

Social security for migrant workers



Guide No 1

**concerning the rights and obligations
with regard to social security
of employed persons going to work in the
FEDERAL REPUBLIC OF GERMANY**

In your own interest
READ THIS GUIDE CAREFULLY

1976

**This Guide gives only general guidance.
It must not be treated as a complete and authoritative statement
on the law in any particular case.**

**This publication was prepared by the Administrative Commission of the
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Useful addresses (inside back cover)

Introduction

Under the Treaty establishing the European Economic Community workers who are nationals of one of the Member States of the European Communities have the right to pursue an employment in another Member State under the same conditions as nationals of that State. The EEC Treaty also provides for the adoption of measures permitting workers moving from one Member State to another to have taken into account periods of insurance which they have completed under the social security schemes of the various Member States in which they have been employed.

To this end the Council of the European Communities drew up Regulations Nos 1408/71 and 574/52 which came into force on 1 October 1972 for Belgium, Federal Republic of Germany, France, Italy, Luxembourg and the Netherlands, and on 1 April 1973 for Denmark, Ireland and the United Kingdom of Great Britain and Northern Ireland (including Gibraltar).¹

This Guide is designed to inform you about the rights which you and the members of your family may exercise as regards social security and to draw your attention to your duties and the formalities to be completed to qualify for the various social security benefits.

¹ These Regulations replaced Regulations Nos 3 and 4 which had been in force from 1 January 1959 to 30 September 1972.

The Guide comprises two parts:

- Part I, which sums up the main provisions of the Community Regulations;
- Part II, which briefly outlines the social security system of the Member State of the European Communities where you are going to work, as well as the benefits available and the conditions and formalities to be fulfilled to qualify for benefits.

A similar guide exists for each Member State of the European Communities.

- Read this Guide carefully before your departure and make sure to obtain the forms mentioned in Part II

In case of doubt please consult the insurance authorities or institutions of the country you are leaving or your new employer.

The other Guides available deal with the following cases:

- Temporary residence (stay) in a Member State of the European Communities (Guide No 2);
- Workers who are sent by their employers to another Member State for a limited period, international transport workers and other workers regularly employed in more than one Member State, e.g. commercial travellers (Guide No 3);
- Pensioners and pension claimants (Guide No 4);
- Members of a migrant worker's family who have stayed behind in a Member State other than the one in which he is working (Guide No 5).

Part I

The Community Regulations

1. To whom do the Community Regulations apply?

These Regulations apply to you if you are either:

- (a) a worker or pensioner pursuing or having pursued an activity as an employed person and if you have the nationality of a Member State of the European Communities (see section 2 below) or are a stateless person or a refugee resident in a Member State; (Officials of public bodies are considered as employed persons for the branches of social security in respect of which they are insured in a scheme covering employed persons);
- (b) a member of an employed person's or a pensioner's family fulfilling the conditions set out at (a) above;
- (c) a survivor of an employed person or a pensioner pursuing or having pursued an activity as an employed person, regardless of the worker's or pensioner's nationality, provided you are a national of a Member State or a stateless person or a refugee resident in a Member State.

With the exception of certain specific cases, the Community Regulations *do not apply* to self-employed persons or to pensioners who had been self-employed.

This list is not complete. Should you wish to know whether you are covered by the Regulations, please consult the institution with which you are insured (see Part II).

2. To which countries do the Community Regulations apply?

You are covered by the Regulations only if you are resident or staying in a Member State of the European Communities listed below:

Belgium

Denmark

Federal Republic of Germany

France

Ireland

Italy

Luxembourg

the Netherlands

the United Kingdom of Great Britain and Northern Ireland (including Gibraltar).

3. What are the aims of the Community Regulations?

- (a) One of the principal aims is to ensure that, as regards social security you will receive the same treatment as the nationals of any of the countries mentioned at section 2 above when you go there for work.
- (b) Another important aim of the social security Regulations is to ensure that by going to work in another Member State you do not lose the advantages acquired in respect of periods during which you were subject to the social security scheme of another Member State. In order to get certain social security benefits you must, under the legislation of the Member State concerned, have been either insured, employed or resident in that Member State for a specified period known as the 'qualifying period'. The Community Regulations provide that periods completed in the various Member States where you have worked must be taken into account, if necessary, to ensure that you will have completed the qualifying period prescribed by the legislation of the Member States where you are seeking benefits.

For instance, supposing you are claiming a retirement pension and you had been insured in Member State A for five years after which you went to Member State B where, you had a job and paid contributions for the next ten years. The legislation of country A as well as that of country B require that, to qualify for a retirement pension, you must have been insured in the

country for 15 years. In that case your five years of insurance in country A will be counted so as to make you fulfil the conditions laid down by the legislation of country B. Similarly, the ten years of insurance which you completed in country B will be counted so that you can fulfil the condition required by the legislation of country A.

Details on how the retirement pension will be calculated by each of these countries are given in section 4 B below.

The Community Regulations also provide that when you go to work in another Member State periods completed in the Member State where you had worked before may be used to enable you to receive sickness, maternity and unemployment benefits in the other Member State.

- (c) In general you will be insured under the social security legislation of the Member State in which you are employed. There are certain exceptions to this rule: for instance, workers posted abroad, i.e. workers sent by their employer to another Member State for a limited period, international transport workers and other workers regularly employed in more than one country. If you fall into one of these groups please consult Guide No 3.
- (d) An additional aim of the Community Regulations is to guarantee that you and the members of your family are granted the benefits for which you are eligible in whichever Member State you or they may be.

4. To which benefits are you entitled?

The following is a list and short description of the benefits which you can claim.

A. Sickness and maternity benefits (including medical benefits)

- (a) If you reside in a Member State other than the one in which you are insured, you and the members of your family may obtain benefits in kind (medical care, dental treatment, drugs and medicines, hospital treatment, etc.) through the institution of your place of residence as if you were insured with that institution.

Cash benefits to which you or your family may be entitled under the legislation of the Member State where you are insured are as a rule paid directly by the institution with which you are insured.

The members of your family may also obtain benefits if they are living in a Member State other than that in which you reside or are insured.

- (b) Under certain conditions you and the members of your family are entitled to benefits in kind while temporarily residing in (visiting) a Member State other than the one in which you are insured. The benefits in kind that you may claim are those provided for by the legislation of the Member State you are visiting.

You may also be entitled to receive cash benefit during such a stay; this benefit will be at the rate, and for the

period, laid down by the legislation of the Member State where you are insured.

For your information about your rights and the formalities to be completed, please consult your sickness insurance institution.

B. Retirement pensions and survivors' pensions

As explained in section 3 (b) above, if you had been insured in a Member State but if that period of insurance was not long enough to entitle you to a pension under the legislation of that State, account must also be taken of insurance periods completed in other Member States.

To go back to the example quoted at 3 (b), where it was assumed that you were insured in country A for five years and in country B for ten years, while the 'qualifying period' (prescribed minimum insurance period) in both Member States was 15 years. In that case you are entitled to a pension from each of these States which is calculated as follows: country A and country B each calculate the pension to which you would have been entitled had you been insured there during the whole of your insurance history, i.e. for 15 years. Once these amounts have been determined, you will receive a fraction of those amounts in proportion to the periods during which you were actually insured in each of the two countries.

In the above example:

- Country A would pay you a pension amounting to $\frac{5}{15}$ th of the pension that you would have been entitled to if you had been insured there for 15 years;
- Country B would pay you a pension amounting to

10/15th of the pension that you would have been entitled to if you had been insured there for 15 years.

If, however, in either or both of these countries the qualifying condition is fulfilled without having to take into account insurance periods completed in the other country, each of the countries in which the conditions is thus satisfied will calculate, in accordance with its own legislation, the pension due to you for the insurance periods you have completed in the country concerned. This amount will be paid to you if it is greater than the fraction calculated above.

The sum of the pensions may not be less than any minimum pension fixed by the legislation of the country where you are resident provided that you are entitled to a pension from that country.

C. Invalidity pensions and invalidity allowances

What was said at B. above applies generally to invalidity pensions. However, if you have been insured only in countries whose legislation provides that the amount of invalidity pension is not linked to the length of insurance—Belgium, France (except for the invalidity scheme for miners), Ireland, the Netherlands and the United Kingdom—you will receive one pension only; as a rule, that will be the pension of the Member State where you were last insured.

D. Accidents at work and occupational diseases

As with sickness benefit, you may receive benefit for accidents at work in cash and kind whilst staying or residing in a Member State other than the one where the institution responsible for paying benefit for that accident is situated.

Special rules exist for the granting of pensions payable for cases where an occupational disease has been contracted as a result of employment in several Member States.

Special rules also exist for cases where there has been an aggravation of an occupational disease.

E. Unemployment benefit

By taking into account periods during which you have been insured or employed in another Member State, the Community Regulations may enable you to receive unemployment benefit in a Member State where you have only worked very briefly.

You may also continue to receive unemployment benefit on certain conditions when you are leaving the Member State where you became unemployed to look for work in another Member State (see Part II).

Special rules exist for the case where during your last employment you were resident in a Member State other than that in which you were insured.

F. Family allowances

In general family allowances will be payable in respect of your children even if they are being brought up in a Member State other than the one where you are working.

Part II

**Social security
in the Federal Republic
of Germany**

1. General information

This leaflet should serve you as a guide when, as a national of a Member State you come to the Federal Republic of Germany to work. The purpose of this Guide is to inform you of your social security rights, your duties and the formalities to be complied with. Should you have any doubt or need further guidance and advice in a particular situation, please consult your employer, work committee (*Betriebsrat*), sickness fund (*Krankenkasse*) or employment office (*Arbeitsamt*).

Social security in the Federal Republic of Germany affords protection for you and the members of your family in the following cases:

- sickness, maternity and death (death grants);
- accidents at work and occupational diseases;
- invalidity (occupational invalidity and incapacity for work), old age and death (pensions);
- unemployment.

In addition, family benefits (family or children's allowances) are granted for those of your children who qualify.

The following chapters explain what you should do in each case.

ORGANIZATION

Your insurance is the responsibility of the institutions listed below.

1. Sickness insurance

As a rule, the local general sickness fund (*Allgemeine Ortskrankenkasse, AOK*) competent for the town in which you are employed; however, you may also come under a sickness fund of an undertaking (*Betriebskrankenkasse, BKK*), a sickness fund of a trade guild (*Innungskrankenkasse, IKK*), the federal insurance fund for miners (*Bundesknappschaft*) or the sickness insurance fund for mariners (*See-Krankenkasse*). Your employer will give you the information you require.

2. Accident insurance

Your insurance is the responsibility of a professional and trade association:

- responsible for industrial undertakings (*Gewerbliche Berufsgenossenschaft*);
- for agricultural and horticultural undertakings (*Landwirtschaftliche Berufsgenossenschaft*);
- for undertakings in sea-faring and sea-fishing (*See-Berufsgenossenschaft*).

3. Pension insurance

The following institutions are responsible for pension insurance:

- *Landesversicherungsanstalten* (regional insurance offices), for manual workers;

- *Bundesversicherungsanstalt für Angestellte* (federal insurance office for clerical staff), 1 Berlin 31, Ruhrstr. 2, for clerical workers;
- *Bundesbahn-Versicherungsanstalt* (Federal Railways insurance office), 6 Frankfurt/Main, Karlstr. 4/6, for those employed by the Federal German Railways;
- the *Seekasse* (mariners' insurance fund), 2 Hamburg 11, Reimerstwierte 2, for persons employed in seafaring, clerical staff of seafaring companies and pilots;
- the *Bundesknappschaft* (federal insurance fund for miners), 463 Bochum, Piperstr. 14/28, for manual and clerical workers in the mining industry.

4. Unemployment insurance

Bundesanstalt für Arbeit (federal labour office), 85 Nürnberg. Its duties at local level are discharged by the regional labour offices (*Arbeitsämter*).

5. Family allowances

Bundesanstalt für Arbeit (federal labour office), 85 Nürnberg.

INSURANCE AND INSURANCE DOCUMENTS

6. As soon as you have taken up your job your employer will take the necessary steps to have you registered for insurance with the sickness insurance fund (*Krankenkasse*) which will then inform the competent pension and unemployment insurance bodies.

7. Your employer will also apply for an insurance number (*Versicherungsnummer*) to be allocated to you. Under your insurance number the pension insurance institution will

record your periods of insurance and your earnings for which insurance contributions must be paid.

8. After the application procedure has been completed, the pension insurance institution will send you a insurance book (*Versicherungsnachweisheft*). The insurance book contains the following items:

- an insurance identity card (*Ausweis*) showing your pension insurance number;
- a number of forms marked '*Anmeldung*' to be used when applying for registration with the sickness fund and the employment office;
- a number of forms marked '*Versicherungskarte*', i.e. insurance card, on which earnings are entered for pension insurance purposes and also used to notify a change of address to the sickness fund and the employment office;
- a form marked '*Anforderung*' to be used when applying for new standard insurance forms known as '*Versicherungsnachweise*'.

9. You should take your insurance identity card (*Ausweis*) from the insurance book and hand the book to your employer right away. If you were insured in the Federal Republic of Germany before and already possess an insurance book you should hand it to your employer when taking up your job.

When employment ends your employer will give it back to you.

- Please keep all your insurance documents safely and make sure you have them handy whenever you need them

CONTRIBUTIONS

Contributions due are as a rule deducted from your earnings and transmitted by your employer. Please note the following:

10. *Sickness insurance*

The contribution rates of the various sickness funds range from 9% to 12% of earned income; contributions are payable up to an upper earnings limit fixed every year (1975 = DM 2 100 per month). The employer and the worker each pay half of the contribution.

Contributions for pensioners are paid for by the pension insurance institution and for unemployed persons by the federal labour office.

11. *Accident insurance*

Contributions are paid in full by your employer.

12. *Pension insurance*

The contribution amounts to 18% of earned income up to the annually fixed earnings ceiling (1975 = DM 2 800 per month). The employer and the worker each pay half of the contribution.

Under the pension insurance scheme for miners the contribution rate is 23.5% of earned income up to the annual earnings ceiling (1975 = DM 3 400 per month), of which 15% is paid by the employer and 8.5% by the worker.

13. *Unemployment insurance*

The contribution rate is 3% of earned income up to the

earnings ceiling (same as for pension insurance). The employer and the worker each pay half of the contribution.

14. Family benefits (family allowances)

Family allowances are financed wholly from public funds.

15. Optional insurance

Voluntary insurance is possible:

- *for sickness insurance* (continued insurance, *Weiterversicherung*); this option may be of interest especially to clerical workers whose income exceeds the earnings ceiling up to which insurance contributions must be paid (1975 = DM 2 100 per month);
- *for pension insurance*; here, however, voluntary insurance is not permitted as long as the person concerned is subject to compulsory insurance.

Should you wish to contribute voluntarily, please apply to your sickness fund or to the pension insurance institution to which your contributions were paid.

2. Your rights and duties. Qualifying conditions

Sickness insurance (Krankenversicherung)

BENEFITS FOR THE WORKER IN THE FEDERAL REPUBLIC OF GERMANY

Treatment by general practitioners, specialists and dentists

16. You are entitled to receive, free of charge, all necessary medical treatment provided by GPs and specialists and to dental treatment by dentists; there are no restrictions on the duration of such services as long as your insurance cover lasts.

17. When you need treatment by a GP, specialist or dentist, you should ask your sickness insurance fund for a sickness certificate called *Krankenschein* (*Behandlungsschein* in the miners' federal insurance fund). This certificate entitles you to treatment up to the end of the calendar quarter in which treatment began.

18. In many cases the employer has been authorized by the sickness fund to issue such sickness certificates. You should therefore heed instructions by your employer as to whether and where the certificates can be obtained (e.g. at the pay office).

19. In some cases the sickness funds provide the insured person with booklets known as '*Krankenscheinhefte*' containing a number of sickness certificates. When you need medical attention you should take out one of the certificates from this booklet and complete and sign it

yourself. Only one sickness certificate may be used each calendar quarter.

20. If in an emergency you cannot give a sickness certificate to the doctor when first consulting him, you should tell the doctor with which fund you are insured and explain that the fund will cover the cost of treatment.

21. Treatment is provided by doctors or dentists recognized by the sickness funds; at the beginning of treatment and at the beginning of each subsequent calendar quarter, you can choose a practitioner from the list of recognized sickness fund doctors and dentists, which can be consulted at the sickness fund office.

22. If in an emergency you cannot reach a sickness fund doctor or dentist, you may go to another doctor or dentist for immediate treatment; in such cases the doctor should afterwards be given a sickness certificate which the sickness fund has endorsed 'emergency'. Further treatment should however be provided by a doctor or dentist attached to the sickness fund.

23. Should the doctor treating you consider it necessary to refer you to another doctor, a specialist, a university polyclinic or another medical institution, he will write out a reference note (*Überweisungsschein*).

Medicines

24. Necessary medicines are available on prescription from a sickness fund doctor; they can be obtained from all dispensing chemists.

25. You should pay 20% of the cost of medicines to the chemist, up to the maximum of DM 2.50 per prescription;

no charge is made if the doctor treating you has indicated on the prescription that you are exempted from payment.

Minor aids and appliances and certain types of treatment

26. If the doctor prescribes minor aids or appliances (such as spectacles, trusses, medicinal bandages, arch supports) or certain types of therapeutic treatment (such as medicinal baths or massages), you must normally first submit the prescription to the sickness fund.

Charges are made according to the same rules as set on at section 25 above.

Prostheses and other major aids and appliances

27. Your doctor will also prescribe any necessary prostheses or other major aids and appliances. The cost of buying, changing: repairing or replacing such items, as well as the cost of instructing the patient how to use them, are borne by the sickness fund. Prescriptions for aids and appliances must first be approved by the fund.

28. For dentures and crowns the sickness fund can either contribute towards the costs or pay them in full. Before dentures can be manufactured the dentist's estimate of costs must be submitted for approval to the fund.

In-patient treatment in hospitals, sanatoria and similar establishments

29. The sickness fund provides for stay and treatment in hospital in the 'general class'.

30. There is no restriction as to the duration of stay in

hospital for patients covered by insurance. If insurance ends while services are still being provided, hospitalization may be extended by up to 26 weeks counted from the date on which insurance ended.

31. Admission to hospital requires a statement from the doctor that treatment in hospital is necessary. Apart from emergencies, an application must first be made to the fund for payment of costs; when applying, you should also present the doctor's statement.

32. The sickness fund may grant you stay and treatment in sanatoria or similar establishments if such services cannot be provided by other social insurance institutions.

Transport costs

33. Transport costs incurred in connection with prescribed treatment, hospitalization or other services are paid for by the sickness funds on presentation of tickets and a certified statement from the doctor, hospital or other establishment that provided the services. The cost of transport by ambulance or taxi is refunded if ordered by a doctor and shown on a certified statement.

Domestic assistance

34. When running the home has become impossible because you or your spouse are staying for treatment in a hospital, a maternity clinic, or are undergoing a course of treatment (*Kur*) fully or partly paid by the sickness fund, you may under certain conditions be granted the services of a home-help or you may receive a refund, at an appropriate rate, of the wages you have paid to a private domestic help.

Early detection of diseases

35. The following services for the early detection of diseases are available:

- (a) examinations of children up to the age of 4;
- (b) once a year, an examination for the early detection of cancer for women from age 30, and for men from age 45.

36. Before these examinations can take place you must hand the doctor a document known as *Berechtigungsschein*, which you can obtain from the sickness fund and which shows that you are entitled to the examination.

Cash sickness benefit (Krankengeld) in case of incapacity for work

37. When you fall ill through no fault of your own you are, as a rule, entitled to your wages or salary from your employer during the first six weeks of your incapacity for work. While you continue to receive your earnings you are not entitled to cash sickness benefits.

38. When you become incapacitated you must immediately notify your employer of the expected duration of your incapacity and forward—before the end of the third calendar day after becoming incapacitated—a statement from your doctor confirming your incapacity and its expected duration.

39. Incapacitated workers who cannot claim continued pay from their employer, or who do not continue to receive their pay for special reasons, are eligible for cash benefits from the sickness fund. In these cases, benefits are

normally paid from the day following that on which the doctor confirms the incapacity for work.

40. The rate of sickness benefit is 80% of your last regular wage or salary (*Regellohn*), but not exceeding the last regular net wage or salary.

41. After one year, sickness benefit is uprated in line with upratings of statutory pensions that have occurred in the course of that period.

42. Sickness benefit is paid on a daily basis. If cash benefit is to be paid for a full calendar month, this is counted as 30 days.

43. Sickness benefit is granted until the end of the period of incapacity for work certified by the sickness fund doctor. If the incapacity for work continues beyond the initial period, the doctor will make out another certificate.

44. Normally sickness benefit may be granted for an unlimited period. However, benefit in respect of one particular disease or illness cannot be granted for more than 78 weeks over a three-year period. If a worker who is incapacitated contracts another disease, the duration of benefit cannot be extended.

45. Special provisions apply if you are receiving a German statutory pension or a pension under the social insurance scheme of another State. When applying for sickness benefit you should inform the sickness fund about any pension you are receiving and, if possible, forward the relevant pension documents.

46. No sickness benefit is paid so long as you are receiving

an interim allowance (*Übergangsgeld*) from another social insurance institution.

47. If you have deliberately caused your own illness you may be refused part or all of the benefit payments.

48. When the sickness fund doctor establishes incapacity for work, he completes a yellow certificate in triplicate, known as '*Arbeitsunfähigkeitsbescheinigung*'. The doctor then gives you the original of the form which you should hand to your employer, and sends the carbon copy to the competent German sickness fund. When it is likely that you will not be entitled to continued wage or salary payments, you should inform the fund of the beginning of your incapacity for work so as to ensure that you will not forfeit sickness benefit.

49. If your incapacity for work was due to injury caused by a third party, you must inform your employer, in particular of how the injury came about and of the identity of the responsible party, to avoid losing benefits.

50. If the disease or illness is due to an accident, an occupational disease or similar factors, you must immediately inform your doctor and the sickness fund, even if you have not become unfit for work.

51. If the fund refers you to a medical adviser for further examination you must be punctual, in your own interest. If you become unfit for work before the day on which you were to see the medical adviser for further examination, you need not attend. If you cannot go to a further examination because you are unable to walk, you must inform the fund before the time fixed for your appointment. When notifying

the fund you must enclose the letter telling you to attend the further examination and a statement from the sickness fund doctor.

52. If you do not turn up for the further examination without giving valid reasons, sickness benefit may be withdrawn as from the day of the appointment.

53. You must heed your doctor's instructions, in particular as regards staying in bed and times at which you may go out.

54. If you intend to change your place of residence or stay you must immediately inform your sickness fund, indicating your new address.

Benefit in the case of illness of a child

55. When one of your children is ill you are, under certain conditions, granted sickness benefit for a short period on presentation of a doctor's certificate confirming that you are obliged to stay away from work to nurse and look after your child.

Maternity benefits

56. Women who are working under a contract of service and are insured with a German sickness fund are eligible for the following maternity benefits:

Benefits in kind

57. Attendance by a doctor and assistance from a midwife during pregnancy and after delivery are provided free of

charge. When you apply, your sickness fund will send you a certificate called '*Mutterschaftsvorsorgeschein*' entitling you to receive maternity care.

58. Assistance from a midwife and, if necessary, a doctor is granted for confinements. For disorders connected with pregnancy or confinement you may receive drugs, medicines, bandages, etc.

59. The cost of confinement in a maternity home or clinic is borne by the fund for up to 10 days after confinement.

60. A lump-sum maternity grant of DM 50 will be paid to you towards the general expense of having your baby. By making appropriate provision in its charter the sickness fund may increase this grant to DM 100. In the case of multiple births the grant is multiplied accordingly.

Maternity allowance

61. Maternity allowance is paid for six weeks before confinement and continues for eight weeks (12 weeks for premature and multiple births) after confinement; it is paid at a rate corresponding to the average net earnings during the last 13 weeks or the last three months. The minimum allowance is DM 3.50 and the maximum rate DM 25 per calendar day.

62. Payment of maternity allowance is subject to the condition that you have completed a fixed number of periods of insurance or employment. Any periods of insurance completed in another Community country must be taken into account. To qualify for maternity allowance

before confinement, you must submit a statement by a doctor or midwife giving the expected date of confinement.

63. No maternity allowance is paid as long as wage or salary payments continue.

Death grant (Sterbegeld)

64. On the death of an insured person, the insurance fund pays a death grant of an amount fixed by its charter; the minimum rate of the grant is DM 100. The death grant is paid first and foremost as a contribution towards funeral expenses. If the amount of the death grant exceeds the costs of the funeral, the balance is paid under certain conditions to the spouse, the children, the parents or brothers and sisters in that order. Claims for a death grant are to be made to the sickness fund with which the deceased person was last insured, enclosing an official death certificate and receipts relating to funeral expenses. If the death occurred not in the Federal Republic of Germany but in another Community country, application for a death grant should be made on Community Form E 124.

BENEFITS FOR FAMILY MEMBERS WHO ARE RESIDING IN THE FEDERAL REPUBLIC OF GERMANY

General

65. You are entitled to receive benefits from your sickness fund for members of your family residing in the Federal Republic of Germany. In this context 'members of your family' means your spouse and children supported by you. For your children you are entitled to sickness and maternity

benefits up to the age limit fixed by the sickness fund's charter. The charter may furthermore specify whether other family members are also entitled to benefits. If a family member is covered against sickness by his or her own insurance, benefits are solely granted on the basis of that insurance.

66. You and the members of your family must notify the sickness fund of any change of circumstances that could affect your or their title to benefits, in particular if any members of your family move to the Federal Republic of Germany.

Sickness benefits in kind

67. Members of your family are granted benefits in kind—e.g. medical treatment, hospital treatment, prostheses and other aids and appliances—and may benefit from measures for the early detection of diseases, under the same conditions and to the same extent as you.

Maternity benefits

68. The dependent members of your family will receive benefit in kind to the same extent as you, and also a maternity grant of DM 35. However, the sickness fund charter may provide for a higher rate of maternity grant, up to a ceiling of DM 150.

Death grant

69. On the death of your spouse, child or any family members who were living in your household and were

largely supported by you, you receive a death grant at the rate of half that payable on the death of an insured person. The amount of a death grant paid to you under the deceased person's own insurance is deducted from the above grant.

70. Claims for a death grant should be submitted to the competent sickness fund, which also requires an official death certificate. If the death did not occur in the Federal Republic of Germany but in the territory of another Member State, application for a death grant should be made on Community Form E 124.

BENEFITS FOR FAMILY MEMBERS WHO ARE RESIDING IN ANOTHER MEMBER STATE

71. Members of your family supported by you who are resident in another Member State receive benefits in kind from the sickness fund of their place of residence as if you were insured with it.

Before they can receive these benefits you should ask your sickness fund for two copies of Form E 109 (Form E 37 A if the family members concerned reside in Italy) and send them to the members of your family. For further information see Guide No 5.

ENTITLEMENT TO BENEFITS WHILE STAYING IN ANOTHER MEMBER STATE

72. You and the qualifying members of your family are entitled to receive benefits when, during a stay (e.g. as tourists) in another Member State, you or a member of your family falls ill and immediately needs attendance by

a doctor or treatment in hospital. For this purpose, you should before departing obtain Form E 111 (Certificate of Entitlement) from your sickness fund.

BENEFITS IN ANOTHER MEMBER STATE IN CASES WHERE THE RISK INSURED AGAINST HAS MATERIALIZED EARLIER IN THE FEDERAL REPUBLIC OF GERMANY

73. If the risk insured against materialized before you left the Federal Republic of Germany, in other words if you or a qualifying member of your family fell ill when still in Germany, and if you or the family member concerned want to return to your place of residence in another Member State or move to another Member State entitlement to benefit will continue unabated if prior approval for the transfer of residence was obtained from the sickness fund. To avoid losing your entitlement to benefits, you should apply to your German sickness fund before leaving. If it approves of your transfer of residence, the fund will issue you with Form E 112 and, if appropriate, E 117.

74. The above rules also apply to the award of maternity benefits.

75. Section 73 above also applies in cases where you or a qualifying member of your family intend to go to another Member State for some time to receive appropriate treatment. In such cases, too, the retention of entitlement to benefits in cash or kind is subject of the sickness fund's approval.

APPEALS

76. If you do not agree with the decision of your sickness fund, you may state your objections to the sickness fund's

appeal board (*Widerspruchsstelle*) within one month of receiving the disputed decision. Should your objections be rejected, you may appeal to the social court (*Sozialgericht*) within one month of notification of the decision.

Accident insurance
(Accidents at work and occupational diseases)

77. You are covered by the accident insurance scheme while at work or travelling to and from work.

78. The main purpose of accident insurance is

- to prevent accidents, and
- to provide insurance cover in case of personal injury.

79. There are statutory safety requirements for the prevention of accidents under which employers are obliged to fit out and maintain places of work in such a manner that those working there are protected against accidents and occupational diseases. It is your duty to comply fully with the safety regulations, of which you will normally be informed at your place of work in your mother tongue.

80. Benefits are paid in the three following circumstances:

- *Accidents at work*: these are accidents sustained in the course of your employment. This includes errands and trips made for your employer. This definition applies regardless of whether or not you were responsible for the accident.
- *Accidents while travelling*: these are accidents occurring on your way from home to work and vice versa, irrespective of the means of transport used (even if it is your car) or of the question of who is responsible

for the accident. Accidents due to drunkenness are excluded.

- *Occupational diseases:* these are diseases caused by certain particularly hazardous activities. Prescribed occupational diseases and activities in which one is at risk are laid down in an official list.

The employer is obliged to report all accidents. The injured person or his survivors need not submit a claim to receive benefits.

The following benefits are granted:

81. Curative treatment (*Heilbehandlung*)

This comprises medical treatment, supply of medicines, appliances and prostheses and treatment in hospital or in a special establishment.

Under the Community Regulations you can also obtain these benefits if you are staying in another Member State; for this purpose you will need a certificate of entitlement (Form E 111) from the competent insurance institution.

The above benefits are granted by the sickness fund. Please note the information given in the section on 'Sickness insurance', Nos 16-32.

82. Interim allowance (*Übergangsgeld*)

An interim allowance is granted while you are incapable of work because of injury caused by an accident at work or because of an occupational disease, so long as you are not receiving your wage or salary or cash sickness benefit. The interim allowance is paid at a rate of 80% of your last

regular earnings. For further details, see the section on sickness benefit ('Sickness insurance', 37-54).

The interim allowance is also paid when, during the period of incapacity for work, you return to your home country or go to another Member State. In these cases you should inform your professional or trade association in time of your intention to go abroad.

83. Occupational assistance (*Berufshilfe*)

This comprises resettlement in employment and retraining for a new occupation. During the period in which you receive occupational assistance you will also be paid a subsistence allowance (*Beihilfe für den Lebensunterhalt*).

84. Invalidity pension (*Verletztenrente*)

If your earning capacity has diminished, due to an accident, by a least 20% for more than 13 weeks, you qualify for an invalidity pension. It is paid when incapacity for work ends (see 82, 'Interim allowance') but at the latest from the 79th week following the day on which the person concerned sustained the accident at work or contracted the occupational disease. The rate of invalidity pension depends on the degree to which earning capacity is reduced and also on your annual earned income. In case of unemployment (100% reduction of earning capacity) the full rate of invalidity pension is paid, i.e. two-thirds of annual earnings. If earning capacity is reduced to a lesser extent a part of the full pension rate is paid proportionate to the degree of invalidity.

Where appropriate, an allowance for exceptionally severe disablement (*Schwerverletztenzulage*), amounting to 10%

of the pension, and an increase for dependent children (*Kinderzulage*) are paid in addition to the invalidity pension.

85. Death grant (*Sterbegeld*)

If an insured person has died as the result of an accident at work or an occupational disease, the person arranging the funeral receives a death grant amounting to one-twelfth of the deceased person's annual earned income but not less than DM 400.

86. Survivors' pensions (*Hinterbliebenrente*)

A survivor's pension is paid only if death was due to an accident at work or an occupational disease. The following types of survivors' pensions are available:

- *Widow's pension (Witwenrente)*: this pension is paid at a rate of 30% of annual earned income. Under certain conditions (when the beneficiary is over 45, has children, died after occupational invalidity) the rate is increased to 40%.
- *Widower's pension (Witwerrente)*: this pension is granted on condition that the deceased wife was largely supporting the family. The rate of widower's pension corresponds to that of the widow's pension.
- *Divorcee's pension (Geschiedenenrente)*: this is granted on condition that the deceased spouse was supporting the surviving spouse under a maintenance order or was doing so voluntarily. The rate is the same as the widow's pension.
- *Parents' pension (Elternrente)*: paid to parents or grandparents, and possibly to step-parents and foster-

parents, if the deceased person effectively supported them from his earnings. The pension rate is 30% of annual earned income, if there is only one surviving parent the rate is reduced to 20%.

- *Orphans' pension (Waisenrente)*: paid to the deceased person's children until their 18th birthday, and extended to their 25th birthday if they are attending school or receiving vocational training or are disabled. The rate is, for each child, 20% (fatherless or motherless children) or 30% (full orphans) of annual earned income.

87. Lump-sum settlement (*Abfindung*)

Insured persons' pensions and widows' or widowers' pensions can, under certain conditions, be converted into a lump-sum payment. Should you be interested in such a lump-sum settlement, you should apply to the professional or trade association (*Berufsgenossenschaft*) from which you receive the pension.

Pension insurance

88. The purpose of pension insurance (*Rentenversicherung*) is to protect you and your family by paying a pension in case of invalidity (occupational invalidity or incapacity for work) and for old age and death.

All manual and clerical workers are subject to compulsory pension insurance regardless of the level of their income. Those doing mainly physical work come under pension insurance for manual workers while those doing mainly clerical work ('white-collar workers') are covered by pension insurance for clerical staff. Workers cannot opt between the two schemes.

Voluntary insurance

Individuals may decide to take out voluntary insurance (*Freiwillige Versicherung*) (see No 15).

89. How contributions are paid

Your share of the contribution (see No 12) is deducted by your employer from your wage or salary and transferred, together with the employer's share, to the sickness fund.

90. Proof of contribution payments

Your insurance card (*Versicherungskarte*) is your proof

of contributions paid. Your employer will fill out the card and hand you a copy. For further details see Nos 6-9.

BENEFITS GRANTED UNDER PENSION INSURANCE

91. Health services (*Gesundheitsmassnahmen*)

These are provided to maintain fitness for work and to prevent the need for premature pension payments. Health services comprise:

- *Curative treatment (Heilbehandlung)*: this includes all necessary medical services, in particular treatment in sanatoria and special establishments.
- *Occupational guidance (Berufsförderung)*: this comprises in particular training for a new occupation (vocational retraining) but also assistance to help you keep your job or find a new one.
- *Social assistance (Soziale Betreuung)*: this covers first and foremost an interim allowance (*Übergangsgeld*) paid while you are benefiting from the above services. The rate of this allowance is 80% of your earnings. It cannot be paid in addition to your normal income.

92. Pensions for insured persons

- (a) *Occupational invalidity pension (Rente wegen Berufsunfähigkeit)*. Granted if the insured person suffers from occupational invalidity and has completed a qualifying period of at least 60 months.

An insured person is regarded as suffering from occupational invalidity if his earning capacity has been

reduced, as a result of sickness, to less than half that of a healthy worker with comparable training and equivalent ability.

- (b) *Pension for incapacity for work (Rente wegen Erwerbsunfähigkeit)*. Granted if the insured person is unfit for work and has completed a qualifying period of at least 60 months.

An insured person is regarded as unfit for work if, as a result of sickness, he cannot in the foreseeable future pursue any professional or trade activity or is capable only of earning a very low income.

- (c) *Old-age pension (Altersrente)*. Granted, regardless of the insured person's state of health, when he reaches pensionable age and has completed a qualifying period of not less than 180 months. Old-age pension may be granted to:

- Women from their 60th birthday if, over the past 20 years, they have made at least 121 compulsory contribution payments;
- Men and women on reaching age 60 if, within the past year and a half, they were unemployed for at least 52 weeks and remained available for employment in the Federal Republic of Germany during that period;
- Severely disabled persons, those suffering from occupational invalidity or incapacity for work, on reaching age 62 if they have at least 35 insurance years;
- Insured persons on reaching age 63, if they have at least 35 insurance years (this is known as the 'flexible' retirement pension);
- Insured persons on reaching age 65, without any further conditions.

93. *Survivors' pension*

On the insured person's death the widow, widower, previous spouse and orphans qualify for a pension provided the insured person had completed a qualifying period of at least 60 months.

- (a) *A widow's pension (Witwenrente)* is paid to the widow regardless of her age, earning capacity, financial needs, or duration of the marriage. Payment of pension ceases on the widow's remarriage. In lieu of pensions a lump-sum payment may be made of five times the annual amount of pension.
- (b) *A widower's pension (Witwerrente)* is paid to a widower if the deceased wife mainly supported the family. For the rest conditions are the same as for widow's pension.
- (c) *A divorcee's pension (Geschiedenenrente)* is paid to the insured person's former spouse whose marriage ended in divorce, nullity or annulment, provided that the deceased insured person was at the time of his death supporting his former spouse voluntarily or was doing so under a maintenance order. For the rest conditions are the same as for widow's pension.
- (d) *Orphans' pensions (Waisenrente)* are paid on the death of the insured person to his children up to the age of 18, and up to the age of 25 for those attending school or receiving vocational training and for disabled children.

94. *Qualifying period*

The qualifying period (*Wartezeit*) is the minimum period of insurance required to qualify for benefits. In addition

to contribution periods, other periods known as substitute periods (*Ersatzzeiten*) are also counted when the qualifying period is determined. In checking whether the qualifying period for pensions has been completed, account is also taken of any contribution periods you have completed in other Member States.

95. *Claims for pension*

Benefits under pension insurance are only granted if a claim is submitted. When you have returned to your home country or have gone to another Member State, you or your survivors may also apply for your German pensions to the competent institution of that country. You are advised to submit your pension claim before reaching pensionable age (see Part I, 4, B).

96. *Rates of pensions*

Pension rates depend on the following criteria:

- *personal assessment ratio*; this is the ratio of an individual worker's earnings each year to the average earnings of all insured persons for the same year;
- *general assessment rate*, the level of which is fixed anew each year (1975 = DM 16 520 per year);
- the number of insurance years; for this purpose not only actual contribution periods but also substitute periods (*Ersatzzeiten*), interrupted periods (*Ausfallzeiten*) and supplementary periods (*Zurechnungszeiten*) are counted. Any insurance periods that you completed in other Member States are also taken into account when the relevant insurance years are considered and when the pension is calculated;

— *the rate of increase*, which is 1% for pensions in respect of occupational invalidity and 1.5% in respect of incapacity for work and for old-age pensions.

The annual amount of pension is calculated on the basis of the above criteria, in the following manner:

$$\frac{\text{Percentage of personal assessment ratio} \times \text{General assessment rate}}{100} \times \frac{\text{Number of insurance years} \times \text{Rate of increase (1\% or 1.5\%)}}{100}$$

97. *Increases for children*

Pensions are increased for each child under 18 years of age, or under 25 for those attending school or vocational training courses (*Kinderzuschuss*). The rate of the increase is calculated as one-tenth of the general assessment rate (1975 = DM 16 520).

98. *Rate of survivors' pensions*

The rates of survivors' pensions are calculated by reference to the pensions for occupational invalidity or incapacity for work (see Nos 92 (a) and (b)).

The widow's pension amounts to:

- 60% of the pension for occupational invalidity without supplementary periods (see No 96) and children's increase (see No 97);
- 60% of the pension for incapacity for work without children's increase, provided that the beneficiary is over 45 years of age and suffers from occupational

invalidity or incapacity for work or is raising a child qualifying for orphan's pension.

For the first three months following the death of her husband, the widow normally receives her husband's pension at the full rate.

Orphans' pensions are paid at the following rates:

- for fatherless or motherless children, 10% of the pension for incapacity for work;
- for full orphans, 20% of that pension.

99. *Sickness insurance for pensioners*

Every pensioner is automatically insured against sickness without any costs on his part. Those who are voluntarily or privately insured, however, only receive assistance towards their sickness insurance contribution. You can also receive sickness insurance benefits when you have returned to your own country or are residing in another Member State. However, this applies solely if you are not covered by sickness insurance under the legislation of the country in which you reside. In these cases, please apply to the competent sickness insurance institution of your place of stay. For conditions and formalities connected with the granting of benefits, see the information in the section dealing with sickness insurance.

100. *Information on pension insurance for miners*

Persons employed in mining are covered by the special pension insurance scheme for miners (*Knappschaftliche Rentenversicherung*).

The following pensions may be granted:

- (a) miner's pension paid to those whose ability to engage in mining activities has been reduced (*Bergmannsrente wegen verminderter bergmännischer Berufsfähigkeit*);
- (b) miner's old-age pension payable from age 50 (*Bergmannsrente wegen Vollendung des 50. Lebensjahres*);
- (c) miner's pension for occupational invalidity or incapacity for work (*Knappschaftsrente wegen Berufsunfähigkeit oder wegen Erwerbsunfähigkeit*);
- (d) miner's retirement pension (*Knappschaftsruhegeld*).

When you have found a job in the mining industry your employer or the miners' federal insurance fund (*Bundeskknappschaft*) will help you with enquiries (for address, see No 3).

Unemployment insurance

101. Persons entitled to benefits

As a rule, all persons gainfully employed in a manual or clerical occupation or receiving vocational training are, as employed persons (*Arbeitnehmer*) entitled to receive benefits.

102. Benefits for unemployed persons

As a partial substitute for your loss of earnings due to unemployment you are, under certain conditions, entitled to unemployment benefits (*Arbeitslosengeld*) or unemployment assistance (*Arbeitslosenhilfe*) from the employment office.

103. Qualifying conditions for unemployment benefits or unemployment assistance

To qualify for unemployment benefit or unemployment assistance you must

- be unemployed and
- register as an unemployed person with the employment office;
- personally apply to the employment office for the relevant benefit.

The employment officer (*Arbeitsvermittler*) responsible for your occupation or profession deals with unemployment

registration and claims for unemployment benefits. He will give you the appropriate claim form.

A further condition for the grant of benefits is that you should remain available for alternative employment, which means that you

- are able and willing to engage in employment under the normal conditions of the general labour market, of at least 20 working hours a week, and
- are willing to accept any suitable job offered to you.

Should you be able to engage only in employment of less than 20 hours a week owing to reduced capacity for work, you are nevertheless regarded as 'available for employment' so long as you are not suffering from occupational invalidity as defined in German pension insurance legislation (see No 92).

Finally, to be eligible for unemployment benefit you must have completed the required qualifying period.

This condition means that you should have been employed in a job for which compulsory contributions were paid for at least 26 weeks or six months during the last three years preceding your registration as an unemployed person.

Periods of work for which you received no wage or salary cannot be counted. Periods completed under the legislation of another Member State may, under certain conditions, be taken into account.

104. Details of unemployment assistance (*Arbeitslosenhilfe*)

While unemployment cash benefit (*Arbeitslosengeld*) is

paid subject to the worker having completed a qualifying period, unemployment assistance (*Arbeitslosenhilfe*) is granted on condition that, within a period of one year before you registered as an unemployed person, you were receiving unemployment benefit or had engaged in gainful employment for at least 10 weeks.

The award of unemployment assistance is subject to a means test.

105. Duration of benefits

Unemployment benefits are paid for a fixed period depending on the length of preceding contribution periods. Periods completed under the legislation of other Member States are under certain conditions taken into account. Unemployment benefit is granted for up to one year.

Unemployment assistance is granted for an unlimited period as long as the prescribed conditions are fulfilled.

Unemployment benefit and unemployment assistance are awarded up to the end of the month in which you reach the age of 65.

106. When payment begins

Benefits are paid at the earliest from the date of unemployment registration or application for unemployment. This is why you are advised to go to the employment office as soon as you become unemployed. You should also apply to the employment office if you have not yet received all the application forms required.

WHAT TO DO IF YOU BECOME UNEMPLOYED

107. Documents to be submitted

Please complete the claim form with care. Do not forget to state your bank account number so that the employment office can pay benefits. If you have not yet opened an account you should do so at a savings bank, a bank or at the Post Office.

Your employment officer will indicate on the claim form when and where it was issued. When handing in the completed claim form, the following documents should also be submitted:

- Certificate of employment (*Arbeitsbescheinigung*), which will be issued to you by your employer, after which you should give it to the employment office. Please also bring certificates of employment relating to previous jobs.
- Proof of registration with the local police (*Polizeiliche Anmeldung*).

108. The employment office cannot take a decision on your claim for benefits until it has received all the prescribed documents. You will be notified by letter of the office's decision. If you are entitled to benefits you will receive a document known as '*Bewilligungsbescheid*' or '*Änderungsbescheid*' stating that benefits have been awarded to you, the amount of benefit and the date from which they will be paid.

The central office of the Federal Labour Office (*Zentralamt der Bundesanstalt für Arbeit*) in Nürnberg will pay unem-

ployment benefit of unemployment assistance into your bank account every fortnight, as long as you satisfy the qualifying conditions. For all enquiries concerning payment of benefit, please apply to your employment office.

109. Your obligations and duties

(a) *Duty to go to the employment office when you are notified to do so*

While you are unemployed you must go to the employment office whenever you are instructed to do so. Should you fail to turn up, the employment office may cease to pay unemployment benefits or unemployment assistance for six week-days.

(b) *Refusing to take a job offered*

You may only refuse a job offered to you by the employment office if you have valid reasons. If you have not, payment of benefits will be discontinued temporarily, and withdrawn altogether at your second unreasonable refusal.

(c) *Notification of change of circumstances*

You are obliged immediately to inform the employment office—not waiting until you are asked to do so—if any changes in your personal circumstances or the circumstances of the members of your family, if they might in any way affect your entitlement.

The obligation to notify changes applies in particular when

- you return to your home country;
- you take up gainful employment;
- you draw an income from casual work;

- you are unfit for work because of illness;
- you have claimed or are receiving a German statutory pension or a pension under the insurances scheme of another country.

In case of delay or failure to notify changes of circumstances a fine may be imposed; in certain cases, you may even be prosecuted. Unlawfully acquired benefits must be paid back.

110. Sickness and accident insurance protection for unemployed persons

While you are receiving benefit, you and the members of your family are insured against sickness, usually at the sickness fund with which you are currently insured. The sickness fund issues certificates known as '*Krankenscheine*' entitling you and the members of your family to receive medical benefits.

When you fall ill please inform your doctor right away. If the doctor establishes that you are unfit for work you receive a certificate confirming incapacity for work (*Arbeitsunfähigkeitsbescheinigung*). To avoid later disadvantages you are advised immediately to inform the employment office and your sickness fund of your incapacity for work.

Please hand the certificate of incapacity for work given to you by your doctor to the employment office for its information. If you instruct one of the members of your family to do this for you, you should also give him or her the notification you received earlier showing your right to benefits (*Bewilligungsbescheid* or *Änderungsbescheid*).

The sickness fund will need the following documents:

- the certificate of incapacity for work issued by your doctor;
- the employment office's notification;
- the transfer statement (*Überweisungsbeleg*) from your bank, savings bank or the Post Office showing the most recent instalment of unemployment benefit or unemployment assistance credited to your account.

While you are ill the sickness fund will pay you sickness benefits at the rate of your last unemployment benefit or unemployment assistance.

As soon as you are no longer unfit for work, you should again register as an unemployed person with your employment officer at the employment office; at the same time you should make a new claim for benefits.

While receiving benefit you are also protected against certain accidents.

111. Conditions for continued payment of German unemployment benefit when you are going to another Member State

You should first have tried four consecutive weeks to get a job through the German employment office. If by then you have still not got a job, you can extend search for work to other Member States including your home country. Within seven days of the date up to which you were available for employment to the German employment exchange, you should submit the certificate (Form E 303) issued by the German employment office to the local employment authorities of the Member State where you have gone to look for work; the duration and rate of unemployment benefit are indicated on your Form E 303.

While looking for work your position will be checked by the employment authorities of the country concerned, which will pay German unemployment benefit for up to three months, but not in excess of the period during which you are entitled to unemployment benefits, as laid down by German legislation. You are required immediately to notify the local employment authorities to which you have handed certificate E 303 of any change of circumstances that might affect your entitlement to unemployment benefit. Once you have been looking for work outside the Federal Republic of Germany for more than three months, you will forfeit any remaining rights to German unemployment insurance benefits.

112. Further information

The German employment office will be pleased to help you with any queries.

Family benefits

113. Persons entitled to benefits

Subject to the conditions laid down in the Federal Law on Family Allowances (*Bundeskindergeldgesetz*), all persons who have their residence or normal domicile in the Federal Republic of Germany are entitled to family allowance (*Kindergeld*) for their children living in the Federal Republic of Germany.

Family allowances can also be claimed for children living in another Community country by nationals of that country who

- are employed in the Federal Republic of Germany, or
- are receiving sickness benefit or similar benefit by virtue of their employment in the Federal Republic of Germany, or
- are receiving unemployment benefit in the Federal Republic of Germany.

114. Rate of family allowances

Family allowances are paid at the following monthly rates:

- DM 50 for the first child
- DM 70 for the second child
- DM 120 for each additional child.

115. Which children are counted

The following children are eligible for family allowances up of their 18th birthday:

- (a) the worker's legitimate, legitimated and adopted children;
- (b) the worker's step-children belonging to his household;
- (c) the worker's affiliated illegitimate children;
- (d) the worker's grand-children and brothers and sisters whom he has taken into his household or who are largely maintained by him;
- (e) any other children belonging to the worker's household as if they were the worker's own children, who are supported by him.

The worker's own child cannot in principle be counted as belonging to his household if it has been adopted by someone else.

Under certain circumstances a child over 18 but under 27 can still be counted, for instance if it is not yet gainfully employed, but continuing studies (school or vocational training).

Children over the age of 18 are also eligible if they are unable to support themselves for an indefinite period due to physical, mental or psychological handicaps.

116. Children not eligible for family allowances

No family allowances are paid for children for whom you or your spouse are already receiving similar benefits, which are mainly children's increases (*Kinderzulagen*) or sup-

plements (*Kinderzuschüsse*) paid to together with accident pensions or statutory old-age pensions.

Moreover, family allowances are paid at up to half the normal rate or not paid at all in respect of children for whom you or your spouse or any other person is already receiving certain benefits from an institution in your home country, including family allowances, increases in respect of children and children's increases or supplements paid with accident pensions or statutory old-age pensions.

117. Entitlement to family allowances if several persons satisfy the qualifying conditions

Family allowance is paid only to one person in respect of each child. If both you and your spouse are working in the Federal Republic of Germany as employed persons the family allowance is paid to the parent whom you and your spouse jointly designate as the person entitled to receive the allowance.

118. How to claim family allowances

Family allowance is paid on written application only. When claiming please use the special form entitled '*Antrag auf Kindergeld für ausländische Arbeitnehmer*' (claim for family allowances for foreign workers) which is available through your employer or directly from the employment office (*Arbeitsamt*). Please complete the claim form carefully and, if necessary, ask your employer or someone knowing German and your own language to assist you (persons you could ask are, for example, a colleague or someone else who is looking after your welfare).

Please return the completed claim form to your employer, asking him to forward it to the employment office. Claims

can also be handed directly to the employment office or through an authorized person. You can also send your claim to the employment office by post.

119. Documents to be sent with the claim for family allowances

To show that the children named in your claim form exist you should send with your claim an official certificate from an authority in your home country (e.g. a civil status document relating to the members of your family or household). For your children living in other Member States you should use Community Form E 401, available from all German employment offices.

Where children over 18 who are not gainfully employed are to be taken into account the employment office will inform you which further supporting documents you will have to submit.

120. Payment of family allowances

Family allowances are normally transferred to your employer who will pay them out to you. Payments are made regularly at two-monthly intervals, in the course of the second month of the period to which the family allowance relates. For each payment you receive written notification showing you the amount transmitted for you and the months for which it is paid.

121. Changes of which the employment office must be informed automatically

Any changes in the information recorded on claim forms that could affect your entitlement to family allowance must

immediately be notified to the employment office. You must do this especially when one of your children is no longer eligible e.g. because it has terminated vocational training after age 18, and on the death of one of your children.

If an insured person fails to notify the prescribed information he will not only have to pay back family allowances incorrectly paid, but may also have to pay a fine.

Please also inform the employment office immediately when you have changed your place of employment or are relocated by your employer.

If you fail to communicate this information payment of family allowances will be interrupted.

If you are returning to your home country for more than a short period and are still entitled to receive family allowances, please inform the employment office without delay, stating your family allowance number (*Kindergeldnummer*) and your address in your home country to which the remaining family allowances should be transmitted.

122. Further information

For further information not contained in this Guide, please apply to the employment office. In all claims, applications and other correspondence you should always state your family allowance number, which you will find in the notification of payment of family allowances, marked 'KG-Nummer' (*Kindergeldnummer*).

Useful addresses

Doctor

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Dentist

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Chemist

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Sickness fund

(Krankenkasse)

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Professional or trade association

(Berufsgenossenschaft)

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Pension insurance institution

(Träger der Rentenversicherung)

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Employment office

(Arbeitsamt)

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Social Security guides for nationals of the Member States of the European Communities moving from one Member State to another

● **Guide No. 1 — General guide**

This guide sets out the rights and obligations with regard to social security of employed persons going to work in a Member State of the European Communities.

There are nine separate booklets, each containing information concerning one Member State.

● **Guide No. 2 — Temporary stay**

This guide gives information for persons going to a Member State of the European Communities to stay there for a short period (holidays, family visits, business trips).

● **Guide No. 3 — Workers posted abroad or employed in more than one Member State**

This guide is intended for posted workers, international transport workers and other workers regularly employed in more than one Member State (e.g. commercial travellers).

● **Guide No. 4 — Pensioners**

This guide is designed for pensioners who were formerly employed persons and for pension claimants, who reside or stay temporarily in a Member State of the European Communities.

● **Guide No. 5 — Members of the family**

This guide is intended for members of a worker's family who reside in another Member State of the European Communities than the worker.