



medizi, Medizinisches Versorgungszentrum GbR | Stuttgarter Str.33-15 | 70469 Stuttgart

### **Declaration of Consent | Declaration of Confidentiality for**

- Patients with private health insurances
- Self-paying patients
- Treatments payed by the German Berufsgenossenschaft

## Ärztliche Leitung und Geschäftsführung:

Fachärzte für Anästhesie Dr. med. Till Brummund Dr. med. Rüdiger Eichholz Oliver Rebmann

Dr. med. Wolfgang Schreiber

Patientin / Patient	·		
Nama Surnama	Date of Birth	Telephone	
Name, Surname	Date of Birth	тетернопе	
Street and number	ZIP, City, Country	Insurance	
If necessary: legal repres	entative / guardien or alternative in	voice recipient	
Name, Surname	Date of Birth	Telephone	
Street and number	ZIP, City, Country		

Additional declaration for underage patients: I hereby expressly declare that the absent legal guardian has given his consent, too.

# I declare my express consent, revocable at any time for the future, that medizi. MVZ GbR may

• for the purpose of preparing invoices as well as for the collection and, if necessary, judicial enforcement of the claims, forward all necessary documents, in particular my name, address, date of birth, performance figures, diagnoses, treatment documentation, invoice amount, laboratory invoices, findings, forms, etc. to:

#### Dr. Meindl u. Partner Verrechnungsstelle GmbH, Willy-Brandt-Platz 20, 90402 Nürnberg (hereafter "settlement agent")

- In this respect, I expressly release the healthcare provider and the settlement agent from the duty of medical secrecy and expressly agree that the healthcare provider may assign the claims arising from this and future treatments to the settlement agent; for refinancing purposes, the clearing agency may assign claims from my treatments to Deutsche Apotheker und Ärztebank, Dusseldorf or the Commerzbank AG, Frankfurt/Main by way of security.
- I am aware that after assignment of the claim, the settlement agent acts as the owner of the claim and therefore objections to the claim even if they result from the treatment and the medical history must be raised or asserted against the settlement agent in the event of a dispute and that the healthcare provider can be heard as a witness.
- This declaration may be revoked for the future either regarding the settlement agent or the healthcare provider.
- My personal data is also processed electronically by the settlement agent. With my signature, I confirm that I have read the privacy information below and have received a copy of this statement.

Place and date	Signature of the patient / legal representative

### Information on the Privacy Protection Policy of Dr. Meindl u. Partner Verrechnungsstelle

Dear patient,

Your healthcare provider works with us to reduce the high administrative burden associated with the settlement of private liquidations. Your healthcare provider wants to focus on the most important details: your needs as a patient. Therefore, we ask you to read the above Declaration of Consent / Declaration of Confidentiality, which must be signed. The explanation and provision of your data is voluntary; it is neither required by law nor required for treatment. Otherwise your healthcare provider itself will settle the private liquidation, collect and, if necessary, enforce it in court.

As a settlement agent, the duty of confidentiality is as strict for us as it is for your healthcare provider. Like your healthcare provider, we must observe data protection regulations. Fair and transparent processing of your personal data is important to us. In the following, we inform you about your rights arising from this:

We process your personal data on the basis of your consent in accordance with Article 6 (1) (a) and Article 9 (2) (a) of the EU General Data Protection Regulation. Otherwise, the healthcare provider can / must settle the bill itself.

We will delete your invoice-related data immediately if the statutory or official retention periods (usually 10 years) have expired and the purpose of the processing has been archieved. In the case of fulfillment of the purpose before expiry of the retention periods, data processing is restricted (data blocking). It is your right to ask us for information about which of your personal data we process. Of course, you can also ask that we correct incorrect or incomplete personal data. In accordance with legal requirements, you have a right of deletion, of restriction of processing and a right to data transferability. For all questions regarding data protection, please contact our data protection officer. You can contact them at:

Dr. Meindl u. Partner Verrechnungsstelle GmbH, Datenschutzbeauftragter, Willy-Brandt-Platz 20, 90402 Nürnberg Tel.: 0911 98478 301, eMail: datenschutz@verrechnungsstelle.de

In addition, you can submit a complaint to a supervisory authority. The Bavarian State Office for Data Protection Supervision, Promenade 27, 91522 Ansbach is responsible for us.

Yours truly,

Dr. Meindl u. Partner Verrechnungsstelle