may also engage any third parties for the provision of other services. A current list can be found on the Internet at www.elipslife.com/en/che/Downloads. By signing below, you consent to the transmission of your data to these bodies, provided that the data are collected, processed and used there for the stated purposes to the same extent as by elipsLife.

# 2.3 Forwarding to the pension scheme

The pension scheme established by your employer or with which your employer is affiliated requires various information to process the benefit claim through elipsLife. As a rule, access to documents in relation to your benefit claim is therefore also given to the relevant pension scheme.

## 2.4 Disclosure to reinsurers and co-insurers

To ensure the fulfilment of our obligations, elipsLife has concluded contracts with reinsurance companies that assume the risk in whole or in part, or a specific risk is insured jointly with a co-insurer. In addition, it is possible for the reinsurer to support elipsLife due to its special expertise in assessing benefits and evaluating procedures. To enable the reinsurer and any co-insurer to form their own picture of the insured event, elipsLife may submit documents relating to your claim to the reinsurer or co-insurer. This is particularly the case if the total benefits are high.

If the reinsurers have assumed the hedging of the risk, they can check whether elipsLife has correctly assessed a claim. Data on existing contracts may be passed on to reinsurers in order to process premiums and claims. When forwarding this information, elipsLife endeavours to anonymise personal data for the aforementioned purposes as far as possible. However, personal data is also used in individual cases. These will only be used by the reinsurers for the aforementioned purposes.

By signing below, you consent to the transmission of your data to reinsurers and any co-insurers and their use insofar as this is necessary for the aforementioned purposes.

## 2.5 Forwarding to your employer and its insurance broker

elipsLife does not disclose any information about your diagnosis to your employer or its insurance broker. However, to the extent necessary for processing the insurance contract between the employee benefits institution and your employer, the latter may receive information as to whether and under what conditions elipsLife provides benefits (e.g. regarding our obligation to pay benefits, the duration and degree of incapacity to work/disability or the status of the benefit assessment).

## 2.6 Passing on to any subsequent insurer

Your employer can join another employee benefits institution, or the employee benefits institution can change insurers. An exchange with the previous or post insurer is essential for claims that occur shortly before or after the change.

## 2.7 Transfer to other insurers

Insofar as elipsLife is legally obliged, as is generally the case with state and mandatory insurance or multiple insurance, or if you expressly authorise them, elipsLife will also disclose information regarding your claim to benefits to other insurance companies involved.

## 3. Consultation of personal data from third parties

In order to assess the obligation to provide benefits, it may be necessary to request information from bodies that have your health data and other highly sensitive personal data (e.g. doctors, hospitals or other insurers). The retrieval of this information generally also requires personal data to be disclosed to the appropriate units. In addition, in order to review the obligation to pay benefits, it may be necessary for elipsLife to review the information about your health situation that you have provided to justify claims or that results from documents submitted (e.g. invoices, ordinances, expert reports) or communications, e.g. from a doctor or other member of a healthcare profession. elipsLife does not inform you separately about the collection of information from third parties as part of the benefit case assessment. However, you can request information at any time about which of your personal data is processed. Please get in touch with your responsible contact person.

Only those persons or entities which have information relevant to the claim will be asked and only to the extent necessary for the review of the obligation to pay benefits. We require your consent for this, including a release from the duty of confidentiality for these bodies, if health data or other particularly sensitive personal data have to be disclosed as part of these enquires.

# 4. Data processing in case management

If case management by elipsLife is involved, you also agree to the processing of your personal data as part of case management by signing below. Your consent is essential for the execution of case management. Data acquired, stored or used as part of case management is processed exclusively by case management and is only accessible to it. Your personal data will only be passed on to third parties with your express consent. This applies in particular to protocols and associated reintegration plans, which we draw up as part of discussions in which you also take part, with employers, doctors, therapists and other parties involved. The recipients of this data are listed in the distribution list of the minutes and include the parties involved, the disability insurance (IV) and the benefits department of elipsLife.

| Consent and power of attorney                 |  |
|---|--|
| Pension fund (employee benefits institution): |  |
| Insurance contract number:                    |  |
| Case number:                                  |  |
| Insured person:                               |  |
| Date of birth:                                |  |

I hereby acknowledge and agree with the data processing specified in no. 1-4 above. I hereby consent to Elips Life Ltd (hereinafter "elipsLife") - to the extent necessary for the assessment of the claim - collecting my personal data from the following offices and persons and using them for these purposes:

- External (medical) reviewers
- Medical personnel and their auxiliaries
- Employer
- Social insurers (IV offices, UVG insurers, AHV administration offices, health insurers, unemployment funds etc.)
- Occupational benefits institutions
- Other private insurance companies involved
- Administrative and judicial authorities

I release the aforementioned persons and employees of the aforementioned institutions from their duty of confidentiality. I also agree to elipsLife disclosing my personal data to these bodies - to the extent necessary - in this context and also release the persons working for elipsLife from their duty of confidentiality to this extent.

Place, date

First name, last name

Signature of the person insured

Please send the signed, dated power of attorney form to: Elips Life Ltd Thurgauerstrasse 54 CH-8050 Zürich E-mail: claims.bvg.ch@elipsLife.com

Elips Life Ltd (hereinafter "elipsLife") is headquartered in Ruggell. All insurance covering the financial consequences of illness and accident is offered under the elipsLife brand. The focus here is on occupational and private provisions for death and disability. Data protection is a top priority at elipsLife, and elipsLife treats your data with the necessary care. If you have any questions in this connection, you can contact the elipsLife data protection advisor. Further information on data protection at elipsLife can also be found at www.elipslife.com/en/che/Legal. You may at any time request information about which of your personal data are being processed and you may request correction, deletion or restriction of processing. You may also revoke your consent to the processing of your personal data at any time. If you revoke your consent, however, the provision of services will generally not be possible. Please address any relevant enquiries by post to Elips Life Ltd, Compliance, Industriestrasse 56, 9491 Ruggell or by e-mail to compliance@elipsLife.com.

If you are not satisfied with the information provided, you can also contact the Federal Data Protection and Information Commissioner (FDPIC), Feldeggweg 1, 3003 Bern (e-mail: info@edoeb.admin.ch) or the Data Protection Office (DSS), Städtle 38, P.O. Box 684, LI-9490 Vaduz (e-mail: info.dss@llv.li).