

MISSOC MUTUAL INFORMATION SYSTEM ON SOCIAL PROTECTION

Social Protection in the Member States of the European Union, the European Economic Area and Switzerland





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The seven-year programme targets all stakeholders who can help shape the development of appropriate and effective employment and social legislation and policies, across the EU-27, EFTA–EEA and EU candidate and pre-candidate countries.

The mission of Progress is to strengthen the EU contribution in support of Member States' commitments and efforts to create more and better jobs and to build a more cohesive society.

To that effect, progress will be instrumental in:

- providing analysis and policy advice on Progress policy areas;
- monitoring and reporting on the implementation of EU legislation and policies in Progress policy areas;
- promoting policy transfer, learning and support among Member States on EU objectives and priorities; and
- relaying the views of the stakeholders and society at large.

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MISSOC

Mutual Information System on Social Protection in the Member States, the European Economic Area and Switzerland

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FOREWORD

Dear MISSOC reader,

The Renewed Social Agenda 2005-2010 focuses on providing jobs and equal opportunities for all and ensuring that the benefits of the EU's growth and jobs drive reach everyone in society. By modernising labour markets and social protection systems, it will help people seize the opportunities created by international competition, technological advances and changing population patterns while protecting the most vulnerable in society.

Accurate, updated and comparable information on the social protection systems in the EU Member States, the European Economic Area and Switzerland serves as a backbone for many EU activities in the social field. It strengthens the analytical capacity which is needed to support these countries to work together and share experiences on action they take to fight poverty and social exclusion, to modernize pensions and sustain high level health care. Moreover, comparable data are a strong asset in the light of the strengthened Social Open Method of Coordination, which provides a framework for political coordination with the view to identify and promote the most effective policies. Finally, also for the European citizens, easy access to detailed information on social security provisions in the various EU Member States is important, as it stimulates and facilitates mobility, one of the key objectives of the European Treaty, crucial for boosting jobs and growth.

I believe that over the last years, the Mutual Information System on Social Protection (MISSOC) has made a substantial contribution in providing the required information to citizens, companies, Public Authorities, Social Security Administrations and the Research Community. The intention of the present MISSOC Publication is to further promote the MISSOC Initiative, and to give the reader a clear insight in what the MISSOC knowledge base can offer, and how it should be used.

The first chapter explains how the information is structured and how it can be retrieved. The annexes include examples and illustrations. To actually consult the latest updated information, the readers are invited to visit the MISSOC section of the DG EMPL website (http://ec.europa.eu/missoc).

I am confident that the present book shall guide its readers to and through the MISSOC information on the DG EMPL website and I look forward to see MISSOC increase its relevance and added value in the coming years, particularly in the light of a more Integrated and Social Europe.

Yours sincerely,

Georg Fischer

Head of Unit Social Protection, Social Services DG Employment, Social Affairs and Equal Opportunities European Commission



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Belgium
Bulgaria

Cyprus
Czech Republic
Denmark
Estonia
Finland
France
Germany
Greece
Hungary
Iceland
Ireland
Italy
Latvia
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INTRODUCTION

This book intends to promote the Mutual Information System on Social Protection (MISSOC) by providing the wider public with an overview of the products it publishes and regularly updates, as well as by explaining the modalities to retrieve this information online. By way of illustration, it also presents a wide selection of examples in the Annexes.

In section II hereafter, the MISSOC initiative, its main aims and working procedures are introduced, while section III is devoted to a more detailed description of the MISSOC information products, including the MISSOC database, which lies at the core of the information system.

The Annexes are meant to illustrate the structure of the "comparative tables" – the building blocks of the MISSOC system – as well to provide selected examples of a number of other MISSOC outputs, such as charts and descriptions of social protection systems, country reports and the synoptic report of a MISSOC Info Bulletin.

It should be noted however that, while the MISSOC information is regularly updated online, all the examples of MISSOC outputs presented in this book - for editorial reasons - refer to January 2008. Access to the complete and up-to-date information base is always available through the MISSOC website: http://ec.europa.eu/missoc.



WHAT IS MISSOC?

The Mutual Information System on Social Protection (MISSOC) was established in 1990 by the European Commission as an instrument to facilitate the continuous and comprehensive exchange of information on social protection between the EU Member States. MISSOC has since been further developed and has become an important central source of information on social protection in all Member States of the European Union. Today the information system includes the 27 Member States, the three countries of the European Economic Area – Iceland, Liechtenstein, Norway– and Switzerland.

MISSOC is based on a close cooperation between the European Commission, the network of the official representatives of the participating countries and the secretariat appointed by the European Commission. The coordination of MISSOC is administered by the European Commission, Directorate-General for Employment, Social Affairs and Equal Opportunities.

To ensure the reliability of information published by MISSOC, each participating country is represented by correspondents from the national ministries or institutions that are responsible for the areas of social protection. The MISSOC National Correspondents are presented in Annex 5: 'MISSOC Correspondents and secretariat'.

The MISSOC Secretariat, appointed by the European Commission, is responsible for the ongoing coordination of the network and the preparation of its publications. These tasks are currently carried out by Bernard Brunhes International (BBI), Brussels, Belgium.

The MISSOC network, which includes the National Correspondents, the representatives from the European Commission and the members of the Secretariat, meets twice a year to maintain and further develop the MISSOC information and other products.

III MISSOC PRODUCTS

The MISSOC Website on the EUROPA server (http://ec.europa.eu/missoc) publishes regularly updated information on all areas of social protection/social security. This information is provided by the MISSOC Network of National Correspondents according to formats and agreements made at the two annual network meetings. The information is then collated to produce the following main products:

- 1. The MISSOC Database and its contents, the MISSOC comparative tables on social protection;
- 2. The charts and descriptions of the organization of social protection in PDF format;
- 3. The descriptions of the social protection of the self-employed in PDF format;
- 4. The MISSOC Info Bulletins;
- 5. The MISSOC Analysis.

All above products and related information are available on http://ec.europa.eu/missoc in three languages (German, English and French).



1 THE MISSOC DATABASE

DESCRIPTION

The MISSOC Database mainly includes the Tables on social protection, which are updated and published twice a year, on the 1st of January and the 1st of July.

They contain a detailed presentation of the statutory regulations regarding the core areas of social protection of each of the 31 countries covered by the system; the content is organised along categories which enable an easy comparison among different countries. For more detailed and in-depth information, a notation to the respective law is also given in the language of the country.

The twelve comparative tables are articulated as follows:

Table I addresses the central aspects of *financing* social protection:

- a) The financing principles for the individual areas of social protection,
- b) The contribution of insured persons and their employer,
- c) The public authorities participation in financing, and
- **d)** The financing system for long-term benefits.

Tables II-XII cover the most important *categories* of social protection:

- II Health Care
- III Sickness/Cash Benefits
- **IV** Maternity/paternity
- V Invalidity
- VI Old Age
- **VII** Survivors

- VIII Employment injuries & occupational diseases
- IX Family Benefits
- **X** Unemployment
- XI Guarantee of sufficient resources
- XII Long-term Care

MISSOC information is mainly limited to general statutory systems of social protection, which – depending upon country and area of protection – are either universal systems covering the entire population, or employment-related systems protecting the 'active' population (i.e. the employed and the self-employed), or systems applying solely to employees.

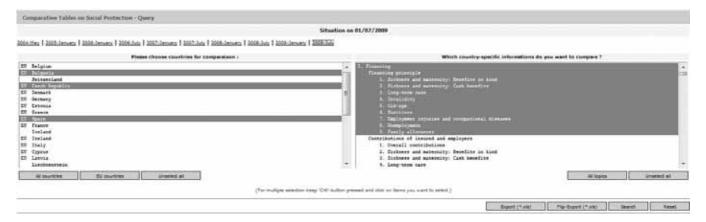
The scope of the general systems is, as a rule, limited to the statutory basic protection, the so- called 'first pillar'. Supplementary systems of the second and third pillars, the ones based on voluntary membership or on collective agreements, are not generally covered by MISSOC.

As a rule, the specific social protection of civil servants is not covered in the Tables. The social protection of the selfemployed is only covered in Tables I-XII if they are a part of the 'general system'. Other systems for the self-employed are covered separately – see below and annex 3.

USING THE DATABASE TO GENERATE COMPARATIVE TABLES

The MISSOC database (http://ec.europa.eu/missoc) includes information from May 2004 onwards and is updated twice a year. The database allows the user to retrieve selected information in a format that facilitates comparison.

The user starts by selecting the year and country or countries of interest. For the specific information fields that need to be compared - and hence retrieved by the system - the user can combine and select various tables, sub-tables and/or individual topics or categories (see illustrative screenshot below. For the complete list of tables and categories, see Annex 1A).



Once selections have been made, the user clicks on the 'search'-button and the system generates a html webpage with all the requested information (see as an example the illustration below)

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The database also enables downloading of the selected information into a standard Microsoft[™] Excel spreadsheet, which allows for more advanced comparisons, table designs and print-outs.

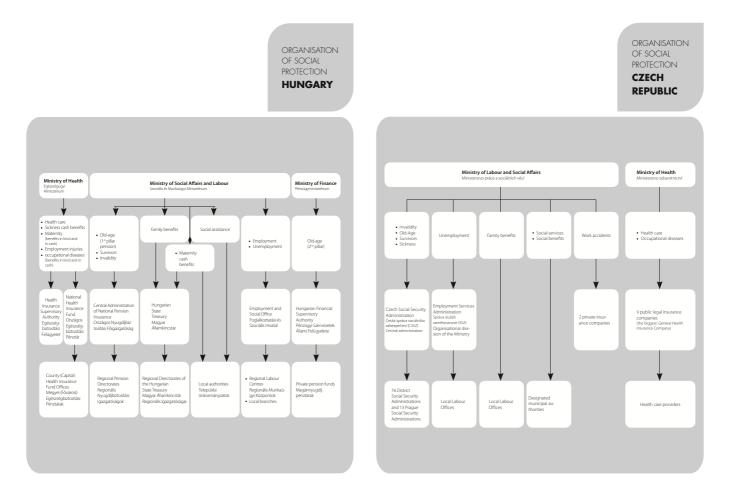
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It is also possible to use the 'Flip-Export'-button, which will generate a Microsoft[™] Excel table with the selected information topics as columns and the selected countries as rows.

Below, annex 1 B presents examples of the information that can be extracted from the MISSOC Database for each of the 12 comparative tables.

2. MISSOC CHARTS AND DESCRIPTIONS OF **THE ORGANISATION OF SOCIAL PROTECTION**

The social protection organisation structure of each country covered by MISSOC is illustrated in a chart and described in a brief text. For quick access to further information, the text also contains the Internet addresses of the Ministries responsible for social protection as well as the other relevant institutions. The 2008 charts and descriptions of the 31 participating countries are included in Annex 2 to the present publication.



3. MISSOC DESCRIPTION OF THE SOCIAL PROTECTION OF THE SELF-EMPLOYED

Because of the many different social protection systems for the self-employed that exist in several countries, the coverage in this section had to be limited. For all those countries where there is no uniform system of social protection of the self-employed, the information is restricted to the basic groups of self-employed farmers, handcrafts men and tradesmen. Specific schemes for members of the classic 'liberal professions' are currently not included. The reports on the self-employed in all participating countries are included as annex 3 in this publication.

4. MISSOC INFO BULLETINS

MISSOC Info Bulletins are complementary to the tables in the MISSOC Database, providing more descriptive and comprehensive information in a broader perspective. The MISSOC Info Bulletins consist of an introduction written by the Secretariat's experts and summarising the overall major trends, followed by the individual national reports prepared by the National Correspondents. They are usually produced twice a year.

(1) The first annual issue is dedicated to a description of the main developments of social protection during the preceding year, in the 27 EU Member States, the EEA countries and Switzerland.

(2) The second annual issue covers a specific topic of social protection. Several areas of social protection have been described in recent years, in line with the social policy concerns at European level.

For illustrative purposes, the present publication includes in Annex 4 the MISSOC Info I bulletin of 2008 as well as 3 from the 31 country reports which contributed to the development of this MISSOC Info bulletin. For other issues of the MISSOC Info bulletins, we refer to the MISSOC webpages at http://ec.europa.eu/missoc

5. MISSOC ANALYSIS

The MISSOC Analysis provides a detailed overview of significant developments in a selected field of social protection. Each year, another theme is identified in function of the social protection priorities at EU level. The MISSOC Analysis should contribute to the work within the Open Method of Coordination in the field of social protection and social inclusion. The MISSOC Analysis is written by experts of the MISSOC Secretariat on the basis of the information included in the Comparative Tables. Data from the MISSOC tables are extracted and contextualized against the backdrop of the theoretical policy framework set by key documents in the field of European social policy, linking overall developments and mechanisms to existing practices in the participating countries.

The MISSOC Analysis is downloadable from http://ec.europa.eu/missoc



Persons wishing to be kept updated on MISSOC activities and products can register to the MISSOC electronic e-newsletter which is sent out by the MISSOC Secretariat twice a year. To subscribe to this e-newsletter, visit www.missoc.org

ANNEX 1 Comparative tables

1A. TABLES I TO XII – STRUCTURE AND CATEGORIES

Detailed list of the 306 categories dealt with throughout the 12 tables

TABLE I: FINANCING

+ Financing principle

- 1. Sickness and maternity: Benefits in kind
- 2. Sickness and maternity: Cash benefits
- 3. Long-term care
- 4. Invalidity
- 5. Old-age
- 6. Survivors
- 7. Employment injuries and occupational diseases
- 8. Unemployment
- 9. Family allowances

+ Contributions of insured and employers

+ Rates and ceiling

- 1. Overall contributions
- 2. Sickness and maternity: Benefits in kind
- 3. Sickness and maternity: Cash benefits
- 4. Long-term care
- 5. Invalidity
- 6. Old-age
- 7. Survivors
- 8. Employment injuries and occupational diseases
- 9. Unemployment
- 10. Family allowances
- **11.** Other special contributions

+ Public authorities' participation

- 1. Sickness and maternity: Benefits in kind
- 2. Sickness and maternity: Cash benefits
- 3. Long-term care
- 4. Invalidity
- 5. Old-age
- 6. Survivors
- 7. Employment injuries and occupational diseases
- 8. Unemployment
- 9. Family allowances
- 10. General non-contributory minimum

+ Financing systems for long-term benefits

- 1. Invalidity
- 2. Old-age
- 3. Survivors
- 4. Employment injuries and occupational diseases

TABLE II: HEALTH CARE

+ Applicable statutory basis

- + Basic principles
- + Field of application
 - 1. Beneficiaries
 - 2. Exemptions from the compulsory insurance
 - 3. Voluntarily insured persons
 - 4. Eligible dependants

+ Conditions

- 1. Qualifying period
- 2. Duration of benefits

+ Organisation

- 1. Doctors Approval
- Appioval
- Remuneration
- 2. Hospitals

+ Benefits

- 1. Medical treatment
 - Choice of doctor
 - Access to specialists
 - Payment of doctorPatient's participation
 - Exemption or reduction of patient's participation
- **2.** Hospitalisation:
 - Choice of hospital
 - Patient's participation
 - Exemption or reduction of patient's participation
- 3. Dental care
 - Treatment
- Dental prosthesis
- 4. Pharmaceutical products
- 5. Prosthesis, spectacles, hearing-aids
- 6. Other benefits



TABLE III: SICKNESS – CASH BENEFITS

- + Applicable statutory basis
- + Basic principles
- + Field of application
 - 1. Beneficiaries
 - 2. Membership ceiling
 - 3. Exemptions from compulsory insurance

+ Conditions

- 1. Proof of incapacity for work
- 2. Qualifying period
- 3. Other conditions

+ Waiting period

+ Benefits

- 1. Benefits paid by employers
- 2. Benefits of social protection
 - Amount of the benefits
 - Duration of benefits
 - Special conditions for unemployed persons
 - Death grant
 - Other benefits

+ Taxation and social contributions

- 1. Taxation of cash benefits
- 2. Limit of income for tax relief or tax reduction
- 3. Social security contributions from benefits

TABLE IV: MATERNITY/PATERNITY

- + Applicable statutory basis
- + Basic principles
- + Field of application
 - 1. Benefits in kind
 - 2. Cash benefits
- + Conditions
 - 1. Benefits in kind
 - 2. Cash benefits
- + Benefits
 - **1.** Benefits in kind
 - 2. Maternity leave
 - Prior to and after confinement
 - Continuation of payment by the employer
 - 3. Cash benefits
- + Taxation and social contributions
 - 1. Taxation of cash benefits
 - 2. Limit of income for tax relief or tax reduction
 - **3.** Social security contributions from benefits

TABLE V: INVALIDITY

- + Applicable statutory basis
- + Basic principles
- + Field of application
- + Exemptions from compulsory insurance
- + Risk covered
- + Conditions
 - 1. Minimum level of incapacity for work
 - 2. Possibility of review
 - **3.** Period for which cover is given
 - 4. Minimum period of affiliation for entitlement

+ Benefits

- 1. Determining factors for the amount of benefits
- 2. Calculation method, pension formula or amounts
- 3. Reference earnings or calculation basis
- **4.** Non-contributory periods credited or taken into consideration
- 5. Supplements for dependants
 - Spouse
 - Children
 - Other dependents
- 6. Minimum pension
- 7. Maximum pension
- 8. Other benefits

+ Adjustment

- + Accumulation with other social security benefits
- + Accumulation with earnings from work

+ Return to active life

- 1. Rehabilitation, retraining
- 2. Preferential employment of handicapped persons

+ Taxation and social contributions

- **1.** Taxation of pension benefits
- 2. Limit of income for tax relief or tax reduction
- 3. Social security contributions from pension



TABLE VI: OLD-AGE

- + Applicable statutory Basis
- + Basic principles
- + Field of application
- + Exemptions from compulsory insurance
- + Conditions
 - **1.** Minimum period of membership
 - 2. Conditions for drawing full pension
 - 3. Legal retirement age
 - Standard pension
 - Early pension
 - Deferred pension
- + Benefits
 - 1. Determining factors
 - 2. Calculation method or pension formula
 - 3. Reference earnings or calculation basis
 - **4.** Non-contributory periods credited or taken into consideration
 - 5. Supplements for dependants
 - Spouse
 - Children
 - Other dependants
 - 6. Special supplements
 - 7. Minimum pension
 - 8. Maximum pension
 - 9. Early pension
 - 10. Deferment
- + Adjustment
- + Partial pension
- + Accumulation with earnings from work
- + Taxation and social contributions
 - **1.** Taxation of pension benefits
 - 2. Limit of income for tax relief or tax reduction
 - **3.** Social security contributions from pension

TABLE VII: SURVIVORS

- + Applicable statutory basis
- + Basic principles
- + Field of application
- + Exemptions from compulsory insurance
- + Entitled persons
- + Conditions
 - 1. Deceased insured person
 - 2. Surviving spouse
 - 3. Divorced spouse
- 4. Surviving partner of cohabitant
- 5. Children
- 6. Other persons

+ Benefits

- 1. Surviving spouse,, divorced spouse, surviving partner
- 2. Surviving spouse: remarriage
- 3. Orphan children (having lost one parent or both parents)
- 4. Other beneficiaries
- 5. Maximum for all those entitled to benefits
- 6. Other benefits
- 7. Minimum pension
- 8. Maximum pension

+ Taxation and social contributions

- 1. Taxation of cash benefits
- 2. Limit of income for tax relief or tax reduction
- 3. Social security contributions from benefits



TABLE VIII: EMPLOYMENT INJURIES AND OCCUPATIONAL DISEASES

- + Applicable statutory basis
- + Basic principles
- + Field of application
 - 1. Beneficiaries
 - **2.** Exemptions from the compulsory insurance

+ Risks covered

- 1. Employment injuries
- 2. Travel between home and work
- 3. Occupational diseases

+ Conditions

- 1. Employment injuries
- 2. Occupational diseases
- + Benefits
 - **1.** Temporary incapacity:
 - Benefits in kind
 - Free choice of doctor or hospital
 - Payment of costs and contribution by person involved
 - Benefits in cash
 - Waiting period
 - Duration
 - Amount of the benefit
 - 2. Permanent incapacity
 - Minimum level of incapacity giving entitlement to compensation
 - Possibility of review
 - Basic earnings used for calculating annuity
 - Amount or formula
 - Supplements for dependants
 - Supplements for care by another person
 - Redemption
 - Accumulation with new earnings from work
 - Accumulation with other pensions
 - 3. Death
 - Surviving spouse
 - Orphans
 - Dependent parents and other relatives
 - Maximum for all beneficiaries
 - Capital sum on death
 - 4. Rehabilitation
 - 5. Other benefits
- + Adjustment
- + Taxation and social contributions
 - 1. Taxation of cash benefits
 - 2. Limit of income for tax relief or tax reduction
 - 3. Social security contributions from benefits

TABLE IX: FAMILY BENEFITS

+ Applicable statutory basis

- + Child benefit
 - **1.** Basic principles
 - **2.** Field of application: beneficiaries
 - 3. Conditions
 - Residence of the child
 - Other conditions
 - **4.** Age limit
 - 5. Benefits
 - Monthly amounts
 - Variation with income
 - Variation with age
 - 6. Special cases:
 - Unemployed persons
 - Pensioners
 - Orphans

+ Child-raising allowances / benefits

- **1.** Basic principles
- 2. Field of application: beneficiaries
- 3. Conditions
- 4. Amounts of benefits

+ Child care allowances

- 1. Basic principles
- 2. Field of application: beneficiaries
- **3.** Conditions
- 4. Amounts of benefits

+ Other benefits

- **1.** Birth and adoption grants
- **2.** Allowance for single parents
- 3. Special allowances for handicapped children
- 4. Advance on maintenance payments
- 5. Other allowances
- + Adjustment

+ Taxation and social contributions

- 1. Taxation of cash benefits
- 2. Limit of income for tax relief or tax reduction
- 3. Social security contributions from benefits

TABLE X: UNEMPLOYMENT

- + Applicable statutory basis
- + Basic principles
- + Field of application
- + Total unemployment
 - 1. Conditions
 - Main conditions
 - Qualifying period
 - Means test
 - Waiting period
 - 2. Benefits
 - Determining factors
 - Earnings taken as reference and ceiling
 - Rates of the benefits
 - Family supplements
 - Other supplements
 - Duration of payment
 - 3. Sanctions
 - 4. Accumulation with other social security benefits
 - 5. Accumulation with earnings from work

+ Partial unemployment

- 1. Definition
- 2. Conditions
- 3. Rates of the benefits
- 4. Sanctions
- 5. Accumulation with other social security benefits
- **6.** Accumulation with earnings from work

+ Benefits for older unemployed persons

- 1. Measure
- 2. Conditions
- 3. Rates of the benefits
- 4. Accumulation

+ Adjustment

- + Taxation and social contributions
 - **1.** Taxation of cash benefits
 - 2. Limit of income for tax relief or tax reduction
 - **3.** Social security contributions from benefits

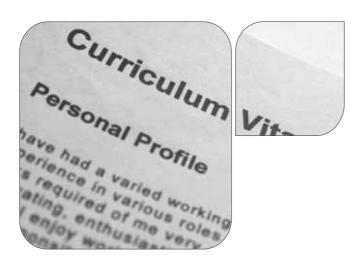


TABLE XI: GUARANTEEING MINIMUM RESOURCES

- + General non-contributory minimum: Designation
- + Applicable statutory basis
- + Basic principles
- + Entitled persons/beneficiaries

+ General conditions

- 1. Duration
- 2. Nationality
- 3. Residence
- 4. Age
- 5. Willingness to work
- 6. Exhaustion of other claims
- 7. Other conditions

+ Guaranteed Minimum

- 1. Determination of the minimum
- 2. Level of determination
- 3. Domestic unit for the calculation of resources
- 4. Resources taken into account

+ Guaranteed amounts

- 1. Categories
- 2. Specific supplements and single benefits
- 3. Guaranteed minimum and family allowances
- 4. Examples
- 5. Relations between the amounts
- + Recovery
- + Indexation

+ Taxation and social contributions

- 1. Taxation of cash benefits
- 2. Limit of income for tax relief or tax reduction
- 3. Social security contributions from benefits

+ Measures stimulating social and professional integration

- + Associated rights
- 1. Health
- 2. Housing and heating
- + Other specific non-contributory minima:

I. Old-age

- 1. Designation
- 2. Principle
- 3. Main conditions of eligibility
- 4. Amount payable

II. Invalidity

- 1. Designation
- 2. Principle
- 3. Main conditions of eligibility
- 4. Amount payable

III. Other specific non-contributory minima

This table has been restructured in 2010.

TABLE XII: LONG-TERM CARE

- + Applicable statutory basis
- + Basic principles
- + Risk covered
- + Field of application
- + Conditions
 - 1. Age
 - 2. Qualifying period
- + Benefits in kind
 - 1. Home care
 - 2. Semi-stationary care
 - 3. Nursing home care
 - **4.** Other benefits
- + Cash benefits
 - 1. Home care
 - 2. Semi stationary care
 - 3. Nursing home care
 - 4. Other benefits
- + Participation of the beneficiary
- + Accumulation
- + Taxation

This table has been restructured in 2009.



ANNEX 1 COMPARATIVE TABLES

1B. EXAMPLES OF COMPARATIVE TABLES

The following pages include **examples** of the information that can be retrieved from the MISSOC Database for each of the 12 comparative tables.

For each table and each category, 4 countries are presented, alternating the countries and following the alphabetical order of country names in their national language.

The information in the present comparative tables reflects the situation on January 1st 2008. For more up-to-date information we refer to http:// ec.europa.eu/missoc

To facilitate comparisons, the monetary amounts are shown in Euros and in the national currency in the case of countries outside the Euro zone. As a basis for calculation, the official exchange rate from 2nd of January 2008 is used.

CATEGORIE	COUNTRIES COMPARED	Pages
I. Financing	Belgium – Bulgaria – Switzerland- Czech Republic	23 - 38
II. Health care	Denmark – Germany - Estonia – Greece	39 - 48
III. Sickness - cash benefits	Spain- France –Iceland - Ireland	49 - 54
IV. Maternity/Paternity	Italy – Cyprus – Latvia – Liechtenstein	55 - 60
V. Invalidity	Lithuania – Luxembourg - Hungary – Malta	61 - 72
VI. Old-age	The Netherlands - Norway – Austria – Poland	73 - 84
VII. Survivors	Portugal – Romania – Finland – Slovenia	85 - 94
VIII. Employment injuries & occupational diseases	Slovakia – Sweden - UK – Belgium	95 - 106
IX. Family benefits	Bulgaria - Switzerland – Czech Republic - Denmark	107 - 116
X. Unemployment	Germany - Estonia – Greece - Spain	117 - 136
XI. Guarantee of sufficient resources	France –Iceland – Ireland - Italy	137 - 150
XII. Long-term care	Cyprus – Latvia – Liechtenstein - Lithuania	151 - 160

COMPARATIVE TABLES

FINANCING

BELGIUM - BULGARIA - SWITZERLAND - CZECH REPUBLIC



FINANCING	
BELGIUM	BULGARIA
	BULGARIA
FINANCING PRINCIPLE	
1. Sickness and maternity: Benefits in kind	
A part of global management: global contribution, global State sub- sidies, alternative financing (VAT), which varies according to need.	Contributions (employer and insured person) and taxes.
2. Sickness and maternity: Cash benefits	
A part of global management: global contribution, global State sub- sidies, alternative financing (VAT), which varies according to need.	Contributions (employer and insured person).
3. Long-term care	
No single, discrete long-term care scheme.	No single discrete long-term care scheme.
4. Invalidity	
A part of global management: global contribution, global State sub- sidies, alternative financing (VAT), which varies according to need.	Contributions (employer and insured person). State Budget covers deficit.
5. Old-age	
A part of global management: global contribution, global State sub- sidies, alternative financing (VAT), which varies according to need.	Contributions (employer and insured person). State Budget covers deficit.
6 Suminore	
6. Survivors	
A part of global management: global contribution, global State sub- sidies, alternative financing (VAT), which varies according to need.	Contributions (employer and insured person). State Budget covers deficit.
7. Employment injuries and occupational diseases	
A part of global management: global contribution, global State sub- sidies, alternative financing (VAT), which varies according to need. For employment injuries insurance by the employers.	Contributions (employer).
8. Unemployment	
A part of global management: global contribution, global State sub- sidies, alternative financing (VAT), which varies according to need.	Contributions (employer and insured person).
9. Family allowances	
A part of global management: global contribution, global State sub- sidies, alternative financing (VAT), which varies according to need.	Taxes.

SWITZERLAND	CZECH REPUBLIC
Premiums [contributions] and participation of the insured.	Contributions (insured persons and employers) and State budget.
Sickness: Premiums [contributions].	Contributions (insured persons and employers).
Maternity (APG scheme): Contributions (insured persons and employers).	
No single, discrete long-term care scheme.	No single, discrete long-term care scheme. Care as part of health care is financed from the health insurance, social care is financed by the state care allowance to persons, state and region grants to providers and pocket money.
1	
1 st pillar (basic scheme): Contributions (insured persons and employers) and taxes. The helplessness allowance (Hilflosenentschädigung/alloca- tion pour impotent) is exclusively financed by the Confederation.	Contributions (insured persons and employers).
2 nd pillar (statutory minimum): Premiums [contributions] (insured persons and employers).	
1 st pillar (basic scheme): Contributions (insured persons and employers) and taxes. The helpless- ness allowance (Hilflosenentschädigung/allocation pour impotent) is exclusively financed by the Confederation.	Contributions (insured persons and employers)
2 nd pillar (statutory minimum): Contributions (insured persons and employers).	
1	
1 st pillar (basic scheme): Contributions (insured persons and employers) and taxes.	Contributions (insured persons and employers).
2 nd pillar (statutory minimum): Premiums [contributions] (insured persons and employers).	
Premiums [contributions] (employers).	Contributions (employers).
Contributions (employees and employers) with participation by the Confederation.	Contributions (insured persons and employers).
 Federal scheme: Agricultural workers: contributions (employers) and taxes. Self-employed farmers: taxes. 	Taxes.
Cantonal schemes: Contributions (employers; in one canton, also employees). Participation of the cantons in financing allowances for the self-employed and people not engaged in paid employment.	

-

BELGIUM	BULGARIA
ONTRIBUTIONS OF INSURED AND EMPLOYERS	
ates and Ceiling	
Overall contributions Principle: global management. Basic contribution: 37.84% total, of which • 24.77% employer, • 13.07% employee. "Wage moderation" contribution (cotisation de modération salariale/ Loonmatigingsbijdrage): • 7.48% employer. Contribution for firms having 10 or more workers: 1.69% employer. Contribution for health care levied on civil servants: 7.35% total, of which • 3.55% civil servant, • 3.80% State. No ceiling.	 The State Public Insurance (Държавно обществено осигуряване) covers all risks except health care. It is based on gross earnings and varies according to two factors. The first factor is the category of labour. There are three categories relating to how dangerous/arduous the occupation may be with the 3rd category being the least arduous/ dangerous. The second factor is the range of risks against which a person is insured. The range of coverage is determined by law for particular categories of people. In some cases the range of coverage can be extended through voluntary participation in the insurance. (1) 3rd category persons born before 01.01.1960 26.5% + x 3rd category persons born after 31.12.1959 21.5% + x 1st and 2nd category: 3% additional. (2) Insured for all risks except unemployment: 3rd category persons born before 01.01.1960 25.5% + x 3rd category persons born before 01.01.1960 25.5% + x 3rd category persons born after 31.12.1959 22.5% + x 1st and 2nd category: 3% additional. (2) Insured for all risks except unemployment: 3rd category persons born before 01.01.1960 22.5% + x 3rd category persons born before 01.01.1960 22.0% + x 3rd category persons born after 31.12.1959 17.0% + x 1st and 2nd category: 3% additional. (4) Insured for invalidity due to general illness, old-age and death (freelance, professional farmers and sole entrepreneurs): all categories: 22.0% The persons from this group can at their wish voluntarily insure themselves against all other risks except employment injury/occupational disease and unemployment.^{*x'} is the contribution for employment injury/disease which varies between 0.4 and 1.1% according to the group of economic activities of the employer. The social insurance contribution shall be divided between the insurers and the insured persons in a certain ratio that for 2008 is 60:40 respectively. Contributions for employment injury income per month varies according to occupation and industrial branch. M
Sickness and maternity: Benefits in kind	
Part of the contributions from global management, which varies according to need.	6% of gross earnings (shared 60:40 between employers and employees). Minimum amount of the contributory income per month varies according to occupation and industrial branch. Minimum amount of the contributory income per month for self insured: BGN 240 (€ 123). Ceiling of contributory income: BGN 2,000 (€ 1.023) per month.
Sickness and maternity: Cash benefits	
Part of the contributions from global management, which varies according to need.	Included in the overall contribution: 3.5% of gross earnings are apportioned to this risk from the global contribution.

SWITZERLAND	CZECH REPUBLIC
No overall contributions.	No overall contributions.
Individual premium set by the insurer. Equal premiums for people insured by the same insurer. The insurer may grade the premiums if costs differ between cantons and regions. Lower premiums for insured per- sons under the age of 18 (children). The insurer may set a lower premium for insured persons under the age of 25 (young adults). Average premium in Switzerland for an adult (accident risk included): CHF 315 (€ 191) per month in 2008.	 Employees: 13.5% of gross salary total, of which 4.5% employee, 9.0% employer. Ceiling: 48 multiplied by monthly average wage [CZK 1,034,880 (€ 39,254)] per annum. Self-employed: 13.5% of the assessment base (= 50% of their income from business and from other independent gainful activity minus costs incurred to achieve, secure and maintain such income). Ceiling: 48 multiplied by monthly average wage [CZK 1,034,880 (€ 39,254)] per annum.
 Sickness: Premium set by the insurer. Equal premiums for equal insured benefits, with the possibility of grading premiums according to the age of entry to the scheme or the region. Maternity/APG scheme: 0.3% of gross salary (total), of which 0.15% employee, 0.15% employer. Self-employed: 0.3% of gross professional income. Reduction of the contribution rate according to a digressive scale above an income threshold. No ceiling or threshold for contributions by the active population. People not engaged in paid employment pay a contribution between CHF 13 (€ 7.86) and CHF 300 (€ 181) per year, according to their social conditions. 	 Employees: 4.4% of gross salary total, of which 1.1% employee, 3.3% employer. Ceiling: 48 multiplied by monthly average wage [CZK 1,034,880 (€ 39,254)] per annum. Self-employed (voluntary): 4.4% of declared earnings (declared earnings = 50% of difference between income and expenses). Ceiling: 48 multiplied by monthly average wage [CZK 1,034,880 (€ 39,254)] per annum.

	BELGIUM	BULGARIA	
4. Long-term ca	are		
	No single, discrete long-term care scheme.	No single discrete long-term care scheme.	
5. Invalidity			
	Part of the contributions from global management, which varies according to need.	Included in the overall contribution.	
6. Old-age	P		
	Part of the contributions from global management, which varies according to need.	 1st Pillar: Included in the overall contribution. 2nd Pillar: Supplementary compulsory pension insurance in professional funds: 1st category: 12% of gross earnings. 2nd category: 7% of gross earnings. Supplementary compulsory pension insurance in universal funds for persons born after 31 December 1959: 5% of gross earnings or declared earnings. Contributions in professional funds are paid solely by employers. 	
7. Survivors			
	Part of the contributions from global management, which varies according to need.	Included in the overall contribution.	
8. Employment	injuries and occupational diseases		
	Insurance premiums or contributions based on the rates of ap- proved insurance enterprises. Part of the contributions from global management, which varies according to need.	Included in the overall contribution: 0.4 to 1.1% of gross earnings are apportioned to this risk from the global contribution according to the group of general economic activities of the employer. This contribution is paid solely by the employer.	
9. Unemploym	ent		
	Part of the contributions from global management, which varies according to need.	Included in the overall contribution: 1% of gross earnings are appor- tioned to this risk from the global contribution.	
10. Family allow	vances		
	Part of the contributions from global management, which varies according to need. Lump-sum contributions paid by employers for each worker employed before 1st January 1999 and who is not subject to social security contributions.	No contributions.	

SWITZERLAND	CZECH REPUBLIC
No single, discrete long-term care scheme.	No single, discrete long-term care scheme.
 1st pillar (basic scheme): 1.4% of gross salary (total), of which 0.7% employee, 0.7% employer. Self-employed: 1.4% of gross professional income. Reduction of the contribution rate according to a digressive scale above an income threshold. No ceiling or threshold for contributions by the active population. People not engaged in paid employment pay a contribution between CHF 62 (€ 37.51) and CHF 1,400 (€ 847) per year, according to their social conditions. 2nd pillar (statutory minimum): Old-age contribution (see "Old-age") also covers the risks of invalidity and death. 	Contributions included in the rates shown under "Old-age".
 1st pillar (basic scheme): 8.4% of gross salary (total), of which 4.2% employee, 4.2% employer. Self-employed: 7.8% of gross professional income. Reduction of the contribution rate according to a digressive scale above an income threshold. No ceiling or threshold for contributions by the active population. People not engaged in paid employment pay a contribution between CHF 370 (€ 224) and CHF 8,400 (€ 5,082) per year, according to their social conditions. 2nd pillar (statutory minimum): Contributions vary between 7 and 18% of the insured salary, depending on the age of the insured person (oldage credits). The insured salary (= coordinated salary) is the part of the annual salary between CHF 23,205 (€ 14,039) and CHF 79,560 (€ 48,134). The sum of the employees. 	Basic Pension Insurance (Důchodové pojištění) (covers old-age, survivor's and invalidity pensions): Employees: 28.0% of gross salary total, of which: 6.5% employee, 21.5% employer. Ceiling: 48 multiplied by monthly average wage [CZK 1,034,880 (€ 39,254)] per annum. Self-employed: 28% of declared earnings (declared earnings = 50% of difference between income and expenses). Ceiling: 48 multiplied by monthly average wage [CZK 1,034,880 (€ 39,254] per annum.
Contributions included in the rates shown under "Old-age".	Contributions included in the rates shown under "Old-age".
Premiums paid by the employer, in ‰ of insured salary. The amount of the premiums depends on the risk. Ceiling: CHF 126,000 (€ 76,230) per year.	Insurance contribution varies according to risk (between 0.2% and 1.2% of gross earnings) paid by the employer.
2% of the determining salary, of which 1% employee, 1% employer. Ceiling: CHF 126,000 (€ 76,230) per year.	 State Employment Policy (Státní politika zaměstnanosti): Employees: 1.6% of gross salary total, of which 0.4% employee, 1.2% employer. Ceiling: 48 multiplied by monthly average wage [CZK 1,034,880 (€ 39,254)] per annum. Self-employed: 1.6% of declared earnings (declared earnings = 50% of difference between income and expenses). Ceiling: 48 multiplied by monthly average wage [CZK 1,034,880 (€ 39,254)] per annum.
 Federal scheme (agricultural workers): Employee: none. Employer: 2% of the salary (in cash and in kind). Cantonal schemes (other employees): Employee: none (except one canton: 0.3%). Employer: from 0.1 to 4% depending on the canton and the fund. 	No contributions, tax financed.

BELGIUM	BULGARIA
11. Other special contributions	
 Sickness and maternity: A share of the contributions of 5% or 10% levied on car insurance premiums. 10% contribution levied on hospitalisation insurance premiums. Royalties paid by the pharmaceutical firms on certain products of theirs and contributions related to the turnover of the pharmaceutical industry achieved on the Belgian market. A 3.55% deduction from pension amounts. This deduction may not reduce the monthly pension to less than € 1,402.01 or - in the case of a person with no dependants - to less than € 1,182.99. 	The insurance contribution to the Teachers Pension Fund is paid entirely by the employer and amounts to 4.3%. The contribution to the Factory and Office Workers' Guaranteed Claims Fund is paid entirely by the employer and amounts to 0.5%.
Invalidity: A share of the contributions of 5% or 10% levied on car insurance premiums. Old-age, survivors: 3.5% deduction from invalidity benefit (in-	
 demnités d'invalidité/invaliditeitsuitkeringen) and pre-retirement pensions (prépensions/prepensioenen): entire deduction for a daily allowance of € 52.79 and for the entitled person with a dependant and € 43.82 for the entitled person without dependants; partial deduction for a daily allowance between € 50.95 and € 52.78 (with dependants) and between € 42.30 and € 43.81 (without dependants); inapplicable for a daily allowance of € 50.94 or less with dependants and € 42.29 without dependants. After deduction, preretirement pensions cannot be lower than € 1,439.83 or € 1,195.35 per month, for the entitled recipient with or without a dependent person. 8.86% contribution levied on group insurance policies. Contributions for every early retiree of € 24.79 per month, paid by the employers. Progressive solidarity contribution (cotisation de solidarité/solidariteitsbijdrage) from 0% to 2% according to the amounts of pension and the pensioners' family situation. Levying from € 1,571.92 (with dependants) and € 1,257.53 (without dependants). 	
 Unemployment: Flat-rate employer contribution on pre-retirement pensions on basis of collective agreements (prépensions conventionnelles/ conventioneel brugpensioen): € 24.80 to € 111.55 according to the category and to the circumstances of the pre-retirement pension; special compensatory employer contribution for certain pre-retirement pensions equal to 50% or 33% (when the pensioner is replaced by an unemployed person receiving complete benefits since at least one year) of the supplementary allowance (indemnité complémentaire/ aanvullende vergoeding) to the unemployment benefit (allocations de chômage/werkloosheidsuitkeringen); 1% or 3% deduction on pre-retirement pensions provided that the amount after deduction (and after the 3.5% general deduction for pensions sector) is not below € 1,439.83 (with dependants) or € 1,195.35 (without dependants). 	
 Other contributions or deductions not allocated to a particular branch: Special social security contributions: collection of lump-sum, progressive amounts related to household income. Percentage of revenues from VAT. Solidarity employer contribution depending on CO2 emission rate in case of non professional use of a company car supplied by the employer to the employee. Employers' contribution of 0.04% for the financing of paid parental leave. Employers' contribution of 0.05% for the fosterage of children. Contribution of 33% on one-off performance-related advantages. Employers' contribution of 0.01% for the asbestos fund. 	

SWITZERLAND	CZECH REPUBLIC
Old-age, survivors, invalidity (1 st pillar, basic scheme) and benefits in cash in case of maternity (APG scheme): Employers, self-employed, people not engaged in paid employment and persons under the optional insurance scheme pay to the compensation funds a contribution for the administrative costs up to a maximum of 3% of the sum of the contributions due.	No other special contributions.
persons under the optional insurance scheme pay to the compensation funds a contribution for the administrative costs up to a maximum of 3%	

BELGIUM	BULGARIA
LIC AUTHORITIES'PARTICIPATION	
Sickness and maternity: Benefits in kind Part of global subsidies provided to the global management, depending on needs.	 Contributions for pensioners are paid by the State Budget based on the amount of the pension or pensions. Contributions for recipients of unemployment benefits are paid by the State Unemployment Fund (Фонд "Безработица") based on the amount of the benefit. A contribution of 0.5% of the minimum contributory income for the self-insured is paid from the State Budget (minimum contributory income for the self-insured is paid from the State Budget (minimum contributory income is currently BGN 240 (€ 123) per month) for: Persons under 18 years; students over 18 years until completion of secondary education. State Budget pays the health insurance contribution (currently 6% of half of the minimum contributory income for self-insured persons) on behalf of: students up to the age of 26 and persons taking a doctorate degree; persons performing their regular military service; socially vulnerable persons with a right to social assistance or accommodated in social care centres; persons in the process of acquiring refugee status or right to asylum; war veterans and war invalids; invalids injured while performing their duty to the state; parents adopters or spouses taking care of invalids with lost capacity for work over 90% who need permanent assistance; spouses of military servicemen participating in international operations and missions for the period of that mission. The State Budget covers 30% of the employer's contracted by the Agency for People with Disabilities (Агенция за хората c
ickness and maternity: Cash benefits	увреждания).
Part of subsidies provided to the global management, depending on needs.	State Budget pays contributions (3.5% of gross earnings) on behalf of: Civil servants; soldiers and other military personnel; the judiciary including judges, prosecutors, investigators, bailiffs, judges for the entries and court employees (covered by the "Judiciary Budget"). The State Budget covers 30% of the employer's contributions paid for people with disabilities working for employers contracted by the Agency for People with Disabilities (Агенция за хората с
	увреждания).
Long-term care	
No single, discrete long-term care scheme.	No single discrete long-term care scheme.

SWITZERLAND

CZECH REPUBLIC

 Cantons finance a system to reduce the premiums for insured persons of modest means. For this purpose, the Confederation grants to cantons yearly subsidies corresponding to 7.5% of gross expenses of the insurance [in 2008: federal subsidies up to CHF 1,779 million (€ 1,076 million)], distributed according to the population of each canton. Contributions by cantons to costs for hospitals. 	 State pays contributions on behalf of certain groups of insured persons. Pensioners; children; students at secondary school or university; jobseekers registered at a Labour Office; those on military or civilian service; persons caring for a child up to the age of 4 years (18 years if child suffers from a long-term severe disability that requires special care); persons caring for a close incapacitated relative; women on maternity leave; arrested people, etc. The assessment base for contributions: 25% of the general assessment base which is laid down by the Government Regulation.
No participation by the public authorities.	No participation of public authorities.
No single, discrete long-term care scheme.	No single, discrete long-term care scheme. Care as part of health care is financed from the health insurance, social care is financed by the state care allowance to persons, state and region grants to providers and pocket money.

	BELGIUM	BULGARIA
4. Invalidity		
	Part of subsidies provided to the global management, depending on needs.	 State Budget makes contributions (22% gross earnings + 3% for those working under 1st or 2nd category) on behalf of: Civil servants; soldiers and military personnel; parents (adoptive parents) or spouses for the period of taking care of a disabled person who has lost over 90% of their working capacity and need permanent assistance provided the parent (adoptive parent) or spouse was not insured and has not received a pension during that period; the judiciary including judges, prosecutors, investigators, bailiffs, judges for the entries and court employees (covered by the "Judiciary Budget"). The State Budget covers 30% of the employer's contributions paid for people with disabilities working for employers contracted by the Agency for People with Disabilities (Агенция за хората с увреждания).
5. Old-age		
6 Cuminara	Part of subsidies provided to the global management, depending on needs.	See "Invalidity".
6. Survivors		
	Part of subsidies provided to the global management, depending on needs.	See "Invalidity".
7. Employmen	t injuries and occupational diseases	
	Part of subsidies provided to the global management, depending on needs.	 State Budget pays contributions (0.4 to 1.1% gross earnings) on behalf of: Civil servants; soldiers and other military personnel; the judiciary including judges, prosecutors, investigators, bailiffs, judges for the entries and court employees (covered by the "Judiciary Budget"). The State Budget covers 30% of the employer's contributions paid for people with disabilities working for employers contracted by the Agency for People with Disabilities (Агенция за хората с увреждания).
8. Unemploym		
	Part of subsidies provided to the global management, depending on needs.	State Budget pays contributions (3% gross earnings) on behalf of: Civil servants; soldiers and other military personnel, the judiciary including judges, prosecutors, investigators, bailiffs, judges for the entries and court employees (covered by the "Judiciary Budget"). The State Budget covers 30% of the employer's contributions paid for people with disabilities working for employers contracted by the Agency for People with Disabilities (Агенция за хората с увреждания).
9. Family allow	vances	
	Part of subsidies provided to the global management, depending on needs.	Entirely financed by the State Budget.

 SWITZERLAND		CZECH REPUBLIC
 1st pillar (basic scheme): Confederation: 37.7% of annual expenditure. 2nd pillar (statutory minimum): No participation by the public authorities. 		No participation of public authorities.
 1st pillar (basic scheme): Confederation: 19.55% of annual expenditure. VAT: 83% of a VAT point is allocated to old-age and survivors' insurance. Revenues from the tax on gambling clubs. 2nd pillar (statutory minimum): No participation by the public authorities. 		No participation of public authorities.
	1	
See "Old-age".		No participation of public authorities.
No participation by the public authorities.		No participation of public authorities.
The Confederation contributes to the costs of the employment service and of the active labour market programmes at the rate of 0.15% of the total amount of salaries subject to contributions (from 2006 to 2008: 0.12%, unless the compensation fund debts exceed 2.5% of the total amount of salaries subject to contributions at the end of 2006 or 2007). If necessary, the Confederation grants short-term loans according to the labour market conditions.		No participation of public authorities.
Federal scheme: The deficit in the agricultural workers' scheme is covered by the Confederation (2/3) and the cantons (1/3); the self-employed farmers' scheme is financed by the Confederation (2/3) and the cantons (1/3). Cantonal schemes: None. Participation of the cantons in financing family allowances for the self-employed and persons not engaged in paid employment.		Financed by the State.

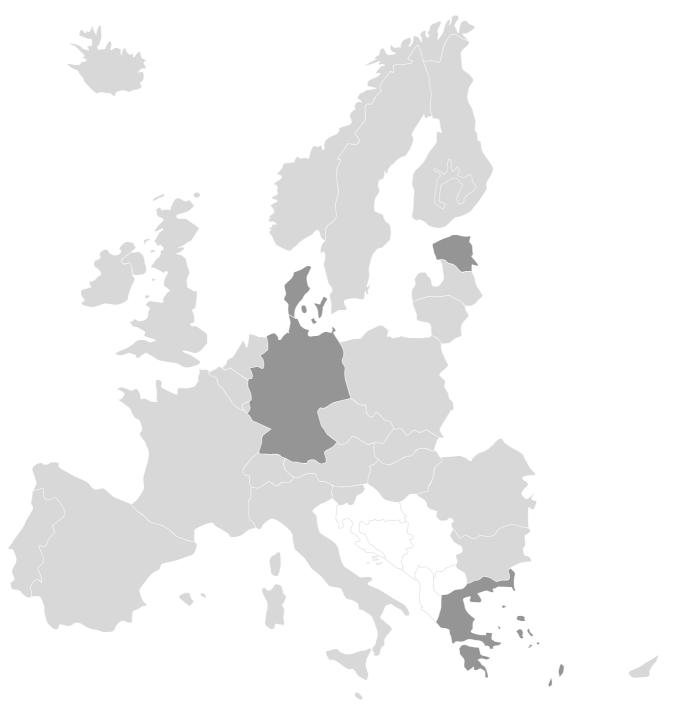
FINANCING

	BELGIUM	BULGARIA	
10. General non-contribu	itory minimum		
assistance	e (increased in certain cases). 50% Public centres for social e (Centres publics d'Action sociale, C.P.A.S./Openbare Cen- naatschappelijk welzijn, O.C.M.W.).	Entirely financed by the State Budget.	
FINANCING SYSTEMS	FOR LONG-TERM BENEFITS		
1. Invalidity			
Current ir	ncome financing ("pay as you go").	Current income financing ("pay-as-you-go").	
2. Old-age	·		
Current ir	ncome financing ("pay as you go").	Current income financing ("pay-as-you-go") for persons born before the 1 January 1960 and combined system (PAYG and fully funded) for persons born after the 31 December 1959 and those working under 1st and 2 nd labour category.	
3. Survivors	·		
Current ir	ncome financing ("pay as you go").	Current income financing ("pay-as-you-go") for persons born before the 1 January 1960 and combined system for persons born after the 31 December 1959.	
4. Employment injuries a	nd occupational diseases		
	nent injuries: Funded. Occupational diseases: Current nancing ("pay as you go").	Current income financing ("pay-as-you-go").	

Financed by the State.
Current income financing ("pay as you go").
Current income financing ("pay as you go").
Current income financing ("pay as you go").
Current income financing ("pay as you go").

|| HEALTH CARE

DENMARK - GERMANY - ESTONIA - GREECE



II HEALTH CARE	
DENMARK	GERMANY
APPLICABLE STATUTORY BASIS	
Act No. 546 of 24 June 2005 on Health (om sundhedsloven).	Social Code (Sozialgesetzbuch), Book V, introduced by the Health Reform Act (Gesundheits-Reformgesetz) of 20 December 1988 and most recently further developed by the Act on Strengthening Competition in Statutory Health Insurance [Gesetz zur Stärkung des Wettbewerbs in der gesetzlichen Krankenversicherung (GKV - WSG)] of 26 March 2007.
BASIC PRINCIPLES	
Tax financed universal public health service for all residents.	Compulsory social insurance scheme for employees and categories of persons assimilated thereto up to a certain income limit and with income-related contributions.
FIELD OF APPLICATION	
1. Beneficiaries	
All residents.	 Persons in paid employment and those receiving vocational training, trainees. Pensioners with a sufficient period of insurance. Unemployed, receiving benefits of unemployment insurance. Disabled persons in sheltered employment. Trainees in vocational rehabilitation so as people being trained for some form of employment in special training institutions of the youth assistance (Jugendhilfe). Students of recognised higher education. Farmers and helping members of their family. Artists and writers. Persons having no other right to the provision of services if ill (under certain conditions).
2. Exemptions from the compulsory insurance	
Not applicable: universal system.	No compulsory insurance for employees with annual earnings exceeding € 48,150 or € 43,200 for persons who were privately insured on 31 December 2002 or for persons in insignificant employment (up to € 400 per month). Civil servants, magistrates, professional soldiers and the full-time self-employed do not pay contributions.
3. Voluntarily insured	
Not applicable: universal system.	Voluntary insurance is possible for persons in the case of previous insurance periods after withdrawal from compulsory insurance or from family insurance.
4. Eligible dependants	
Not applicable: universal system. All residents are individually covered.	✓ Spouse and children, income not exceeding € 355 or € 400 per month if employed in insignificant employment, provided they are not insured in their own right, or active as self-employed. Age limit for children. Some other exclusions. Divorced spouses to a mar- riage can insure themselves within 3 months after the divorce has become final (previous insurance periods necessary).
CONDITIONS	
1. Qualifying period	
From 01.01.2007 no qualifying period. Entitlement from regist in the National Register of residence in Denmark.	tration No qualifying period required. Exception: claimants must fulfil con- ditions of entitlement for receiving dentures (for certain categories of persons).

	ESTONIA	GREECE
Esto Heal	th Insurance Act (Ravikindlustuse seadus) 2002. nian Health Insurance Fund Act (Eesti Haigekassa seadus) 2000. th Services Organisation Act (Tervishoiuteenuste korraldamise lus) 2001.	Law of 14 June 1951. Law No. 1902/92 last modified by Law No. 2676/99 of 5 January 1999.
activ popi pens	pulsory social insurance scheme for all persons with economic vity (employees and self-employed); large groups of the non-active ulation are covered on the basis of solidarity (e.g. all children and sioners) or by contributions paid on their behalf by the State. ides a benefit in kind system.	Compulsory social insurance scheme for employees and assimilated groups.
(st se w ch str pr pr pr pr ar e pr e pr pr pr	nployees on whose behalf the employer has paid Social Tax otsiaalmaks); If-employed who have paid social tax themselves, persons on hose behalf the State has paid social tax (see table I ""Financing""); ilidren up to 19 years of age; udents in daytime studies up to 24 years of age; regnant women from the 12 th week of pregnancy; ensioners; ersons with up to 5 years left before reaching pensionable age who e maintained by their spouses who are insured persons; cipients of unemployment allowance (töötutoetus) and unem- oyed who do not receive it, but have registered as unemployed on hose behalf the Labour Market Board pays Social Tax (sotsiaalmaks).	 Employees and persons assimilated thereto. Pensioners. Unemployed.
No e	exemptions.	No exemptions.
in	ersons who prior to their voluntary membership had been sured for at least twelve months; ersons receiving a pension from a foreign State.	Voluntary insurance possible for persons who are no longer insured because of long term unemployment, or because they were insured as dependants and this dependency does no longer exist due to a divorce.
	endant spouse. dren are individually covered, see above.	Dependant members of the insured family.
m pe 12 ar St 3 in pe 31 fo	 4 days for persons who work on the basis of a contract of employent or service entered into for a term exceeding one month and ersons working in public service; 2 days of the making of an entry on commencement of the insur- ice cover in the health insurance database for persons for whom the ate is required to pay Social Tax (sotsiaalmaks); months of the making of an entry on commencement of the surance cover in the health insurance database for self-employed ersons; I days of the making of an entry in Labour Market Board database r unemployed who do not receive unemployed allowance (töötuetus). 	50 days of work subject to contribution over the preceding year, or in the 12 first months of the 15 months preceding the illness.

II HEALTH CARE

DENMARK	GERMANY
2. Duration of benefits	
Unlimited.	Unlimited. When an employee withdraws from the insurance scheme, benefits cease to be paid basically at the end of member- ship; for compulsory members entitlement to benefits continues for maximum one month after the end of membership.
ORGANISATION	
1. Doctors:	
Approval	
All doctors qualified to practise (numbers limited by district accord- ing to number of inhabitants).	Contracted doctors who are members of the associations of sickness fund doctors (Kassenärztliche Vereinigungen) at regional and national level, health care centres, doctors in hospitals, and in special cases doctor-run institutions.
Remuneration	
Fees are fixed by agreement between the Danish Medical Associa- tion and the public health service. General practitioner's (GP) fees are calculated according to the number of patients registered and of the medical services performed. Specialists are paid a flat-rate sum for each medical action. Hospital doctors are, in general, paid on the basis of a monthly salary plus certain supplementary pay- ments.	Remuneration package to the association of sickness fund doctors (Kassenärztliche Vereinigung) by the sickness insurance: the remu- neration can be a fixed amount or based on the criteria of either in- dividual services provided, or of a flat-rate per head, or according to a system resulting from a combination of these or further methods of calculation. The association of sickness fund doctors distributes the remuneration package among the Contracted doctors on the basis of a certain scale (payment distribution scale). The associa- tion of sickness fund doctors and the associations of sickness funds agree on the payment distribution scale.
2. Hospitals	
Public hospitals established by regional health authorities. Private hospitals: the regional health authorities may conclude agreements with some of the private hospitals.	The sickness funds pay in-patient care in university clinics and hos- pitals included in the respective Land's hospital requirement plan or with which the Länder associations of sickness insurance funds have concluded agreements (approved hospitals). So far treatment was remunerated mainly in accordance with hospital charges per diem within a cost-oriented budget. From 2005 to 2009 such budget will gradually be transformed into a service-related budget on the basis of a single price level per Land. The treatment will be compensated by the sickness insurance funds case-related within the budget on a diagnosis-related flat-rate per case (DRG).
BENEFITS	
1. Medical treatment:	
Choice of doctor	
Every resident can choose once a year between two groups: Group 1 entitles to free medical treatment by GP who has joined collective agreement with the Public Health Service. Group 2 entitles to free choice of medical practitioner - also among GPs who have not joined collective agreement. The Public Health Service in this group only pays - in principle - a part of the doctor's fee.	Free choice among contracted sickness insurance fund doctors.
Access to specialists	
Group 1: The GP refers each particular case to the specialist. Group 2: Free choice.	Free choice among contracted specialists.
Payment of doctor	
The public health service at a regional level pays the public health service's contribution directly to the doctor.	System based in principle on benefits in kind. No fees paid by insured; fees are paid by the association of sickness fund doctors (Kassenärztliche Vereinigung). The insured can choose the reim- bursement of costs.

ESTONIA	GREECE
Unlimited. Insurance coverage for employees continues 2 months after the payment of Social Tax (sotsiaalmaks) has stopped. Coverage for persons for whom the State pays Social Tax continues 1 month after the last payment.	Unlimited.
Doctors employed in State, municipal or private health institutions or private doctors with whom the Health Insurance Fund (Haigekassa) has entered into a contract.	All doctors employed by the social insurance institute IKA-ETAM (ΙΔΡΥΜΑ ΚΟΙΝΩΝΙΚΩΝ ΑΣΦΑΛΙΣΕΩΝ, ΕΝΙΑΙΟ ΤΑΜΕΙΟ ΑΣΦΑΛΙΣΗΣ ΜΙΣΘΩΤΩΝ).
 Doctors in the State and municipal health institutions are salaried. General practitioners can also be self-employed. Health Insurance Fund (Haigekassa) pays for services to health institutions or private doctors according to a fee-for-service based price list approved by the Government. 	Doctors are paid by the social insurance institute IKA-ETAM (ΙΔΡΥΜΑ ΚΟΙΝΩΝΙΚΩΝ ΑΣΦΑΛΙΣΕΩΝ, ΕΝΙΑΙΟ ΤΑΜΕΙΟ ΑΣΦΑΛΙΣΗΣ ΜΙΣΘΩΤΩΝ).
Health institutions contracted with Health Insurance Fund (Haigekassa) on fee-for-service basis.	Public hospitals and registered private clinics and hospitals of the social insurance institute IKA-ETAM (ΙΔΡΥΜΑ ΚΟΙΝΩΝΙΚΩΝ ΑΣΦΑΛΙΣΕΩΝ, ENIAIO TAMEIO ΑΣΦΑΛΙΣΗΣ ΜΙΣΘΩΤΩΝ).
Free choice of general practitioner.	In urban regions, the insured choose the family doctor according to a list. In rural areas, there is no free choice; the insured goes to the local insur- ance institute doctor.
Access to specialists by referral of the patient's general practitioner. Access to psychiatrist, gynaecologist, dermatovenereologist, oculist, trau- matologist or surgeon in case of emergency surgery is possible without a referral from the general practitioner.	The insured may visit the specialists in the regional institution of the social insurance institute by appointment according to a waiting list. In urgent cases they may also have access to a private specialist.
	Frontie de service and an estaltada affaite estalt transmission tratteres
Benefits in kind system.	Family doctors and specialists of the social insurance institute: Benefits-in kind system. No fees. Private specialists: Advance on fees by insured person. Refund by the social insurance institute at the rate fixed by the government.

II HEALTH CARE

DENMARK	GERMANY
Patient's participation	
Group 1: No charges (Treatment by the chosen GP or a specialist to whom he refers the patient). Group 2: The part of expenses which exceeds the amount fixed by the public scheme for Group 1.	The patient pays a practice fee of \in 10 per quarter at his first visit to the doctor in the quarter (certain medical check-ups are excluded). The patient' participation for aids (e.g. massages, baths or physio-therapy) which are part of the medical treatment is 10% and \in 10 per prescription.
Exemption or reduction of patient's participation	
No exemptions or reductions.	No co-payment for children. Exemption of participation for expenses above 2% (1% in case of chronic diseases) of the gross income. Reduction of co-payment for early-detection measures and bonus models.
2. Hospitalisation:	
Choice of hospital	
Free choice of public hospital. Patients can also choose a private hospital in Denmark or abroad with agreement with the regional health authorities if the waiting time after referral to treatment in a regional public hospital is more than 1 month.	Free choice of licensed hospitals.Hospital treatment requires the admission by a medical doctor (except for emergencies).
Patient's participation	
Public hospitals, approved private establishments and private hospi- tals with agreement with the regional health authorities: No charge. Non-approved private establishments: patients pay all costs.	Free hospitalisation in a shared room with exception of participa- tion of € 10 per calendar day during a maximum of 28 days.
Exemption or reduction of patient's participation	
Non-approved private establishments: In the case where a public hospital refers a patient to a private establishment: no charge.	No charge for children.
3. Dental care: Treatment	
Cost to insured person in both categories: From 35% to 60% of the cost of treatments on list. 100% for treatment not included in the list. Treatment is free for children and partially covered for disabled persons.	Full compensation of medically necessary conservative and surgical dental treatment. Full compensation of necessary orthodontist care for insured persons aged less than 18. A system for persons up to 18 years of age of prophylactic measures designed to prevent dental disease.
Dental prosthesis	
For pensioners: depending on their financial situation and medical condition, the municipalities can cover 85% of the participation to the expenses by means of the Health allowance (Helbredstillæg).	As of 1 January 2005 the insured person is entitled to receive diagnosis-related fixed subsidies, which correspond to 50% of the fixed standard care determined by the Joint Federal Committee (Gemeinsamer Bundesausschuss). No contribution for medically conservative treatment and for denture radiography. When the in- sured person takes measures to maintain healthy teeth, the benefit is increased by a bonus of 20% or 30%.

ESTONIA	GREECE
Up to EEK 50 (\in 3.20) per home visit or for a visit for out-patient specialised medical care (set by the Board of the Hospital).	No charges.
 In case of a specialised doctor, the fee shall not be demanded from: children under 2 years of age; pregnant women from the 12th week of pregnancy; people who will receive stationary medical care after inevitable ambulant care. In case of a home visit of doctor (or specialised doctor), the fee shall not be demanded from: children under 2 years of age; pregnant women from the 12th week of pregnancy. 	Not applicable: no charges.
Referral by general practitioner or specialist.	The insured has the right to hospitalisation in a public hospital or in a registered clinic designated by the insurance institute or in a hospital of the social insurance institute (ΙΚΑ-ΕΤΑΜ) (ΙΔΡΥΜΑ ΚΟΙΝΩΝΙΚΩΝ ΑΣΦΑΛΙΣΕΩΝ, ΕΝΙΑΙΟ ΤΑΜΕΙΟ ΑΣΦΑΛΙΣΗΣ ΜΙΣΘΩΤΩΝ).
For the services provided in standard conditions of accommodation. Not for more than 10 calendar days for one case of disease and not for more than EEK 25 (\in 1.60) for a day.	No charges.
 In-patient fee shall not be demanded for: Periods of intensive care; in-patient specialised medical care in connection with pregnancy or delivery; in-patient medical care to a minor. 	Not applicable: no charges.
 Free treatment for children up to 19 years of age. A higher rate of benefit shall be established by a regulation of the Minister of Social Affairs (sotsiaalminister) for: Pregnant women; mothers of children under 1 year of age; persons who have an increased need for dental treatment services as a result of health services provided to them (e.g. surgical treatment of face traumas). 	As for health care.
Pensioners receive cash benefits for prosthesis once every three years.	As for health care but charge of 25% for dental prosthesis.

II HEALTH CARE

DENMARK	GERMANY
4. Pharmaceutical products	
 Participation of the insured person dependent on the expenditures for medicines on list during the year: Expenditure under DKK 445 (€ 60): 100% of cost (persons under the age of 18: 50%). Expenditure between DKK 445 (€ 60) and DKK 1,080 (€ 145): 50%. Expenditure between DKK 1,080 (€ 145) and DKK 2,535 (€ 340): 25%. Expenditure over DKK 2,535 (€ 340): 15%. The public health service can in special cases: contribute for medicines not on list; raise the contribution when an expensive medicine is necessary; contribute fully to medicine for dying persons; determine that for persons with an extensive, permanent and professionally well-documented need for medicinal products the reimbursement rate shall be 100% of the part of the total copayment which is in excess of DKK 3,270 (€ 439) per year. 	 Insured person's participation: A 10%-participation of the dispensing price, at least € 5 and a maximum of € 10 and not more than the price of the product, except for children and insured persons once a certain amount of expenses has been exceeded. If there are fixed-price pharmaceutical products, the amount of contribution payable depends on this fixed price. If the price of the product exceeds the fixed price, the patient must pay the difference between the fixed price and the prescribed product, in addition to the set prescription charge. The sickness insurance funds and the pharmaceutical companies may negotiate rebates on pharmaceuticals of which the price is higher than the fixed price in order to compensate for the additional costs. Non-prescribable drugs are not paid for by the insurance. Exceptions: children up to the age of 12 showing developmental disability and the exceptions determined by the Joint Federal Committee in its guidelines for such cases, where non-prescribable drugs are part of the standard therapy for the treatment of serious diseases. Insured persons must pay for over-the-counter drugs (Bagatellarzneimittel) and life-style drugs. Certain uneconomical drugs are not paid for by the insurance.
5. Prosthesis, spectacles, hearing-aids	
Medical aids and remedies are contributed free of charge to patients in hospitals if they are part of the treatment given in the hospitals. Appliances for disabled persons are paid by hospitals if these are needed only temporarily.	The prices for medical supplies are agreed between the sickness funds and the care providers. If there are fixed amounts determined for medical supplies, these constitute the ceiling for the contract prices. Participation of the insured: 10% of the cost for aids, at least $\in 5, \in 10$ at most, not more than the price of the product. 10% of the costs for remedies plus an additional $\in 10$ per prescription; children are excepted. The entitlement to vision aids is limited to children and young persons up to the completion of the age of 18 and to insured persons with severe vision impairments. Therapeutic vision aids used for treatment of eye injuries or eye diseases are excluded from this restriction.
6. Other benefits	
Free assistance and treatment given by nurse at home if recom- mended by a doctor. Share of cost for transport to doctor or hospi- tal for pensioners who are insured in Group 1, and in certain other cases and circumstances. For both categories of insured persons, share of cost is met for dietetic nutrition prescribed by a doctor, treatment by chiropractor, physiotherapist, chiropodist or psycholo- gist to whom the general practitioner has referred the insured.	 Other benefits of sickness insurance: Home care: Basic nursing and treatment as well as household assistance. Participation: 10% of the daily costs for the first 28 days in the calendar year, plus € 10 per prescription, except for children. Household aid, i.e. replacement in the household, or payment of cost of household assistant. Participation: 10%, at least € 5 and € 10 at most. Never more than the actual cost. In certain cases the cost for rescue and transport to the hospital or the doctor are covered; Participation per journey: 10%, at least € 5 and € 10 at most. Never more than the actual cost. Payment of medical services for ambulatory preventive or rehabilitative services; contribution to the other costs of ambulatory preventive services (accommodation, nursing, transportation) up to € 13 or € 21 for chronically ill infants per day. Full compensation with a € 10 co-payment by the insured patient per day for preventive and curative services for mothers, except for children and insured persons, once a critical limit has been exceeded. Full compensation for institutional preventive or rehabilitative services, except for co-payment of insured person of € 10 per day, except for children. Benefits of long-term care insurance: see table XII "Long-term care".

	ESTONIA	GREECE
to th For li Healt 10 Ios Syl 75 Ste 90 pe sic	erally, insured persons pay EEK 50 (€ 3.20) + 50% of the remainder up le reference price for all prescription pharmaceuticals. isted chronic diseases patients pay EEK 20 (€ 1.28). th Insurance Fund (Haigekassa) pays: 10% of the remainder up to the reference price (for i.a. HIV, tubercu- sis, oncology diseases, diabetics, epilepsy, transplantation, leprosy, philis, cancerous diseases, psychical derangements, glaucoma). 5% of the remainder up to the reference price (for i.a. hypertonia, enocardia, bronchial asthma, acute and chronic nephritis). 10% for children up to 10 years of age; persons receiving invalidity ension according to the State Pension Insurance Act (Riikliku pen- onikindlustuse seadus); and for insured persons over 63 years of age. rence between the patients' payment and the actual price is com- sated to the pharmacies by the Health Insurance Fund (Haigekassa).	Charge of 25% for medicines prescribed by doctor. 10% contribution towards cost of medication prescribed for certain ill- nesses (Parkinson's disease, Paget's disease, Crohn's disease, etc.). 10% contribution towards cost of medication for retired persons receiv- ing the minimum pension. No charges payable in the event of an employment accident, for medica- tion during pregnancy and for chronic illnesses (cancer, diabetes etc.).
aids a techr	porary prosthesis after amputation, internal prosthesis and stoma are paid for by the Health Insurance Fund (Haigekassa). Further nical appliances are provided in the framework of social assistance financed from the State Budget.	Charge limited to 25% maximum.
may	vecial cases (e.g. lack of specialists or medical equipment), the patient be referred to medical treatment abroad with the approval of the d of the Health Insurance Fund.	Various benefits, such as cost of travelling for the sick living in distant regions, subject to certain conditions.

III SICKNESS - CASH BENEFITS

SPAIN - FRANCE - ICELAND - IRELAND



III SICKNESS - CASH BENEFITS	
SPAIN	FRANCE
APPLICABLE STATUTORY BASIS	
Social Security General Act (Ley General de la Seguridad S approved by Legislative Royal Decree No. 1/94 of 20 June Decree No. 3158/66 of 23 December 1966 and other prov Ministerial Order of 13 October 1967. Royal Decree No. 13 21 July 1995.	e 1994.die des travailleurs salariés, RGAMTS): Social Security Code (Codevisions.de la sécurité sociale), Articles L 323-1, and following. Several other
BASIC PRINCIPLES	
Compulsory social insurance scheme for employees and groups with contribution-related benefits for temporary i (Incapacidad temporal).	
FIELD OF APPLICATION	
1. Beneficiaries	
All employees. Special scheme for the self-employed (see	e annex). All working population except for certain self-employed.
2. Membership ceiling	
No membership ceiling.	No membership ceiling.
3. Exemptions from compulsory insurance	
All salaried work which is considered marginal and not a means to earn one's living.	basic No exemptions.
CONDITIONS	
1. Proof of incapacity for work	
Incapacity for work certified by a doctor of the Public Hea vices (Servicios Públicos de Salud). The certificate has to b on 4 th day of absence and received by employing firm wi following its dispatch.	be issued maladie des travailleurs salariés, RGAMTS): Rest prescription by the
2. Qualifying period	
Contributions paid for 180 days during 5 years prior to the leave in case of common illness. No contribution period i accident.	
3. Other conditions	
No other conditions.	General scheme for employees (Régime général d'assurance mala- die des travailleurs salariés, RGAMTS): No other conditions.
WAITING PERIOD	
3 days.	General scheme for employees (Régime général d'assurance mala- die des travailleurs salariés, RGAMTS): 3 days.
BENEFITS	
1. Benefits paid by employers	
The employer pays sick pay as from the 4 th up to the 15 th leave.	day of sick The employer pays the entire (or a part) difference between the sal- ary and the amount of the sickness cash benefits (indemnités jour- nalières de maladie) of the General scheme for employees (Régime général d'assurance maladie des travailleurs salariés, RGAMTS) in ac- cordance with the national interprofessional agreement on monthly payments of wages or the collective agreement conditions.

ICELAND	IRELAND
Social Security Act (Lög um almannatryggingar) No. 100/2007 of May 2007.	Social Welfare Consolidation Act 2005.
Tax-financed protection scheme for the active population (employees and self-employed) with flat-rate benefits. Continued payment of wages and salaries by the employer during a limited period.	Compulsory social insurance scheme for employees with flat-rate Illness Benefit and supplements for dependants.
All employees and self-employed persons. Specific rules for home-work- ers and students.	With some exceptions, all employees and apprentices aged 16 years and over.
 No membership ceiling.	No membership ceiling.
No exemptions.	Civil and Public Servants recruited prior to 6 April 1995, the self-em- ployed, people aged 66 or over and those earning less than € 38 per week.
 Incapacity for work due to illness certified by a physician.	Incapacity for work certified by a doctor from the first day of illness.
Generally 2 months work prior to illness and 6 months residency for new residents.	 52 weekly contributions paid since first starting employment and 39 weekly contributions paid or credited during the relevant contribution year preceding the benefit year, of which a minimum of 13 must be paid contributions. The latter requirement may be satisfied by contributions paid in some other contribution years, or 26 weekly contributions paid in each of the two relevant contribution years preceding the benefit year.
 Age 16 or older; not receiving old-age or invalidity benefits; incapacity for work due to illness for at least 21 days; ceases gainful employment; wages have ceased. 	No other conditions.
14 days. The waiting period begins on the day when incapacity for work is confirmed by a physician.	3 days.
Statutory continuation of payment for at least 1 month after 12 months of consecutive employment. Collective agreements provide for the continued payment of wages and salaries for a certain period depending on agreements. Sickness cash benefits (sjúkradagpeningar) are not granted until wages have ceased.	No statutory continuation of payment.

III **SICKNESS** - CASH BENEFITS

SPAIN	FRANCE
2. Benefits of social protection	
Amount of the benefits	
From 4 th to 20 th day of sick leave inclusive, 60% of the calculation basis. From the 21 st day, 75% of the calculation basis. Calculation basis: result of dividing the contribution basis of the month prior to the date of leave by the number of days correspond- ing to this contribution.	 General scheme for employees (Régime général d'assurance maladie des travailleurs salariés, RGAMTS): 50% of daily earnings, in a limit of 1/720th of the annual ceiling, maximum € 46.21. 66.66% of daily earnings with a limit of 1/540th of the annual ceiling from 31st day for beneficiaries with 3 children, maximum € 61.62.
Duration of benefits	
12 months. Possibility of extension for 6 months when foreseeable that the beneficiary will become capable for work.	General scheme for employees (Régime général d'assurance maladie des travailleurs salariés, RGAMTS): 12 months (360 days) per period of 3 consecutive years, but until the end of 36 th month for long-term sickness.
Special conditions for unemployed	
No special conditions.	General scheme for employees (Régime général d'assurance mala- die des travailleurs salariés, RGAMTS): No special conditions.
Death grant	
Death Grant (auxilio por defunción): See table VII "Survivors".	General scheme for employees (Régime général d'assurance mala- die des travailleurs salariés, RGAMTS): No benefit of the sickness insurance but see the Death grant (Capital-décès) of the Death insurance (assurance décès) in table VII "Survivors".
Other benefits	
No other benefits.	General scheme for employees (Régime général d'assurance mala- die des travailleurs salariés, RGAMTS): No other benefits.
TAXATION AND SOCIAL CONTRIBUTIONS	
1. Taxation of cash benefits	
Benefits are subject to taxation.	General scheme for employees (Régime général d'assurance maladie des travailleurs salariés, RGAMTS): Benefits are subject to taxation.
2. Limit of income for tax relief or tax reduction	
General taxation rules. No special relief for benefits.	General scheme for employees (Régime général d'assurance maladie des travailleurs salariés, RGAMTS): General taxation rules. No special relief for benefits.
3. Social security contributions from benefits	
Social security contributions have to be paid.	General scheme for employees (Régime général d'assurance mala- die des travailleurs salariés, RGAMTS): Generalised social contribu- tion of 6.2% (contribution sociale généralisée, CSG) and contribu- tion for the repayment of the social debt (contribution pour le remboursement de la dette sociale, CRDS) of 0.5%.

ICELAND	IRELAND
Per diem sickness cash benefits (sjúkradagpeningar) for persons who have to give up full-time gainful employment ISK 1,000 (€ 11). Daily amount for persons who have to give up less than full-time but at least half-time employment ISK 500 (€ 5.44).	 Illness Benefit: € 197.80 per week. Family supplements: Adult dependant: € 131.30 per week. Each child dependant: € 24 per week.
52 weeks in any one period of 24 months.	 Unlimited (to age 66) if the claimant has paid 260 weekly contributions. Limited to 52 weeks if between 52 and 260 weekly contributions paid.
No special conditions.	No special conditions.
No death grant.	A Bereavement Grant is paid on the death of a contributory pensioner, his/her spouse or qualified child, an orphan in receipt of Guardian's Pay- ment (Non-Contributory) or, subject to satisfying contribution condi- tions, an insured person, his/her spouse or qualified child insured person. Benefit rate (payable in respect of deceased): € 850.
Daily supplement for dependant children ISK 270 (\notin 2.94) for each child under age 18. Up to 80% of the cost of stay of parents is paid according to certain rules when children under age 18 are in hospital far from the home.	No other benefits.
Benefits are subject to taxation.	Benefits are fully liable to taxation after 6 weeks payment in any tax year (including supplement for adult dependants but excluding supplements for child dependants).
General taxation rules. No special relief for benefits.	General taxation rules. No special relief for benefits.
No contributions.	No contributions.

IV MATERNITY / PATERNITY

ITALY - CYPRUS - LATVIA - LIECHTENSTEIN



	ITALY	CYPRUS
PPLICABLE STATUTOR		
mothers. La tween mer	204 of 30 December 1971 on the protection of working aw No. 903 of 9 December 1977 on equal treatment be- n and women. Law No. 53 of 8 March 2000 on provisions ity and paternity support.	Social Insurance Law (Νομοθεσία Κοινωνικών Ασφαλίσεων): No. 31/56 of 1957, No. 2/64 of 1964, No. 106/72 of 1972, No. 41/80 of 1980-2007. The Social Insurance (Benefit) Regulations. The Social Insurance (Contribution) Regulations.
ASIC PRINCIPLES		
inhabitants Cash benef	kind: Health service financed by contributions for all s (based on residency). fits: Compulsory social insurance scheme for employees ngs-related benefits.	Benefits in kind: State financed scheme providing benefits in kind to certain categories of the Cypriot citizens (see table II "Health care"). Cash benefits: Compulsory social insurance scheme financed by contributions covering the active population (employees and self- employed) providing earnings-related pensions and other benefits depending on contributions and the duration of affiliation.
FIELD OF APPLICATION		
I. Benefits in kind		
All women	residents.	Certain categories of citizens are entitled to benefits in kind free of charge or at reduced fees (see table II "Health care").
2. Cash benefits		
Maternity b natively the	benefit (indennità di maternità): Insured women or alter- e father.	Maternity Allowance (Επίδομα Μητρότητας): Compulsory insurance for employed and self-employed women. Voluntary insurance possible for women working abroad in the service of Cypriot employers.
		Maternity Grant (Βοήθημα Τοκετού): Insured women and wives of insured men.
CONDITIONS		
1. Benefits in kind		
Registered ale, S.S.N.).	at the National Health Service (Servizio Sanitario Nazion-	Permanent residence and citizenship. These conditions do not apply to recipients of Public Assistance (Δημόσιο Βοήθημα).
2. Cash benefits		
No qualifyi	ng conditions.	 Maternity Allowance (Επίδομα Μητρότητας) and Maternity Grant (Βοήθημα Τοκετού): The insured person has been insured for at least 26 weeks up to the starting date of the commencement of maternity allowance or delivery in the case of maternity grant; lower part paid insurable earnings up to the date of the com- mencement of maternity allowance or delivery in the case of maternity grant equal to at least 26 times the weekly Basic Insur- able Earnings (Βασικές Ασφαλιστέες Αποδοχές) of € 147.45 per week; and paid and credited insurable earnings in the benefit year equal to at least 20 times the weekly amount of Basic Insurable Earnings.
BENEFITS		For obtaining maternity grant the contributions of either the wife's or the husband's may be taken into account. For the definitions of the lower and upper part of insurable earnings and of the benefit year see table III "Sickness - cash benefits", "Qualifying period".
1. Benefits in kind		
	ip as of registration with the National Health Service	Medical care in hospitals, pharmaceutical products, drugs etc. See also table II "Health care".

LATVIA	LIECHTENSTEIN
Law on State Social Insurance (Likums "Par valsts sociālo apdrošināšanu") of 1 October 1997. Law on Maternity and Sickness Insurance (Likums "Par maternitātes un slimības apdrošināšanu") of 6 November 1995.	Sickness Insurance Act (Gesetz über die Krankenversicherung), LGBI. 1971 No. 50. Maternity Allowance Act (Gesetz betreffend Ausrichtung einer Mutterschaftszulage), LGBI. 1982 No. 8.
Benefits in kind: Tax financed compulsory health care system for all inhabitants (based on residency). Cash benefits: Compulsory social insurance scheme providing earning-related benefits.	 Benefits in kind: Compulsory sickness insurance scheme for all persons with residence or economic activity (employees and self-employed) in Liechtenstein. Cash benefits: Compulsory sickness cash benefit (Krankentaggeld) for all employed women with earnings-related benefits. Tax financed and income-dependent Maternity allowance (Mutter- schaftszulage) for not gainfully employed residents (or as differential amount in addition to lower sickness cash benefit (Krankentaggeld) to
	employed women).
 (Permanent) residents; foreign nationals and stateless persons who have been granted a temporary residence permit and have paid personal income tax for at least half a year. 	(1) Female employees. (2) Women resident in Liechtenstein.
Maternity Benefit (Maternitätes pabalsts): Paternity Benefit: (paternitätes pabalsts): Parental Benefit (vecäku pabalsts): Persons who have paid insurance contributions or on whose behalf contributions have been calculated: including all employees and self-employed persons.	Sickness benefit (Krankentaggeld): Female employees over 15 years of age. Maternity allowance (Mutterschaftszulage): Women who are not entitled to sickness benefit.
No qualifying conditions.	Waiting period: the insured person must have been insured for at least nine months without any interruption of more than three months before the day the child is born.
 Maternity Benefit (Maternitātes pabalsts): incapacity for work certified by doctor. Paternity Benefit: (paternitātes pabalsts): No qualifying conditions. Parental Benefit (vecāku pabalsts): Caring for a child under one year of age. 	For sickness benefit (Krankentaggeld) , see "1. Benefits in kind". Womer must not give up their employment earlier than 20 weeks before deliv- ery, unless there is at least a 50% incapacity for work prior to this time. Maternity allowance (Mutterschaftszulage): residency.
Perinatal care, stay in maternity hospital, delivery and postnatal observance. See also Table II "Health care".	Obstetrics by a doctor and midwife and necessary check-ups during pregnancy and the first 10 weeks after giving birth. See also table II "Health care".
Perinatal care, stay in maternity hospital, delivery and postnatal obser-	pregnancy and the first 10 weeks after giving birth. See also tabl

IV MATERNITY / PATERNITY

ITALY	CYPRUS
2. Maternity leave	
Prior to and after confinement	
Maternity benefit (indennità di maternità), only if wage is discontin- ued: 1 or 2 months before the presumed confinement date and 3 or 4 months (in case of one month of abstention before delivery) after (optionally 6 supplementary months). The optional supplementary parental leave (astensione facoltativa dal lavoro) may be requested by the father if the mother does not claim, or if the father has sole charge.	 Maternity Allowance (Επίδομα Μητρότητας): Periodic benefit paid for: Natural mothers: 18 weeks beginning between the 6th and 2nd before the expected week of confinement or the week of delivery. Adoptive mothers: 14 weeks from the week of adoption if child is under 12 years old. Maternity Grant (Βοήθημα Τοκετού): Lump sum payable upon birth.
Continuation of payment by the employer	
Compensation is paid, on behalf of the National Institute for Social Protection (Istituto Nazionale della previdenza sociale, INPS), by the employer. This amount is deducted from the owed contributions.	No statutory continuation of payment unless otherwise indicated by an agreement signed by the employer and the employee.
3. Cash benefits	
80% of earnings for the compulsory period, and 30% for the supple- mentary period.	 Maternity Allowance (Επίδομα Μητρότητας): Basic Benefit (Βασικό Επίδομα): 75% of the lower part of weekly average insurable earnings over the benefit year, increased to 80%, 90% and 100% for one, two or three dependants respectively. Supplementary Benefit (Συμπληρωματικό Επίδομα): 75% of the upper part of weekly average insurable earnings over the benefit year (No fixed maximum amount, earnings ceiling applied). Maternity Grant (Βοήθημα Τοκετού): € 446 per child.
TAXATION AND SOCIAL CONTRIBUTIONS	
1. Taxation of cash benefits	
Benefits are subject to taxation.	Benefits are not subject to taxation.
2. Limit of income for tax relief or tax reduction	
General taxation rules. No special relief for benefits.	Not applicable: benefits are not subject to taxation.
3. Social security contributions from benefits	
No contributions.	No contributions.

LATVIA	LIECHTENSTEIN
 Maternity Benefit (Maternitätes pabalsts) is paid for 112 calendar days (56 days for pregnancy leave and 56 calendar days for childbirth leave). 14 additional days of leave and benefit for women who have received continuous medical care commencing before the 12th week of pregnancy. Further 14 days are also available if there are complications during pregnancy, delivery or post-natal period and in case of multiple births. Paternity Benefit (paternitätes pabalsts) is paid for 10 calendar days of child father's leave. Parental Benefit (vecāku pabalsts): is paid to persons who are on child care leave or continued to work during the child care period (are not on 	20 weeks, of which at least 16 weeks after confinement (see also "Cash benefits").
child care leave) and who raise children under 1 year of age.	
No statutory continuation of payment.	No statutory continuation of payment.
 Maternity Benefit (Maternitātes pabalsts): 100% of the average gross wages upon which contributions have been paid during six months. This six-month period applies from two months before the month in which the incapacity occurred. Paternity benefit (paternitātes pabalsts): 80% of the average gross wages upon which contributions have been paid during six months. This six-month period starts two months before the month in which the incapacity occurred. Paternity benefit (vecāku pabalsts): 70% of the average gross wages upon which contributions have been paid during six months the incapacity occurred. Parental Benefit (vecāku pabalsts): 70% of the average gross wages upon which contributions have been paid during 12 months, but not less than LVL 63 (€ 90) per month. This 12-month period starts three months before the month of the child's birth. 	Sickness benefit (Krankentaggeld): at least 80% of lost wages includ- ing regular supplementary allowances. Maternity allowance (Mutterschaftszulage): Dependant on spouse's income and number of children. Minimum CHF 500 (€ 302), maximum CHF 4,500 (€ 2,722).
Benefits are not subject to taxation.	The maternity allowance (Mutterschaftszulage) is not subject to taxation. Sickness benefit (Krankentaggeld) is subject to taxation.
Not applicable. Benefits are not subject to taxation.	General taxation rules. No special relief for benefits.
No contributions.	No contributions.

V INVALIDITY

LITHUANIA - LUXEMBOURG - HUNGARY - MALTA



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	LITHUANIA	LUXEMBOURG	
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APPLICABLE STAT			
dimo Law grac Law Marc Law 13 D Law įstaty Law socia	on State Social Insurance Pensions (Valstybinių socialinio drau- o pensijų įstatymas) of 18 July 1994 (No. I-549). on Social Integration of the Disabled (Invalidų socialinės inte- ijos įstatymas) of 28 November 1991 (No. I-2044). on Transport Privileges (Transporto lengvatų įstatymas) of 30 ch 2000 (Nr. VIII-1605). on Support of the Unemployed (Bedarbių rėmimo įstatymas) of becember 1990 (No. I-864). on State Social Assistance Benefits (Valstybinių Šalpos išmokų ymas) of 29 November 1994 (No. I-675). on Sickness and Maternity Social Insurance (Ligos ir motinystės alinio draudimo įstatymas) of 21 December 2000 (No. IX-110).	Book III of Social Insurance Code (Code des assurances sociales) in the terms following the Law of 27 July 1987.	
BASIC PRINCIPLES			
cove	npulsory social insurance scheme financed by contributions ering the active population (employees and self-employed) and riding pensions consisting of a basic (flat-rate) and a supple- itary (earnings-related) part.	Compulsory social insurance scheme financed by contributions with a participation of the State budget for the active population (employees and self-employed) with benefits depending on the duration of the affiliation (flat-rate) and on contributions (earnings- related).	
FIELD OF APPLICA	TION		
pers mini men com	pulsory for employees and self-employed. Self-employed ons with annual incomes exceeding 12 times the monthly imum wage are compulsorily covered for the basic and supple- itary part of pension. Those with incomes below this ceiling are pulsory insured only for the basic part (flat rate) of the pension. Juntary affiliation for the supplementary part is possible.	Compulsory insurance for the active population (employees or self- employed). A voluntary insurance is possible.	
EXEMPTIONS FRO	M COMPULSORY INSURANCE		
Farm	ners, their family members.	Exempted are persons exercising occasional and not habitual activi- ties, when the period of activity is determined in advance and does not exceed three months in each calendar year. The insurance does not cover self-employed activities if the income does not exceed one third of the social minimum wage (salaire social minimum).	
RISK COVERED			
Definitions			
than darb Since 18 ye ance 5 Se 9 M • Lie Since who capa sione and assee from • Di of • Di of • Di of	rrson to whom a disability level or a level of work capacity less is 55% is defined receives Lost Working Capacity Pension (Neteko bingumo pensija) or State Assistance Benefit (Šalpos pensija). e April 1, 2004 there are 3 levels of disability for children under ears (except those who are or were insured by state social insur- e): evere disability, ioderate disability, ght disability. e July 1, 2005 for adult persons and for those under 18 years are (or were) insured by state social insurance a level of work acity is defined according to the medical, functional, profes- al and other criteria in order to evaluate person's work capability employment possibilities. The loss of capacity for work is ssed by taking the percentage of the level of capacity for work a 100%: isabled with a loss of capacity for work of 75% - 100%: total loss f work capacity; isabled with a loss of capacity for work of 60% - 70%: partial loss f work capacity; isabled with a loss of capacity for work of 45% - 55%: partial ss of work capacity. For persons of retirement age the level of perial needs is defined.	An insured person who, as a result of prolonged sickness or infirmity, has lost the working capacity to such a degree that he/ she is unable to carry on the occupation of the last post or another occupation suited to his/her capacity.	

HUNGARY	MALTA
Act LXXXI of 1997 on Social Insurance Pension (törvény a társadalombi- ztosítási nyugellátásokról). Act LXXXIV of 2007 on Rehabilitation Annuity (törvény a rehabilitációs járadékról).	Social Security Act (Att dwar is-Sigurta' Socjali) (Cap. 318).
Compulsory social insurance scheme financed by contributions covering the active population (employees and self-employed) with earnings- related benefits.	Compulsory social insurance scheme financed by contributions covering the active population (employees and self-employed) and providing earnings-related pensions depending on contributions and the duration of affiliation.
Active population (employees and self-employed) and assimilated groups.	Active population (employees and self-employed). Voluntary affiliation possible for single inactive persons. Government employees employed before 1979, and Police and Armed Forces Officers, are entitled to an Oc- cupational Pension upon completion of 30 years of service for the former and 25 years for the latter.
No exemptions.	No exemptions.
 From 1 January 2008 decision is made on the extent of damage on health and not on reduction in working capacity. For pensions determined after 31 December 2007 there are three classes of Invalidity Pension (Rokkantsági nyugdíj) or Accident-related Invalidity Pension: Class III: the extent of damage on health is between 50-79%, cannot be employed without rehabilitation, but rehabilitation is not proposed, Class II: more than 79% of the extent of damage on health but no need of permanent care by others; Class I: more than 79% of the extent of damage on health and needs permanent care by others. Rehabilitation Annuity (Rehabilitációs járadék) is a new benefit from 1 January 2008. Paid to the person: who suffers from 50-79% of the extent of damages on health and unable to pursue his/her former job; who doesn't take up a gainful activity; is capable of rehabilitation, and who has the necessary services years required to his/her age. 	 The incapacity is of a permanent nature and renders claimant incapable of suitable full-time or regular part-time employment. The incapacity may stem from a serious disease, bodily injury or mental impairment. There are two categories: Incapacity for suitable full-time or regular part-time employment or self-occupation by reason of a serious disease or bodily or mental impairment; incapacity which is considered to be of a permanent nature or, if its permanency cannot be conclusively established, is considered as prohibiting such person from suitable full-time or regular part-time employment or self-occupation for no less than one year from the date of claim.

$\forall \text{ INVALIDITY}$

LITHUANIA	LUXEMBOURG
CONDITIONS	
1. Minimum level of incapacity for work	
45% reduction in capacity for work.	No minimum level. The insured person who only suffers from invalidity related to the last working place can benefit from occupational rehabilitation. If no internal or external regrading measure could be taken within the firm, a compensation is foreseen.
2. Possibility of review	
Review is possible: after the end of validation; when the health status changes; after complaining about the decision; after the decision of the Commission of Disputes; in case of doubting about the validity of the decision.	There is no rate for incapacity. Pension is withdrawn if the insured person is no longer invalid in the terms of law.
3. Period for which cover is given	
From the day of application (if disability level or lost working capac- ity is determined) until the end of validation.	The benefit is withdrawn if the incapacity is no longer permanent. For temporary incapacity (incapacité temporaire): on expiry of entitlement to sickness benefit (indemnité pécuniaire de maladie) or, failing such entitlement on expiry of an invalidity period of 6 months without interruption. At 65, replaced by old-age pension (pension de vieillesse).
4. Minimum period of affiliation for entitlement	
Partial Pension (Dalinė pensija): Minimum insurance period depends on the person's age at the time when disability occured: under the age of 22: 2 months 23: 4 months 24: 6 monthsThe required minimum insurance period increases by 2 months per additional year of age until the person reaches the age of 38 (required minimum insurance period is 3 years) and 6 months per additional year of age until the person reaches the age of 62 (required minimum insurance period is 15 years).Full Pension (Visa pensija): The obligatory insurance period nec- essary for a Full Pension also depends on the age: under 24 years of age: 1 year; between 24 and 38 years of age; required period increasing by 4 month per additional year of age; from 38 years of age and above: required period increasing by 1 year per additional year of age, but may not exceed the obligatory insurance period established for the Old-age Pension (Senatvės pensija) (see table VI "Old-age").	12 months of insurance in the three years prior to the invalidity. The three-year period is extended if it overlaps with assimilated periods of eligibility. No qualifying period if invalidity is caused by an injury of any kind or occupational disease, occurred during affiliation.
BENEFITS	
1. Determining factors for the amount of benefits	Number of insure of an instituted particular (flat rate participal)
 Social insurance period acquired while working under employment contract or as self-employed; period of time between occurrence of disability and pensionable age; earnings upon which pension insurance contributions were made. 	Number of insurance years, of assimilated periods (flat-rate pension part) and earnings taken into account (income-related pension part). Special supplements in case of early disability.

 HUNGARY	MALTA
50%.	Preventing persons from engaging in suitable full-time or regular part- time employment or as self-employed/occupied person for at least one year from date of claim.
Review is possible at all times if there is change in the degree of invalidity.	Cases are reviewed periodically depending on the advice of the Medical Board.
Eligibility for Invalidity Pension (Rokkantsági nyugdíj) starts from the day on which the invalidity is diagnosed in a report by the authorized reha- bilitation expert team. If the authorized rehabilitation expert team has not declared the date on which the claimant became invalid, the date of invalidity is the day when the claim was filed. The invalidity pension is not replaced by an Old-age Pension (Öregségi nyugdíj) but covers also the period after the retirement age. Retirement pensioners can only be entitled to work accident related invalidity pension.	Payable up to pensionable age. On reaching pensionable age recipients have the right to opt for a Retirement pension (Pensjoni tal-Irtirar) if that pension is more favourable.
Qualifying (insurance) period depends on age of claimant when invalid- ity occurred: below 22 years of age: 2 years 22-24 years of age: 4 years 25-29 years of age: 6 years 30-34 years of age: 8 years 35-44 years of age: 10 years 45-54 years of age: 15 years 55 and above: 20 years Persons qualify for invalidity pension if they meet the service time requirement of their age or of a former age category and the insurance is continuous.	A minimum of 5 years paid contributions.
 Age at outset of invalidity; insurance period; class of invalidity; and the extent of damage on health. 	 The number of contributions paid since the age of 18 or 1965 (whichever is the later); and whether claimant is in receipt of a Service Pension (Pensjoni tas-Servizz).

\vee INVALIDITY

LITHUANIA	LUXEMBOURG
2. Calculation method, pension formula or amounts	
 Lost Working Capacity Pension (Netekto darbingumo pensija) consists of three parts, the basic part, the supplementary part and the supplement for years of pension insurance. Basic Part: Amount based on the basic social insurance pension (see table VI "Old-age"). The following rates are applied for disabled persons who have completed the required obligatory insurance period: 75-100% loss of capacity for work: 150% of the basic social insurance pension, 60-70% loss of capacity for work: 110% of the basic pension, 45-55% loss of capacity for work: 55% of the basic pension. Supplementary Part: Only paid to those who have fulfilled the State social insurance period obtained while working under an employment contract. This period is calculated until the date that disability occurs and is added to the number of years remaining before the claimant reaches the pension insurance period for the Lost Working Capacity Pension (netekto darbingumo pensija), the number of remaining years is proportionately reduced. Having calculated the insurance period in such a manner, the formula for calculation of the Old-age Pension (Senatvés pensija) is used (see table VI "Old-age"). Supplement for years of pension insurance: Only paid to those, who acquired a period of insurance longer than 30 years: 3 % of basic pension paid for every full year above 30. Persons with a reduction in capacity for work of 45% - 55% receive 50% of the pension amount for persons with a reduction in capacity for work of 45% - 55% receive 50% of the pension amount for persons with a reduction in capacity for work by 60% - 70%.	 The pension comprises two parts: a flat-rate part depending on the number of insurance years of 1/40 per year (max. 40) and an income- (and contributions-) related part: flat-rate pension part (majorations forfaitaires): € 365.74 per month for 40 years' insurance; income-related pension part (majorations proportionnelles): 1.85% of total wage taken into account. For invalidity before age of 55: special flat-rate supplements (majorations forfaitaires spéciales) of 1/40 for each year between commencement of entitlement to pension and age 65 (max. 40 years) and special income-related supplements (majorations proportionnelles spéciales) for years remaining from commencement of entitlement until age 55. The rate of supplement is 1.85% of average salary gained between age 25 and the year of cessation.
3. Reference earnings or calculation basis	
Up to 1994: Insured earnings for the period until 1994. Since reliable data are missing before 1994, the five most favourable consecutive years from 1984 to 1993 can be chosen. As from 2009 the data prior to 1994 shall be excluded from the calculation base. Since 1994: Insured earnings.	For the income-related pension part (majorations proportion- nelles), the salary or the professional income are taken into account. Minimum amount liable for contribution: \in 1,570.28 per month. Maximum amount liable for contribution: \in 7,851.40 per month.
4. Non contributory periods credited or taken into consideration	
 Periods during which benefits for sickness, maternity, occupational rehabilitation, lost working capacity and unemployment are received. Also, some categories of persons are insured by State means. These periods are taken into account when calculating entitlement to a pension: Care of a child under 3 years of age; care of a totally disabled person; military conscripts service period; spouses of diplomats while staying abroad; service period of clergymen of all traditional and other religious communities recognised by the State; period during which nuns/monks work in convents/monasteries. 	Periods for the rearing of children under the age of 6 years, educa- tion/training periods between the age of 18 and 27, periods during which a dependent was cared for, periods exempted from payment of self-employment contributions, etc.
5. Supplements for dependants (spouse, children, other dependants)	
No supplements.	No supplements.
6. Minimum pension	
No statutory minimum pension.	No pension can be less than 90% of the reference amount, if the insured has at least 40 years of insurance: therefore, there is a minimum of € 1,400.71 per month. If the insured did not qualify as aforementioned, the minimum pension (pension minimale) is reduced by 1/40 for each missing year.
7. Maximum pension	
No statutory maximum pension.	No pension can exceed 5/6 of five times the reference amount, which is € 6,484.76 per month.

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	 Calculation of the pension amount for Class III: insurance period less than 25 years: pension amounts to 37.5% - 63% of the average monthly income of the individual; insurance period 25 or more years: pension calculated according to the Old-age Pension (Öregségi nyugdíj) formula - see table VI "Oldage". Class II: 5% more than Class III. Class I: 10% more than Class III, but not exceeding 100% of the average monthly income of the individual. 	 Maximum Pension: married persons: € 118.94 per week; a single person: € 102.77 per week. The amount paid varies according to the number of contributions paid but not in accordance with the degree of invalidity. When a pensioner is in receipt of a service pension (Pensjoni tas-Servizz) the basic pension (Pensjoni Bazika) is reduced: married persons: € 78.24 per week; single persons: € 65.08 per week. A service pension (Pensjoni tas-Servizz) is a pension or other allowance that is payable by or on behalf of a person's employer in respect of past services in Malta or abroad.
	The reference earning is the average monthly income of the individual which is calculated as for the Old-age pension - see table VI "Old-age". If the service period is shorter than the period required for the Old-age pension, the pension has to be calculated on the basis of the average monthly income of the individual during this shorter period. If the service period does not exceed 30 days, the minimum wage has to be taken into account.	Flat-rate benefits not related to earnings, but lower rate of benefit is paid to a person in receipt of a service pension (Pensjoni tas-Servizz).
	See table VI "Old-age" In addition, the whole period of full time higher education shall be taken into consideration for invalidity pension.	Credited contributions in respect of periods of: sickness; unemployment; injury. Credits are also awarded to ex-members of the Police Force and the Armed Forces, and Voluntary Workers.
	No supplemente	Spouse:
	No supplements.	The married pension rate is payable even if the wife is employed. Children: No supplements.
		Children: No supplements.
	For pensions determined after 31 December 2007: Class I: HUF 30,850 (€ 122) per month. Class II: HUF 29,800 (€ 118) per month. Class III: HUF 28,500 (€ 113) per month.	
	For pensions determined after 31 December 2007: Class I: HUF 30,850 (€ 122) per month. Class II: HUF 29,800 (€ 118) per month.	Children: No supplements. Married Person: € 81.46 per week.

V INVALIDITY

LITHUANIA	LUXEMBOURG
8. Other benefits	
 Conterbenets Compensation of care or attendance costs for disabled persons with a reduction in capacity for work of at least 60% or for persons of retirement age if the need of permanent care or attendance is determined. The benefit is paid from the State budget and granted in addition to the Lost Working Capacity Pension (Netekto darbingumo pensija) or Old-Age Pension. State Assistance Benefit: a non-contributory benefit to special groups of permanent residents who due to objective reasons are not able to receive social insurance benefits. See table XI "Guarantee of sufficient resources". Occupational rehabilitation benefits for disabled persons: Persons, who participate in occupational rehabilitation and cannot get income from labour, have possibility to get occupational rehabilitation benefit. The benefit is paid during the period of participating in occupational rehabilitation program. This benefit spaid from the first day of participating in program. This benefit for insured person is paid from the State Social Insurance Fund, for non insured person is 85% of the compensatory wage, but not less than twice the basic pensions, for non insured persons twice the basic pension. 	Allowance at the end of the year (allocation de fin d'année), of € 598.32 (in case of a complete career; otherwise proportional reduction).
ADJUSTMENT	
The basic part of a pension and the supplement for years of pen- sion insurance depend on the amount of the basic pension, the supplementary part is adjusted according to the current year's average insured income D. The basic pension and the current year's average insured income are increased upon decision of Govern- ment depending on the Government's Program and the budget.	The mechanism of pensions automatically index-linked to price development whenever the index varies by 2.5% in relation to the preceding index is suspended; until 2009 fixed adjustments. Adjust- ment of pensions to earnings level by special law.
ACCUMULATION WITH OTHER SOCIAL SECURITY BENEFITS	
Accumulation is possible with Survivors' Pension (Našlių pensija) or Orphans' Pension (Našlaičių pensija), state pensions and family allowances. Benefits are not reduced when accumulated.	In case of receipt of employment injury pension (rente d'accident), reduction of invalidity pension (pension d'invalidité) if both pen- sions exceed either the average of the five highest annual earnings in the insurance cycle or, if more favourable, the earnings on which employment injury pension was based.
ACCUMULATION WITH EARNINGS FROM WORK	
No restrictions, full accumulation is possible.	The income from an activity may be cumulated with the pension up to a ceiling comprising the average of the five highest annual salaries during the period of insurance. The pension is reduced by the amount of income exceeding this ceiling.

HUNGARY	MALTA
 Public medicine: for Classes I and II, medicines prescribed for the illness causing invalidity are free of charge. Benefits which cannot be accumulated with invalidity benefits: Nursing Fee (Åpolási díj): Paid to people who provide permanent care to a disabled relative. The amount of benefit is 100% of the minimum old age pension (minimum öregségi nyugdíj) = HUF 28,500 (€ 113), or 130% = HUF 37,500 (€ 148) in case of an increased need of nursing. The third form of the nursing fee is provided by the local government; the amount is determined by the independent local governments and may be no less than 80% of the minimum amount of Old-age Pension (Öregségi nyugdíj) = HUF 22,800 (€ 90). Invalidity Annuity (Rokkantsági járadék): for persons reaching 18 years of age who lose 100% of their working capacity before reaching the age of 25. The annuity paid by the central state budget amounts to HUF 32,610 (€ 129) per month. Temporary Invalidity Annuity (Átmeneti járadék) or Regular Social Annuity (Rendszeres szociális járadék) for persons with at least 40% extent of damage on health sustained during the time of his/her gainful activity: whos are not entitled to Old-age Pension (Öregségi nyugdíj), Invalidity Pension (Rokkantsági nyugdíj), or Work accident-related disability pen- sion (Baleseti rokkantsági nyugdíj), who are not entitled to unemployment benefit (Munkanélküli járadék), sickness benefit (Táppénz), work accident sick pay (Baleseti táppénz) or maternity allowance (Terhességi-gyermekágyi segély), who cannot work without rehabilitation, but rehabilitation is not proposed. The Temporary Invalidity Annuity (Atmeneti járadék) is paid by the central state budget and amounts to 75% of the Old-age Pension (Öregségi nyugdíj) which he/she would be entitled to upon reaching retirement age. However, the annuity can be no less than the minimum amount of Regular Social Annuity. The Regular Social An- nuity (Rendszeres szociális járadék) is paid by the central s	A pensioner could be entitled to Medical Assistance (Ghajnuna Medika) subject to a means test and to the decision of a medical panel appointed by the department. The first member of the household who satisfies the above conditions is entitled to € 19.94 per week, while any other mem- ber of the same household is entitled to € 14.69 per week.
Annual adjustment in January according to 50% of the predicted increase in the consumer price for that year and 50% of the predicted increase in net average monthly earnings.	The pension is increased yearly by 2/3 of the full cost of living increase awarded to employees (4/5 in the case of a married person).
If the surviving spouse, child or parent is entitled to pension benefits in his/her own right, he/she will receive 30% of the pension of the deceased person.	Invalidity pension (Pensjoni tal-Invalidita') is not payable if recipient is in receipt of another contributory pension that is higher. In that case, only the higher pension is paid.
For invalidity pensions determined after 31 December 2007 accumula- tion with earnings is possible in line with the regulations of Act LXXXIV of 2007 on rehabilitation annuity (törvény a rehabilitációs járadékról): * if the recipient ceases gainful activity, or * if the income gained could be maximum 70% of the average income gained in the last 4 months before the damage on health occurred.	Invalidity pension (Pensjoni tal-Invalidita') beneficiaries are precluded from employment or self-occupation.

V INVALIDITY

LITHUANIA	LUXEMBOURG			
RETURN TO ACTIVE LIFE				
1. Rehabilitation, retraining				
Medical, occupational and social means of rehabilitation. Occupa- tional rehabilitation: the increase of person's work capacity, occupa- tional competence and ability to participate in the labour market by educative, social, psychological, rehabilitation and other means. Disabled persons, who participate in occupational rehabilitation and cannot get income from labour, have possibility to get occupa- tional rehabilitation benefit (see point 8 "Other benefits").	Insured person must, until age 50, comply with such rehabilitation or retraining measures as may be laid down by the pension fund; otherwise pension may be suspended.			
2. Preferential employment of handicapped persons				
Enterprises with 50 or more workers are obliged to employ 2% - 5% of disabled persons with a reduction in capacity for work by at least 60% (or disabled of Group 1 and 2) or disabled with moderate disability. Local authorities taking into account any proposition of the Labour Exchange define the exact percentage rate. If employ- ers do not fulfil this obligation, they pay a contribution into the Employment Fund (Užimtumo fondas) (equal to 15 times the official minimal wage, currently LTL 600 (€ 174) per month). Every addition- ally created workplace for a disabled person is subsidised by the Employment Fund amounting to 100% of national minimum wage monthly during the first 12 months and 50% of national minimum wage monthly during the next 6 months of disabled person's employment.	According to the size of the company, a certain number of posts are destined to the disabled.			
TAXATION AND SOCIAL CONTRIBUTIONS				
1. Taxation of pension benefits				
Benefits are not subject to taxation.	Pensions are subject to taxation.			
2. Limit of income for tax relief or tax reduction				
Not applicable. Pensions are not subject to taxation.	General taxation rules. No special relief for pensions.			
3. Social security contributions from pension				
No contributions.	Contributions for health care (2.7%) and long term care insurance (1.4%).			

HUNGARY	MALTA
 Four stakeholders are involved in rehabilitation: the authorized rehabilitation expert team which decides on the extent of damage on health, the profession in which the claimant is able to work, the degree of rehabilitation and its direction and duration; the regional employment centre in relation with training and retraining; the pension institution determines and pays the rehabilitation annuity; and the recipient should cooperate with the relevant regional employment centre, should accept the rehabilitation plan and sign the rehabilitation agreement. 	No special measures except medical rehabilitation.
Obligatory queto it is mandatory for each ampleyer with 20 or more	The Employment (Dirabled Derenes) Act (Att duar Lippingi to Dereus)
 Obligatory quota: it is mandatory for each employer with 20 or more employees, to fill 5% of all posts with persons with disability. If this obligation is not met, the employer must pay a contribution to the Rehabilitation sub-fund of the Labour Market Fund (Munkaerőpiaci Alap). The amount of this contribution is HUF 164,400 (€ 649) per person and year in 2008. According to the relevant regulation from 2005 8% of the average gross earnings has to be paid to all employees over the two years prior the year of payment per absent disabled person. Labour Market Fund Support (Munkaerőpiaci Alap támogatás): for employers who hire persons with disability (who have lost at least 40% of their invalidity or old-age) for at least one year. The amount of the support varies according to the duration of employment. Retraining: on the job training supported by the Labour Market Fund. Sheltered companies: for persons with changed working capacity supported by state subsidy. Self-employment Support: for persons with disability in order to become an entrepreneur. 	ment and Training Corporation.
Pensions accumulated with earnings are subject to taxation, though the amount of tax on pensions is deducted from the accumulated amount.	Benefits are subject to taxation.
Not applicable.	General taxation rules. No special relief for benefits.
No contributions.	No contributions.

COMPARATIVE TABLES

VI OLD-AGE

THE NETHERLANDS - NORWAY - AUSTRIA - POLAND



THE NETHERLANDS	NORWAY
LICABLE STATUTORY BASIS	
General Old-Age Pensions Act (Algemene Ouderdomswet, AOW).	National Insurance Act (folketrygdloven) of 28 February 1997, Chapters 3 and 19. Mandatory Occupational Pension Act (Lov om obligatorisk tjenestepensjon) of 21 December 2005.
SIC PRINCIPLES	
 Dual system: General system for all inhabitants financed by contributions on earned incomes providing flat-rate pensions with rates depending on the family situation. Compulsory supplementary pension schemes for most of the employees based on agreements between social partners. These supplementary schemes are not described in the MISSOC tables. 	 The National Insurance Scheme (folketrygden) is a universal compulsory scheme. The pension system of the scheme consists of three key elements: Basic pension (grunnpensjon) based on periods of residence. Earnings-related supplementary pension (tilleggspensjon) based on annual pension points (pensjonspoeng) reflecting the level of income. Special supplement (særtillegg) to those entitled to no supplementary pension below the amount of the special supplement. In the latter case only the differential is paid. "Pay-as-you-go"-system. Financed by tax and contributions. Mandatory occupational pension (obligatorisk tjenestepensjon) as a top-up in addition to pension from the National Insurance Scheme.
LD OF APPLICATION	Financed by the employer.
All residents under 65. All persons under 65 who work in The Neth- erlands and consequently pay tax on wages are also insured.	Basic pension (grunnpensjon): All residents from the age of 16 years. Supplementary pension (tilleggspensjon): Active population (employees, freelancers, self-employed). Mandatory occupational pension (obligatorisk tjenestepen- sjon): With minor exceptions, all employees who are not already covered by a private or public sector occupational scheme meeting
	the minimum requirements.
MPTIONS FROM COMPULSORY INSURANCE	
No exemptions.	No exemptions, but no pension points (pensjonspoeng) are cred- ited for the occupationally active with an annual income below the Basic Amount (Grunnbeløpet) of NOK 66,812 (€ 8,367).
NDITIONS	
linimum period of membership	
No minimum period.	For a basic pension (grunnpensjon) three years of residence be- tween 16 and the end of the calendar year the insured reaches 66. For a supplementary pension (tilleggspensjon) pension points (pensjonspoeng) credited for three calendar years.
onditions for drawing full pension	
Being continuous insured between his or her 15 th and 65 th birthday.	A full basic pension (grunnpensjon) requires 40 years of residence between 16 and the end of the calendar year the insured reaches 66. A full supplementary pension (tilleggspensjon) requires pension points (pensjonspoeng) to be credited for 40 calendar years. Pen- sion points are credited from the year the insured reaches 17 to the year he reaches 69.

AUSTRIA	POLAND
General Social Insurance Act (Allgemeines Sozialversicherungsgesetz, ASVG) of 9 September 1955. General Pension Act (Allgemeines Pensions- gesetz, APG) of 18 November 2004.	Law on the Social Insurance System (Ustawa o systemie ubezpieczeń społecznych) of 13 October 1998. Law on Social Insurance Fund Pensions (Ustawa o emeryturach i rentach z Funduszu Ubezpieczeń Społecznych) of 17 December 1998.
Compulsory social insurance scheme financed by contributions covering employees providing earnings-related pensions depending on contribu- tions and the duration of affiliation.	Compulsory social insurance scheme financed by contributions covering the active population (employees and self-employed) and providing earnings-related pensions depending on contributions and the dura- tion of affiliation. Special schemes for policemen, soldiers, prosecutors, judges.
 Compulsory insurance for: All employees in paid employment, trainees; family-members working in the enterprise of a self-employed; persons who do not have a formal employment contract but essentially work as an employee (freie Dienstnehmer) (e.g. no own organisational structure, perform their services themselves). Voluntary insurance possible for not compulsorily insured residents over the age of 15 years. Possibility of an advantaged voluntary insurance or a continuation of affiliation to the insurance for persons providing care for a near relative needing long-term care (care benefit category 3). 	 Active population (employees, self-employed, farmers); recipients of Unemployment Allowance (Zasiłek dla bezrobotnych), and persons on parental leave. Voluntary insurance is possible for some categories of people, for ex- ample for spouses of employees delegated to work with the diplomatic services, in consulates, at permanent representative offices of the United Nations organisation, as well as on other special missions abroad, and at institutes, information and cultural centres abroad.
No compulsory insurance if the income is below the marginal earnings threshold (Geringfügigkeitsgrenze) of € 349.01 per month. The income from more than one job is added together, voluntary "opting in" is possible in the case where insurance is not compulsory.	No exemptions.
 For persons who have not yet completed the age of 50 on 1 January 2005 and who have not yet acquired any insurance months: 180 insurance months, of which at least 84 have been acquired from employment. For persons having completed the age of 50 on 1 January 2005: 180 insurance months within the last 360 calendar months; or 180 contribution months/ 300 insurance months without a framework-period. For persons who have not yet completed the age of 50 on 1 January 2005 and who have acquired at least one insurance month, the more favourable rule applies. 	 Old-age Pension (Emerytura) with guaranteed minimum pension: Men 25 years, women 20 years of contributory and non-contributory periods. Pension without a guaranteed minimum: Persons born before 1.1.1949: Men 20 years, women 15 years of contributory and non-contributory periods. Persons born since 1.1.1949: No minimum period is required. Contributory periods: during which social insurance contributions are actually paid. Non-contributory periods: during receipt of sickness benefit, nursing benefits, rehabilitation benefits etc. but these shall be limited to one-third of the contribution periods.
For a standard old-age pension (Regelaltersrente):	No concept of "full pension".
45 insurance years. For persons who have completed the age of 50 on 1 January 2005: By 2009 the insurance years will have been gradually increased from 40 to 45.	

VI **OLD**-AGE

	THE NETHERLANDS		NORWAY	
3. Legal retirem	ient age			
Standard pension				
	65 years.		67 years.	
Early pension		I		1
	No early pension.		No early pension.	
Deferred pens			I	1
	No deferred pension.		Deferment possible up to three years.	
BENEFITS				
1. Determining	factors			
	Length of insured periods, family status.		 Duration of residence (up to 40 years). Number of pension point years (up to 40 years). Level of pension points (pensjonspoeng) for the 20 best years. Marital status. The rate of the Basic Amount (Grunnbeløpet). The amount is adjusted every year by Parliament decision (normally with effect from the 1st of May) to take account of the change in the general income level. 	
2. Calculation n	nethod or pension formula			
	 Pension: Single person: € 984.86 per month. Married and unmarried persons, both 65 and over (also 2 men or 2 women sharing a household): € 673.84 per month for each person. Pensioners with a partner younger than 65: if the AOW-pension took effect before 1 February 1994: € 984.86; if the AOW-pension took effect on 1 February 1994 or later: € 673.84. 		A full basic pension (grunnpensjon) to a single pensioner is equal to the Basic Amount (Grunnbeløpet), i.e. NOK 66,812 (€ 8,367), or 85% of the Basic Amount if married or cohabitant to a pensioner or a person with an annual income (capital income inclusive) of more than twice the Basic Amount. A special supplement (særtillegg) fixed at a certain proportion of the Basic Amount, is added when no supplementary pension (tilleggspensjon) is paid. Is the supplementary pension below the full special supplement, the differential is added.	
	Full pension payable after 50 years of insurance. For every year in which there was no insurance, an amount of 2% of the full pension is deducted.		The full minimum pension consisting of the basic pension and the special supplement, is proportionally reduced when the pensioner has been resident (or otherwise insured) for less than 40 years. Formula to determine annual pension points (pensjonspoeng): (AE - BA):BA AE = annual earnings from work BA = Basic amount (Grunnbeløpet). Income up to 6 BA counts at its full amount. Income between 6 and 12 BA counts at 1/3 of its full amount, giving maximum pension points (pensjonspoeng) of 7.00 (8.33 before 1992). Formula to calculate a supplementary pension (tilleggspensjon): BA x FPA x 0.42 FPA= Final pension point average. The factor 0.42 (compensation rate) applies to years since 1992; to years before 1992, a rate of 0.45 is applied. Has the pensioner less than 40 pension point years, the supplementary pension is proportionally reduced (a basic pension is paid in addition, at least at the same proportion).	

AUSTRIA	POLAND
Men: 65 years Women: 60 years Progressive increase of age limit for women until the same retirement age as for men will have been reached between the years 2024 and 2033.	Men: 65 years Women: 60 years
General legislation:62 years for men and women. At the earliest 60 years for heavy workers provided that they have worked heavily at least 10 years during the preceding 20 years, and have a total of 45 insurance years.Transitional legislation: For persons having completed the age of 50 on 1 January 2005, and for younger persons who have already acquired one insurance month at this point in time, in addition: 755 months of life for men. 695 months of life for women.Between 2004 and 2014 these age limits will be gradually increased (gradual abolition of these types of early pension). In addition, there are, only for certain age groups, two types of early pension for persons having an extremely long insurance career or particularly hard working conditions.	 Early Pension (Wcześniejsza emerytura): Persons born before 1.1.1949 Conditions: Women aged 55 and over, with a 30-year qualifying period; totally incapacitated persons may receive pension five years early they have fulfilled the qualifying period requirements; persons working in unhealthy conditions or performing a specifier type of work (official list) - 5 years early (e.g. journalist, glass worker rail workers), 10 years early (miners, persons working with lead, cat mium or asbestos, steel workers, pilots, divers) or 15 years early (w instrument musicians). Early Pensions are calculated using the general pension calculation method. The amount depends on the number of insurance years. Persons born since 1.1.1949: No provisions.
Unlimited deferment possible.	Increased period of employment reflected in pension formula (no m
	mum period, all periods are taken into account).
Amount of income, duration of the insurance period and age when	
claim is made.	 amount of reference wage; number of insurance years; basic amount. Persons born since 1.1.1949: amount of remuneration subject to contributions throughout the insurance period; age of the insured person at time of award of pension.
For persons who have not yet completed the age of 50 on 1 January 2005: Pension accounts systems for insurance periods since 1 January 2005 with the annual statement of the acquired pension entitlement. 1.78% of the calculation base is credited to the pension account. The pro-rata-temporis method is used to calculate partial pensions both in accordance with the new and the old legislation (see below) (fictitious application of both the new and the old provisions to the insurance life as a whole if there are insurance periods before 1 January 2005). The pension is made up of the sum of the partial pensions. For persons who have completed the age of 50 on 1 January 2005: The legislation as of 31 December 2004 shall continue to apply: per insurance year 1.80% of the calculation base. The value of 1.88% will decrease to 1.78% in 2009. Pensions granted as of 1 January 2004 may only be at most 5% lower than a comparable pension granted under the legislation in force until 31 December 2003. This value will be gradually increased to 10% by 2024. The pension is paid 14 times per year.	 Persons born before 1.1.1949: The amount of the Old-age Pension (Emerytura) is calculated accord the following formula: E = kb x (wpw x os x 1.3% + wpw x on x 0.7% + 24%) where: kb: "Basic Amount" equal to national average wage minus the soci insurance contribution over the previous year. wpw: "Reference Wage Coefficient" (shows the relationship, as a percentage, between the individual's average reference wage during period). os: periods during which contributions were paid. Persons born since 1.1.1949: The amount of the old-age pension is calculated as follows: The total pension assets accumulated in the individual's account are divided by the average remaining life expectancy at the age of application for pension.

VI **OLD**-AGE

	THE NETHERLANDS	NORWAY		
3. Reference ea	rnings or calculation basis			
	Not applicable. Benefits are not depending on previous earnings.	The 20 years with the highest pension points (pensjonspoeng) or all years if the total is 20 or below.		
4. Non-contribu	utory periods credited or taken into consideration			
	Not applicable.	 Disability pensioners are credited future pension points (pensjon-spoeng). Years of child care for children under 7, or care for a disabled, sick or elderly person. Minimum pension points of 3.00 are guaranteed for such years. 		
5. Supplements	s for dependants (spouse, children, other dependants)			
	Spouse: Pension supplement (toeslag) according to the income of the spouse in case the spouse is younger than 65 years. Children: No supplement.	 Spouse: Means-tested supplement of up to 50% of the Basic Amount (Grunnbeløpet), i.e. NOK 33,406 (€ 4,183). Reduced by 50% of income in excess of a minimum pension for couples plus 5% of the Basic Amount. A cohabitant, with whom the pensioner has children or formerly has been married to, is treated as a spouse. Children: Child supplement (barnetillegg) of 40% of the Basic Amount (Grunnbeløpet) for each dependent child under 18. Means-tested in the same manner as the spouse supplement (ektefelletillegg), but the maximum income the pensioner can have before reduction, is increased by 40% of the Basic Amount for each child. 		

AUSTRIA	POLAND
 Legislation until 31 December 2004: Calculation base is the average of the (revalued) earned income of the best 20 insurance years. This period will be raised by 122 months per calendar year, so that in 2028 the income of the best 40 insurance years will be considered. The calculation method for the re-evaluation of the calculation base for past years is rather complicated and involves the evolution of the consumer price index, which leads to less favourable results than those ascertained since 2005 (see below). The income is only considered up to the upper limit of the contribution assessment ceiling of monthly € 3,930. Because of the differences between the revaluations of the contribution assessment basis of the past years and the annual setting of the contribution assessment ceiling, the highest calculation basis is € 3,238.56. A set calculation basis (Bemessungsgrundlage) of € 821.70 applies to child-raising periods. Legislation as of 1 January 2005: Pension account system with annual statement of the acquired pension amount. The calculation is based on the earnings from employment during the calendar year up to a contribution ceiling. The re-evaluation for past periods is calculated according to the evolution of wages. See "Calculation method or pension formula" above for the calculation. 	Persons born before 1.1.1949: Reference wage (S) either average wage over 10 consecutive years selected from among the previous 20 years, or the best 20 years of any insurance period. Ceiling: 250% of the national average wage. Persons born since 1.1.1949: Accumulated capital from contributions.
 As of 1 January 2005: Contribution periods for which publicly funded contributions are paid (no contributions by employees): Child raising periods (Kindererziehungszeiten) (maximum of 4 years per child, 5 years for multiple birth). Periods of military or war service and assimilated periods (e.g. periods of civil service). Periods in which maternity benefit (Wochengeld) is received (periods of maternity leave). Periods in which unemployment benefit (Arbeitslosengeld) or sickness benefits (Krankengeld) are received. 	 Sickness Allowance (Zasiłek chorobowy) payment, parental leave, university study, caring for a dependent person.
With regard to insurance periods acquired prior to 1 January 2005 the above mentioned periods are credited as non contributory assimilated periods and assessed with the same value as the contribution periods (see above calculation basis) as well as for persons who had already completed the age of 50 on 1 January 2005 (unlimited). A set calculation basis (Bemessungsgrundlage) of \in 821.70 applies to child-raising periods.	
 Spouse: No supplements. As regards the increase of the basic rate (Richtsatz) for the compensation supplement (Ausgleichszulage) for spouses living in the same household see below "Minimum Pension". Children: € 29.07 for each child up to the completion of age 18 or up to the completion of age 27 for children engaged in vocational training or university education, no age limit in case of children with disabilities. As regards the increase of the basic rate for the compensation supplement for children see below "Minimum Pension". 	No supplements.

VI **OLD**-AGE

THE NETHERLANDS	NORWAY
6. Special supplements	
 Pension supplement (toeslag): If the AOW pension took effect before 1 February 1994: Pensioners with a partner younger than 65 who earns less than € 744.48 gross per month, can receive a supplementary benefit of maximum 30% of the minimum wage - gross € 362.82. If the AOW pension took effect on 1 February 1994 or later: Pensioners with a partner younger than 65 who earns less than € 1,211.01 gross per month, can receive a supplementary benefit of maximum 50% of the gross AOW pension for married persons = € 673.84. Pension + maximum supplementary benefit: € 1,347.68. Single-parent family: € 1,222.72 per month. In addition a holiday allowance (vakantie-uitkering) amounting to € 76.70 per month for couples - each partner € 38.35, € 53.68 per month for single persons and € 69.02 per month for one-parent family is paid. 	None apart from the special supplement (særtillegg) treated as a part of the pension above.
7. Minimum pension	
Not applicable, flat-rate pension benefits.	No guaranteed minimum pension. For a single pensioner who has at least 40 years of insurance based only on residence, the annual pension is NOK 119,820 (€ 15,005).
8. Maximum pension	
Not applicable, flat-rate pension benefits.	The highest possible pension for a single pensioner with a full 40 years earnings period in the system as it is since 1992 and given the Basic Amount (Grunnbeløpet) as of 1 May 2007, is NOK 263,239 (€ 32,965) per year.
9. Early pension	
No early pension.	No early pension.
10. Deferment	
No deferment.	No particular increase of the pension. The same rules of calculation apply, but the recalculation based on the pension points (pen- sjonspoeng) earned during the deferment, is made only after the pensioner reaches 70 years of age.
ADJUSTMENT	
Adjustment on 1 January and 1 July in accordance with the average development of contract wages.	Yearly adjustments based on the adjustment of the Basic Amount (Grunnbeløpet) by Parliament decision. Normally taking effect from 1 st May.
PARTIAL PENSION	
No partial retirement.	No partial retirement.
ACCUMULATION WITH EARNINGS FROM WORK	
Possible. The amount of the pension supplement depends on earn- ings of the partner younger than 65.	Between 68 and 70 years of age, a full pension is paid when income from work does not exceed twice the Basic Amount (Grunn- beløpet). When the income exceeds that amount, the pension is reduced by 40% of the exceeding income. In the year the pensioner is 67 and after the pensioner reaches 70 years, a full pension is paid independently of the pensioner's income from work.

	AUSTRIA	POLAND
pension cal, men	eent to long-term care benefit (Pflegegeld) in addition to the in case of a permanent need of care and help due to a physi- tal or emotional disability or sensory impairment. See table XII erm care".	 Medical Care Supplement (Dodatek pielęgnacyjny): Granted to persons entitled to an old-age, invalidity or survivors' pension who are totally incapable of work and require assistance from another person, or have reached the age of 75. Amount: PLN 153.19 (€ 43) per month (adjusted in the same way as pensions). Funeral Grant (Zasiłek pogrzebowy): Lump sum available to the persons who paid the funeral costs for a pensioner or a member of their family. Amount: 200% of the national average wage at time of death.
of the sp amount: amount Single p Pension Increase complet training	the monthly pension or pensions including other income (also pouses living in the same households) are below the following s, a compensation supplement (Ausgleichszulage) is due in the of the respective difference: Densioners: \in 747.00, There living in the same household with spouse: \in 1,120.00. of the compensation supplement for each child up to the tion of age 18 or of age 27 for children engaged in vocational or university education, no age limit in case of children with es: \in 78.29.	PLN 597.46 (€ 166) per month.
		1000 - (- (
	itory maximum pension.	100% of reference wage.
each yea	ion in principle according to the general pension formula. For ar for which the pension has been claimed prior to the regular age, the pension is reduced by 4.2% (1.8% for heavy workers), m 15%.	No early pension.
Legal si	tuation as of 1 January 2005:	Additional periods of employment reflected in pension calculation.
Pension Legal si Supplen	tuation us of 1260 per year of deferment, to a maximum of 12.6%. tuation until 31 December 2004: nent as above; the increased benefit must not exceed 91.76% of ulation basis.	
followin In 2008 t	adjustment on 1 January (for the first time in the second year g the year of retirement). the pensions are socially differentiated and increased either ac- to the level of amounts, by 1.7% to 2%, or by fixed amounts of € 36.75.	Periodical adjustment on 1 March following the calendar year in which the index of prices of consumer goods and services is at least 105% in comparison to the calendar year of the last adjustment.
No parti	al retirement.	No partial retirement.
Ino parti		
of 2004 increase Early re employe	e pension (Altersrente): Accumulation possible, no limits. As paid contributions will be credited as contributions to a special d insurance. tirement pension (Vorgezogene Rente): In case a non-self- ed or self-employed activity is taken up with an income of over per month, the pension will be discontinued.	Old-age Pension (Emerytura) is neither suspended nor reduced if the pensioner has reached legal retirement age.



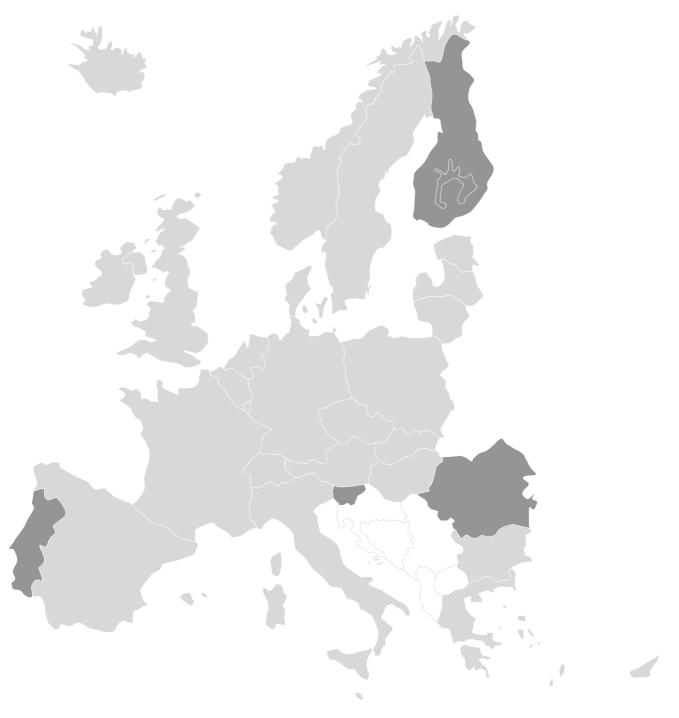
THE NETHERLANDS	NORWAY
TAXATION AND SOCIAL CONTRIBUTIONS	
1. Taxation of pension benefits	
Pensions are subject to taxation.	Pensions are subject to taxation.
2. Limit of income for tax relief or tax reduction	
General taxation rules. No special relief for pensions.	Certain provisions of tax relief/reduction apply to pensioners. Pensioners with only the full minimum pension pay no tax or social security contributions.
3. Social security contributions from pension	
Social insurance contributions for the General Surviving Relatives Act (Algemene nabestaandenwet, Anw), the General Exceptional Medical Expenses Act (Algemene wet bijzondere ziektekosten, AWBZ) and the Health Insurance Act (Zorgverzekeringswet, Zvw) are deducted from the pension. The contributions deducted for the Health Insurance Act have to be refunded by the body that admin- isters the payment of the pension.	Pensioners pay a low rate social security contribution of 3% (for health care). This low rate also applies to income from work for pensioners over 70 years of age.

_		
_	AUSTRIA	POLAND
Pe	ensions are subject to taxation.	Old-age Pension (Emerytura): Subject to taxation.
		Medical Care Supplement (Dodatek pielęgnacyjny) and Funeral Grant (Zasiłek pogrzebowy): Not subject to taxation.
Ge	ieneral taxation rules. No special relief for pensions.	Old-age Pension (Emerytura): General taxation rules. No special relief for pensions.
I		
4.8	.85% sickness insurance contribution.	Deduction of contributions for health care insurance.

COMPARATIVE TABLES

VII SURVIVORS

PORTUGAL - ROMANIA - FINLAND - SLOVENIA



	PORTUGAL	ROMANIA		
APPLICABLE	STATUTORY BASIS			
	Statutory Decree 322/90 of 18 October 1990. Statutory Decree 265/99 of 14 July 1999. Statutory Decree 232/05 of 29 December 2005.	Law 19 of 17 March 2000 on Public System of Pensions and other Social Insurance Rights (Legea privind sistemul public de pensii si alte drepturi de asigurari sociale), with subsequent amendments.		
BASIC PRINCI	PLES			
	Compulsory social insurance scheme financed by contributions for the active population (employees and self-employed) with benefits depending on the pension rights of the deceased person.	General social insurance scheme, compulsory, partially-contribu- tory, pay-as-you-go, defined benefit, providing mainly earnings- related benefits (public system of pensions' scheme).		
FIELD OF APP	LICATION			
	Compulsory insurance for all employees and self-employed. Volun- tary insurance for certain groups.	 Statutory coverage based on the personal statute for Romanian citizens, foreign citizens, stateless persons, with domicile or residence in Romania who are: Employees, persons assimilated to employees, civil servants; unemployed; self-employed, except for farmers. Voluntary regime is available for the persons under mandatory coverage who intend to increase their insured income as well as for the persons beyond mandatory coverage e.g. farmers, etc. 		
EXEMPTIONS	FROM COMPULSORY INSURANCE			
	No exemptions.	 Self-employed who have the status of: beneficiaries receiving pensions of the public system of pensions' scheme; or employees, persons assimilated to employees, civil servants, or unemployed. 		
	RSONS (surviving spouse; divorced former spouse; surviving n; other persons)			
	 Surviving spouse; divorced former spouse; surviving partner; children; parents dependant on the deceased. 	 Surviving spouse; children. No other entitled persons. 		

FINLAND	SLOVENIA
National Pensions Act 568/2007 (Kansaneläkelaki, KEL). Seamen's Pensions Act 72/1956 (Merimieseläkelaki, MEL). The new Employees Pensions Act 395/2006 (Työntekijän eläkelaki, TyEL) (from 1.1.2007) will unify three private-sector pension acts for employees: Employees' Pensions Act (TEL), Temporary Employees' Pensions Act (LEL) and Pensions Act for Performing Artists and Certain Groups of Employees (TaEL) into one single act. Local Government Pensions Act 549/2003 (Kunnallinen eläkelaki, KuEL). State Employees' Pensions Act 295/2006 (Valtion eläkelaki, VaEL) (from 1.1.2007). Evangelical-Lutheran Church Pensions Act 298/1966 (Evankelis-luterilaisen kirkon eläkelaki, KiEL). Self-Employed Persons' Pensions Act 1272/2006 (Yrittäjän eläkelaki, YEL) (from 1.1.2007). Farmers' Pensions Act 1280/2006 (Maatalousyrittäjän eläkelaki, MYEL)	Pension and Disability Insurance Act (Zakon o pokojninskem in inva- lidskem zavarovanju) (Official Gazette of the Republic of Slovenia, no. 104/2005).
Dual system: (1) insurance system (statutory earnings-related pension, Työeläke) financed by contributions covering all economically active persons (employees, self-employed, farmers) providing earnings-related pensions depending on contributions and the duration of affiliation; and (2) tax-financed and contribution based universal coverage system (national pension scheme, Survivor's Pension Act, kansaneläkejärjest- elmä, Perhe-eläkelaki) guaranteeing a minimum pension. The pension schemes are integrated and when statutory earnings-related pension (Työeläke) exceeds a given limit, no national pension (Kansaneläke) is paid.	Compulsory social insurance scheme financed by contributions covering the active population (employed and self-employed) providing benefits to survivors depending on the deceased person's pension.
National pension (Kansaneläke): All residents. Statutory earnings-related pension (Työeläke): All employees and self-employed persons aged 18 to 68. Separate acts for private and public sector employees, self-employed and for farmers (see above). The most important act is the Employees Pensions Act, TyEL.	 Compulsory insurance for: Active population (employees, self-employed, farmers); recipients of Unemployment Benefit (nadomestilo za brezposelnost), and unemployed performing public work; one of the parents in case he/she is entitled to parental allowance or takes care of a child under 3 years with disability; family assistant entitled to partial payment for the lost income (see table XII "Long-term care"); those engaged in voluntary military service. Possibility of voluntary membership for some categories (persons on unpaid leave, unemployed persons, students,).
Statutory earnings-related pension (Työeläke): Employees: The employer is liable to take out insurance if monthly earn- ings are \in 47.08 or more (TyEL). Self-employed, farmers: Liable to take out insurance after 4 months of self-employment and when the annual insurable income is \in 6,186.65 or more for self-employed and \in 3,093.33 or more for farmers.	Possible for farmers and self-employed persons with very low income and persons insured abroad.
 Surviving spouse (also party to a registered partnership). Divorced spouse if he/she was entitled to alimony before death (concerns only Statutory earnings-related pension, Työeläkedie). Children (own; foster children; children for whom the deceased paid alimony; child who lived in the same household as the deceased if the deceased was married to the child's parent). 	 Widow's or Widower's Pension (vdovska pokojnina): Surviving spouse; unmarried partner; divorced spouse if he/she was entitled to alimony before death. Survivor's Pension (družinska pokojnina): children; grandchildren and other children without parents; parents, stepparents and adoptive parents; brothers and sisters.

VII SURVIVORS

PORTUGA		ROMANIA	
CONDITIONS			
1. Deceased insured person			
Contributions paid or credited for 36 mor	nths.	Pensioner or eligible for Invalidity Pension (pensia de invaliditate), Old-Age Pension (pensia pentru limita de varsta), Old-Age Pension with Reduced Standard Retirement Age (pensia pentru limita de varsta cu reducerea varstelor standard de pensionare), Early Retire- ment Pension (pensia anticipata), Partial Early Retirement Pension (pensia anticipata partiala).	
2. Surviving spouse			
 Married to the deceased for at least on are children of the marriage (either bor caused by an accident. Aged at least 35 (otherwise pension en years), except if they have dependant of ly incapacitated for work. 	orn or conceived) or death is ntitlement is limited to 5	 Marriage duration of at least 10 years and standard retirement age, or marriage duration of at least 1 year and category I or II of invalidity, or level of income lower than one fourth of the projected average gross wage, i.e. RON 387.50 (€ 108) and child raising who is under the age of 7 years, or level of income lower than one fourth of the projected average gross wage, i.e. RON 387.50 (€ 108). 	
3. Divorced spouse			
Divorced former spouse who is entitled to	o alimony.	No entitlement.	
4. Surviving partner or cohabitant			
The person who lived with the deceased preceding the death in similar conditions such for the purposes of survivors' benefi	s as a spouse is regarded as	No entitlement.	
5. Children			
Until the age of 18 (25 or 27 in the case of tion). No age limit in case of permanent to		 Maximum age of 16 years (or maximum graduation age but no later than the age of 26 years); or invalidity occurred until the aforementioned age limits. 	
6. Other persons			
Parents dependant on the deceased are e spouse or children.	entitled if there are no	No other entitled persons.	

FINLAND	SLOVENIA
National pension (Kansaneläke): 3 years of residence after the age of 16, resident in Finland at the time of death. For surviving spouses pension: The deceased was under the age of 65 at the time of marriage. Statutory earnings-related pension (Työeläke): Must be or have been insured at the time of death.	 Completion of at least 5 years of insurance period or at least 10 years of pension qualifying period (including credited non-contributory periods), fulfilment of conditions for entitlement to old-age or invalidity pension, or recipient of old-age or invalidity pension or the recipient of rights on grounds of invalidity. In case of death due to an employment injury or occupational disease, no pension qualifying period is required.
 National pension (Kansaneläke): Widow/widower under the age of 65, has resided in Finland 3 years after the age of 16 and has or had a common child with the deceased or was at least aged 50 at the time of death and the marriage occurred before she/he was aged 50 and the marriage had lasted at least 5 years. Statutory earnings-related pension (Työeläke): Spouses with common child: must be married before the deceased reached the age of 65; spouses with no child: the widow(er) needs to have reached the age of 50 or received disability pension, the marriage lasted at least 5 years and the spouses got married before the deceased turned 65 and the widow(er) turned 50. 	 Widow or widower entitled: 53 or 48 years at the time of spouse's death (payment postponed until 53) irrespective of age if completely incapable of work or if left with a child who is entitled to Survivor's Pension (družinska pokojnina) and the mother/father has to provide for them by virtue of the law, if aged 48 or over and not insured at the time of spouse's death, or if he/she is aged between 45 and 48 years and not insured (payment postponed until age 48). Widow entitled: if she gives birth to the child of the deceased no later than 300 days after the death.
Statutory earnings-related pension (Työeläke): The former spouse is entitled if she/he received alimony from the deceased.	Divorced spouse is entitled to a widow/widower's pension if he/she has been granted the maintenance right and has received such maintenanc at the time of death of the insured person. In case the spouse from a later marriage is entitled to a widow/widower's pension, the divorced spouse has the right to a widow/widower's pension as a co-recipient.
Surviving partner: The same rules as for surviving spouse, if the partnership was registered. Surviving cohabitant: No benefits.	 In addition to the conditions for surviving spouses: last three years spent in cohabitation or last year prior to the death of the insured person in case they had a common child at any time.
National pension (Kansaneläke): Under the age of 18 or aged 18-20, if full-time student. Statutory earnings-related pension (Työeläke): Under the age of 18.	Age limit: 15 years, 18 years (if registered at the employment office), 26 years (in case of regular studying), no age limit if a child is totally incapable of work.
No other beneficiaries.	 Grandchildren and other children without parents: maintained by the deceased at the time of death, parents, stepparents and adoptive parents: maintained by the deceased at time of death, brothers and sisters: maintained by the deceased at time of death and insufficient personal means.

VII SURVIVORS

PORTUGAL	ROMANIA
BENEFITS	
1. Surviving spouse, Divorced spouse, Surviving partner	
60% of the retirement or invalidity pension received by the insured person, or to which he would have been entitled at the moment of his death. 70% if - in addition to the spouse or partner - there is a former spouse who is entitled to the pension. 14 payments per year.	 Surviving spouse: Calculation method based on a point system. Pension formula is comparable for old age, invalidity, survivor, and employment injuries and occupational diseases functions. Survivor Pension (pensia de urmas) formula in case of deceased pensioner or eligible for Old-Age Pension (pensia pentru limita de varsta) or Old-Age Pension with Reduced Standard Retire- ment Age (pensia pentru limita de varsta cu reducerea varstelor standard de pensionare) is: SP = P*OAPWhere SP = Survivor Pension P = Percentage according to the number of survivors: 50% for one survivor, 75% for two and 100% for three or more survivors. OAP = Old-Age Pension (see Table VI "Old-age"). Survivor Pension formula in case of deceased pensioner or eligible for Invalidity Pension (pensia de invaliditate), Early Re- tirement Pension (pensia anticipata), Partial Early Retirement Pension (pensia anticipata), Partial Early Retirement Pension (pensia anticipata) is: SP = P*IP Where SP = Survivor Pension P = Percentage according to the number of survivors: 50% for one survivor, 75% for two and 100% for three or more survivors. IP = Invalidity Pension. When calculating the IP, the Annual Score pertaining to the poten- tial contribution period is the one corresponding to category I inva- lidity. Payment duration is different, either permanent or temporary depending on the conditions met by the surviving spouse.
2. Surviving spouse: remarriage	
Pension ceases.	Survivor Pension (pensia de urmas) ceases.
3. Orphan children (having lost one parent, having lost both parents)	
20% of pension for 1; 30% for 2; 40% for 3 or more children. No age limit in case of permanent total incapacity for work. Amount doubled where there is no entitled surviving spouse or divorced spouse.	Orphan children having lost one parent: Similar formula as for surviving spouse. Orphan children having lost both parents: Similar formula as for surviving spouse. Survivor Pension (pensia de urmas) is calculated for each parent and then summed up. Payment duration is different, either permanent or temporary depending on the conditions met by the orphan child.
4. Other beneficiaries	
Parents dependant on the deceased are entitled to 30% (one person), 50% (two persons) or 80% (three or more persons) of the deceased person's pension.	No other beneficiaries.
5. Maximum for all those entitled to benefits	
100% of the insured person's pension. 110% if in case of divorce 2 spouses are entitled to the pension.	100% of the pension to which the deceased was or would have been entitled (paid only when there are 3 or more survivors).

SLOVENIA

 National pension (Kansaneläke): For the first 6 months the spouse receives € 288.03 per month (full amounts; adjusted to the length of residence in Finland of the deceased). After 6 months the pension is continued if the surviving spouse is supporting a child under the age of 18 with a minimum amount of € 90.22 with an income related increase of maximum € 468.24. If there is no child the entitlement and amount depends on other income. Statutory earnings-related pension (Työeläke): The pension is 17-50% of the pension of the deceased, depending on how many children are entitled to a child pension. The pension equals the pension of the deceased when the beneficiaries are a widow/widower and two children. If the deceased person was not retired at the time of death, the survivors' pension is calculated on to the basis of the disability pension the deceased would have been entitled to at the time of death. The widow's/er's pension is integrated with her/his own (or anticipated) pension. If this is higher than a given amount, the widow's/er's pension is accordingly reduced. The survivor's pension to be paid is then calculated following the formula: 50% deceased person's pension - 50% (widow's/er's own pension - base amount). Divorced former spouse: Spouse's pension is divided. The part to be paid to the former spouse depends on the amount of the alimony. 	 Widow's or Widower's Pension (vdovska pokojnina): 70% of the deceased's pension (old-age or invalidity) or the pension to which the deceased would have been entitled at time of death; widow/widower who has the right to her/his own pension is entitled to 15% of Widow's or Widower's Pension, whereby the amount of both pensions, may not exceed 100% of average pension in Slovenia in the preceding calendar year. If widow/er is entitled to different pensions she/he may choose the pension which is more favourable. A divorced spouse who was entitled to alimony from the deceased until the insured person's death receives the same benefit under the same conditions as a widow/widower. If the deceased remarried but continued to pay alimony then the current spouse and all ex-spouses become co-beneficiaries.
Both pension schemes: Pension ceases if the widow(er) remarries before the age of 50. Grant of 3 years' pension.	 Widow's or Widower's Pension (vdovska pokojnina) ceases: if the recipient remarries before reaching the age of 58 years, except if he/she has acquired or retained this right on grounds of total incapacity for work; if a beneficiary enters an unmarried partnership before reaching the age of 58 years.
 Orphans having lost one parent: National pension (Kansaneläke): Basic amount: € 53 per month is paid if the child is under the age of 18 or aged 18-20 and a full-time student. Basic amount supplement is paid only to a child under the age of 18. Full amount of the supplement is € 80.16 per month. The amount is reduced by other survivor pensions. Statutory earnings-related pension (Työeläke): Age limit 18. The pension is 33-83% of the pension of the deceased, depending on how many children are entitled to a child pension. See point 1. "Surviving spouse". Orphans having lost both parents: National pension (Kansaneläke): Separate pension after both parents. Statutory earnings-related pension (Työeläke): Separate pension after both parents. 	 Orphans having lost one parent: Percentage of the Survivor's Pension (družinska pokojnina) depends on the number of the entitled persons: for a single member: 70%; for two members: 80%; for three members: 90%; for four or more members: 100%; of the deceased's pension at the time of death. Orphans having lost both parents: Each child bereaved of both parents is entitled, in addition to Survivor's Pension (družinska pokojnina) from one of the parents, to 30% of the Pension Rating Basis (pokojninska osnova) of the second parent, but not exceeding a maximum aggregate pension of 100% of the rating basis for the survivor's pension of the second parent.
	 I
No other beneficiaries.	No other beneficiaries.
National noncion (Kancanaläka)	1000/ of the decased percents pansion
National pension (Kansaneläke): No maximum. Statutory earnings-related pension (Työeläke):	100% of the deceased person's pension.
 100% of the deceased person's pension.	

VII SURVIVORS

PORTUGAL	ROMANIA
6. Other benefits	
 Death grant (subsídio por morte): As a rule awarded to the same persons as the survivor's pension, but without qualifying conditions. Amount equal to 6 times the average wage for the best 2 years out of the preceding 5 years (the average wage may not be lower than the minimum wage). Shared-out in the same proportions as the survivor's pension. Christmas and Holiday bonus: Amounts equal to those of the pension. Long-term Care Supplement (complemento por dependência): Supplement paid to pensioners who need permanent attendance by a third party. Monthly amount indexed to the indexing reference of social support IAS (indexante dos apoios sociais): € 90.96 or € 163.72 according to the degree (1st or 2nd) of dependency. Solidárito para idosos): Pensioners aged 65 years or more, justifying a residence in Portugal during the last six years and whose annual income is lower than € 4,800 (single person) or € 8,400 (couple) are paid a supplement corresponding to the difference between their income and this amount. 	e.g. Cash benefits: Death Allowance (ajutor de deces).
7. Minimum pension	
The percentages for calculating the pension are based on the minimum pensions for invalidity or old-age (see tables V "Invalidity" and VI "Old-age").	No statutory minimum pension.
8. Maximum pension	
No statutory maximum pension.	No statutory maximum pension.
TAXATION AND SOCIAL CONTRIBUTIONS	
1. Taxation of cash benefits	
Benefits are subject to taxation.	The Survivor Pension (pensia de urmas) is subject to taxation.
2. Limit of income for tax relief or tax reduction	
Taxation is only applied for an annual income starting at € 6,000.	The monthly limit of income for tax relief is the summation of RON 1,000 (€ 279) and the employee contribution mentioned at Table I "Financing" under "Contributions of insured and employers"/"Sickness and maternity: Benefits in kind".
3. Social security contributions from benefits	
No contributions.	Beneficiary subject to employee contribution mentioned at Table I "Financing" under "Contributions of insured and employers"/"Sickness and maternity: Benefits in kind". The monthly limit of income for contribution relief is RON 1,000 (€ 279).

FINLAND	SLOVENIA
All employees are covered by Group Life Insurance as a part of collective agreements. The benefit varies with age being € 14,440 for a deceased up to age 49 and then gradually decreasing to € 4,000 for ages 60-65. Child increase € 6,490/child under 18. The benefits are increased by 50% in case of accidental death.	 Indemnity (odpravnina): Widow/widower who has no entitlement to Survivor's Pension (družinska pokojnina), is not employed or self-employed and thus not compulsorily insured has a right to an indemnity of six monthly sums equivalent to what they would have got if they had been entitled to survivor's pension. Maintenance Grant (oskrbnina): Available after the date of expiry of the right to indemnity if widow/er has registered at the employment office within 30 days after that date and provided he/she fulfils the conditions for acquisition of the right to Supplementary allowance with respect to their means. The grant is also paid to a widow or a widower under age of 53 (does not fulfil conditions for widow/er's pension), provided they registered with the employment office within 30 days after the date of the loss of the right to widow/widower's pension. The grant is equal to the pension they would have received had they been entitled to a Survivor's Pension (družinska pokojnina) but it cannot exceed 35% of the minimum Pension Rating Basis (pokojninska osnova); the maximum duration is 24 months.
No statutory minimum pension.	No statutory minimum pension. An insured person entitled to Old-age Pension (starostna pokojnina) is guaranteed the minimum pension in the amount of 35% of the minimum Pension Rating Basis (pokojninska osnova) of € 476.54 (January 2008) per month.
No statutory maximum pension.	No statutory maximum pension. If a pension would exceed the amount four times higher than the minimum Pension Rating Basis (pokojninska osnova), the pension is assessed from the amount of maximum Pension Rating Basis of \in 1,906.16 (January 2008).
Pensions are subject to taxation. However, small pensions are entitled to a special tax deduction. Thus if the income consists of national pension (Kansaneläke) only, no income tax is paid. See "2. Limit of income for tax relief or tax reduction". Housing allowance and benefits from Group Life Insurance are tax-free.	Benefits are subject to taxation.
The amount of the full pension deduction for pension income per year is: Local taxes: Single person \in 7,150 married person \in 6,140 Government taxes: \in 1,590 for all. When pension is higher than the full pension deduction amount, the deduction is reduced by 70% of the exceeding amount. Pension deduction = Full deduction - 70% (pension-full deduction). No deduction is given when the annual pension is higher than Local taxes: Single person \in 17,363 married person \in 14,910 NOTE: If person has other (non-capital) income, this income (net of work related expanse) will also be included in the above formula reducing.	General taxation rules. No special relief for benefits.
related expenses) will also be included in the above formula reducing the amount of pension deduction. The amount of pension deduction cannot exceed the amount of pension income. Government taxes: € 12,400	
Sickness insurance/ Medical Care Insurance (Sairausvakuutus/ Sairaan- hoitovakuutus): Insured: contribution is 1.45% of pension and other social benefits.	Contribution of 5.96% for health services, the refund of travel expenses in case of sickness, funeral expenses and Death Grant (posmrtnina). No ceiling.

COMPARATIVE TABLES

VIII EMPLOYMENT INJURIES AND OCCUPATIONAL DISEASES

BELGIUM - SLOVAKIA - SWEDEN - UNITED KINGDOM



BELGIUM	SLOVAKIA
	JLOVANIA
APPLICABLE STATUTORY BASIS	
Employment injuries: Law of 10 April 1971. Occupational diseases: Laws co-ordinated by Royal Decree of 3 June 1970.	 Law on Social Insurance (Zákon o sociálnom poistení). No.461/2003. Law on Income Tax (Zákon o dani z príjmu) No. 595/2003. Labour Code (Zákonník práce), Law No. 311/2001. Law on Compensation for Pain and on Compensation for Reduced Social Opportunities (Zákon o náhrade za bolesť a náhrade za staženie spoločenského uplatnenia) No. 437/2004. Decree No. 159/2001 on minimum requirements of security and health to use working devices. Decree No. 201/2001 on minimum requirements of security and health for the workplace. Directive No. 13/1986 for performing hygiene service and for declaration of dangerous works. Decree No. 511/2004 on job classification according to the health risks aspects.
BASIC PRINCIPLES	
Compulsory social insurance scheme for employees with benefits in kind and earnings-related cash benefits. Employment injuries are mainly financed by insurance premiums paid by the employers; oc- cupational diseases are mainly financed by contributions.	Compulsory insurance scheme financed by employers' contribu- tions covering employees with earnings-related cash benefits. Benefits in kind are covered by the health care insurance scheme.
FIELD OF APPLICATION	
1. Beneficiaries	
Employment injuries: Employees who are submitted to social secu- rity, apprentices and those to whom the Crown has granted status. Occupational diseases: As above (except those to whom the Crown has granted employment injury status) and also trainees, even unpaid, pupils and students exposed to risk because of their	All employees, students, and certain other persons. No voluntary insurance.
instruction.	
2. Exemptions from the compulsory insurance	
No exemptions.	No exemptions.
RISKS COVERED	
1. Employment injuries	
Accident injury - occurred during and as a result of the execution of the work contract - which causes a lesion.	Injury or death sustained in connection with the performance of working tasks, except those caused by the employee or caused due to the intoxication of the employee.
2. Travel between home and work	
Covered.	Not covered.
3. Occupational diseases	
 List of occupational diseases (Royal Decree of 28 March 1969, as amended) and open system or not included on list, when occupational demands are found to be the determining and direct cause of the disease. Proof that the person has been exposed to occupational risk and a link to the cause must be provided by the victim or the beneficiaries. 	List of 47 occupational diseases mentioned in the Annex No.1 of the Law No. 461/2003 on Social Insur–ance (Zákon o sociálnom poistení). No mixed system.
CONDITIONS	
1. Employment injuries	
Declaration by the employer within 8 days after the accident.	Time limit for entitlement: 3 years from the day when the benefit was granted.

	SWEDEN		UNITED KINGDOM	
	Work Injury Insurance Act (Lag om arbetsskadeförsäkring) of 1976 and amendments. (Applies to work accidents/injuries/diseases occurred as from 1 July 1977).		Social Security Contributions and Benefits Act 1992. Social Security Administration Act 1992. Pneumoconiosis etc (Workers' Compensation) Act 1979. Social Security Act 1998.	
	Compulsory social insurance scheme financed by contributions covering the active population (employees and self-employed) with benefits in kind and earnings-related cash benefits.		State non-contributory (tax-financed) "no-fault" scheme covering em- ployees with flat-rate benefits.	
	All employees and self-employed persons.		Employees. No voluntary insurance.	
	No exemptions.		Self employed and members of armed forces.	
	Every accident or illness related to the working situation. Proof system. An injury is accepted as a work injury if it is clear that the person has suffered an accident or some other harmful influence at work. The injury must be presumed to be a result from the harmful influence if there are stronger grounds for such a presumption than the contrary.		Personal injury caused while a person is at work or while he or she is working.	
	Covered.		As a general rule, not covered.	
	There is no special list of occupational diseases. Proof system. A disease is covered if it is clear that the person has suffered some harmful influence at work. The disease must be presumed to be a result from the harmful influence if there are stronger grounds for such a presumption than the contrary.		 There are schedules of prescribed industrial diseases attributable to working conditions: Before 5 July 1948 schedule of 15 listed diseases, on or after 5 July 1948 schedule of 76 listed diseases. There are special rules for certain respiratory diseases, including pneumoconiosis and mesothelioma. Diseases which are not included in the list are not covered except when a person contracts the disease as a result of an industrial accident.	
	Immediate notification by the employer or by the self-employed.		No qualifying conditions.	

	BELGIUM	SLOVAKIA	
2. Occupationa	l diseases		
	Have been exposed to risk. Risk is presumed to exist when the per- son works in an enterprise quoted in a list fixed with a Royal Decree. Coexistence of list and open system not included on the list.	Time limit for entitlement: 3 years from the day when the benefit was granted. For some diseases the highest permissible periods of exposure (thresholds) are determined by regulations issued by the competent department of the industrial hygiene service. For example: the number of working shifts is limited to 4,600 in case of a stamper working in a mine with a dust risk concentration of the categories 3 or 4.	
BENEFITS			
1. Temporary in	icapacity:	 	
Benefits in kine	**		
- Free choice c	of doctor or hospital		
	Free choice, unless for employment accident, if the enterprise has a recognised, comprehensive medical department.	Free choice of doctor or hospital, with the exception of preventive care which may be provided by the enterprise's own health centres.	
- Payment of c	osts and contribution by person involved		
	Employment accident: If free choice allowed, refund subject to an official scale. If organised department: Free care.	Borne by the compulsorily insured employer. No co-payment of the beneficiary.	
	Occupational disease: According to official rate and specific nomen- clature. No co-payment of the beneficiary.		
Cash benefits			
- Waiting perio			
	Employment accident: No waiting period. Occupational disease: Minimum of 15 days of incapacity.	No waiting period.	
- Duration			
	Until recovery or permanent condition.	Injury Surcharge Benefit (Úrazový príplatok): Maximum 52 weeks.	
- Amount of th	ne benefit		
	 Amount: Total incapacity: Per calendar day 90% of basic earnings divided by 365 days. Partial incapacity: Benefit equal to the difference between earnings before the accident or the beginning of incapacity due to occupational disease, and the earnings in partial employment. Basic earnings used for calculation: Effective yearly earnings in the year preceding the accident or the incapacity due to an occupational disease. Maximum: € 35,099.83. Minimum for minors and apprentices: € 5,717.93; taking into account of wages of adult workers, when minors become of age. 	 Injury Surcharge Benefit (Úrazový príplatok) as a surcharge to the Sickness Benefit (Nemocenské): 55% of the daily assessment base for the first 3 days, 25% of the daily assessment base for the following days of incapacity. Daily assessment base: Average daily earnings in the calendar year before the injury occurred. 	

SWEDEN	UNITED KINGDOM
Immediate notification by the employer or by the self-employed.	 Work: Occupation involving exposure to specified substances/work processes. Periods of exposure to risk: Minimum of 10 years for occupational deafness, 20 years for chronic bronchitis and emphysema, 10 years for osteoarthritis of the hip in farmers. 5 years (before 1 January 1975) or 10 years (from 1 January 1975) for primary carcinoma of the lung with exposure to asbestos. Others: No limit. Periods of liability: Disease must be shown to be due to nature of person's work in employed earners' employment from 5 July 1948. Before that date, the applicant must have been an employee (certain conditions apply). No time limit for claiming, but benefit is only backdated for the 3 month period before the claim. Claims for occupational asthma and occupational deafness must be made within 10 years and 5 years respectively of the employment causing the disease.

No special provisions for employment injuries/occupational diseases. See table II "Health care".	No special provisions for employment injuries/occupational diseases. See table II "Health care".
Medical treatment: See table II "Health care". Necessary costs for medical treatment abroad, dental care and special aids for handicapped persons are covered.	No charges to the patient for NHS services.
One day.	Industrial Injuries Disablement Benefit: Payable from 91 st day after the date of the industrial accident or onset of the disease, except mesothe- lioma, which is payable from the date of onset (all subject to 3 months limitation on backdating). Occupational deafness is payable from the date of onset or the date of claim, if later. Statutory Sick Pay or Short-term Incapacity Benefit: 3 days (see table
	III "Sickness - cash benefits).
There is no formal limitation but the sickness cash benefit (sjukpenning) may be converted into Activity compensation (aktivitetsersättning) (for persons aged 19 to 29 years) or Sickness compensation (sjukersättning) (for persons aged 30 to 64 years) if the illness continues for an extended period of time.	Industrial Injuries Disablement Benefit: Payable for the duration of the assessment of the disablement. Sickness Benefits (see table III): Maximum of 28 weeks for Statutory Sick Pay and 52 weeks for Short-term Incapacity Benefit.
The factor 0.97 is multiplied by 80% of the income qualifying for sickness cash benefit.	 Industrial Injuries Disablement Benefit is paid at the same rate whether the incapacity is temporary or permanent. The rate of benefit depends on the degree of disablement ("t"). "t" = 1% - 13%: Nothing payable, except for pneumoconiosis and bys-siniosis (in these cases, "t" = 1% - 10%: GBP 13.17 (€ 18) a week, "t" = 11% - 19%: GBP 26.34 (€ 36) a week). For all other diseases: "t" = 14% required for a pension ("t" = 14% - 19%: treated as 20%). Except occupational deafness where "t" = 20%. Diffuse Mesothelioma and Primary Carcinoma of the lung with exposure to asbestos, are paid at the 100% rate. Benefit Amount: Paid weekly in 10% increments according to the level of disablement (rounded to the nearest 10%): Age 18 + 43, or under 18 with dependants: from 20% GBP 26.34 (€ 36) to 100% GBP 13.1.70 (€ 178) Under age 18: From 20% GBP 16.14 (€ 22) to 100% GBP 80.70 (€ 109)

BELGIUM	SLOVAKIA
Permanent incapacity	
Minimum level of incapacity giving entitlement to compensation	
No minimum level.	Injury Annuity Benefit (Úrazová renta): 41% reduction in capacity. One-off Redemption Benefit (Jednorazové vyrovnanie): 10% reduc- tion in capacity.
Possibility of review	
Review possible: Employment injuries: During 3 years from the date of the agree- ment between the parties or the final decision.	Regular review of the capacity for work is performed in terms assigned by the doctor. In case of permanent invalidity only if the change of the capacity for work can be assumed.
Occupational diseases: At any time at the victim's request.	
Basic earnings used for calculating annuity	
Total gross earnings (possibly reconstituted) in the year prior to the accident or the cessation of work because of occupational disease. Maximum ceiling: € 35,099.83 per year. For minors: Earnings of adults.	Average daily gross earnings in the calendar year before the injury occurred.
Amount or formula	
In general: E x t. E = earnings, t = degree of incapacity.	Injury Annuity Benefit (Úrazová renta) as a monthly benefit calcu- lated as: Benefit = 30.4167 x 0.8 x E x t
Except, since April 1st 1984. For permanent incapacity below 10%: reduced by half between 0% and 5%, and by one quarter between 5% and 10%.	 E = average daily gross earnings in the year preceding the injury. t = degree of incapacity. The annuity ceases when the insured person reaches the pension-
Examples: "t" = 100% : 100% "t" = 50% : 50% "t" = 20% : 20% "t" = 8% : 6% "t" = 4% : 2%	able age.
Supplements for dependants	
No supplements.	No supplements.
Supplements for care by another person	
In the case of employment injuries and occupational diseases, a supplementary allowance (allocation complémentaire/aanvul- lende uitkering) of max. 12 times the average monthly guaranteed income, according to the degree of need, index-linked from the beginning of the period of compensation and terminated as of the 91st day of hospitalisation.	Effective compensation of nursing costs. See also table XII "Long- term care".
Redemption	
Employment injuries: Redemption possible, at the request of the victim, up to one third of the capital representing the annuities, if at least 19% incapacity. Occupational diseases: No redemption.	One-off Redemption Benefit (Jednorazové vyrovnanie) if incapacity degree between 10% and 40%. Formula: Benefit = E x 365 x t E = average daily gross earnings in the year preceding the injury. t = degree of incapacity.
Accumulation with new earnings from work	
Full accumulation permitted.	Full accumulation permitted.
Accumulation with other pensions	
Limitations with benefits for sickness, invalidity, retirement and other pensions for employment injuries and occupational diseases.	If combined with Invalidity Pension (Invalidný dôchodok), the Injury Annuity (Úrazová renta) is reduced by the amount of the Invalid- ity Pension. No entitlement to Injury Annuity (Úrazová renta) if in receipt of Injury Surcharge Benefit (Úrazový príplatok) or Retraining Benefit (Rekvalifikačné) or Rehabilitation Benefit (Rehabilitačné).

SWEDEN		UNITED KINGDOM
1/15 reduction in capacity.		14% disablement, except:1% for pneumoconiosis, diffuse mesothelioma and byssinosis,20% for occupational deafness.
Review possible at any time up to retirement age.		Reconsideration possible if circumstances change.
Income qualifying for sickness cash benefit (sjukpenning) at the time when annuity is to be paid out or the income which should have been such an income if the social insurance office had known all the facts. Minimum: 24% of the price base amount (prisbasbelopp), i.e. SEK 9,840 (\notin 1,044) per year. Maximum: SEK 307,500 (\notin 32,624) per year.		Not applicable. Benefits not based on earnings.
100% of loss of earnings.		Industrial Injuries Disablement Benefit is paid at the same rate whether the incapacity is temporary or permanent. The rate of benefit is as shown for "temporary cash benefits" above.
No supplements.		No supplements.
No supplements.		Constant Attendance Allowance (CAA) is payable to a person with a 100% disablement assessment who needs someone to care for them regularly. It is payable at four rates according to the level of care required. Exceptionally Severe Disablement Allowance is payable at GBP 52.70 (€ 71) per week if there is entitlement to constant attendance allowance at the two higher rates and the need for care is likely to be permanent.
No redemption.		No redemption.
Full accumulation permitted.		Full accumulation permitted.
If combined with a social security pension annuity is only paid to com- pensate loss of earnings which are not compensated through pension.		Full accumulation possible with contributory benefits. But taken into account in full for certain income-related benefits.

BELGIUM	SLOVAKIA
b. Death	
Surviving spouse	
Surviving spouse or legal cohabitant: E x 30%. Remarriage after entitlement to benefit: no influence. Redemption possible of maximum 1/3 rd of capital representing an- nuities. No redemption possible for occupational diseases. Divorced or separated: Annuity under special conditions.	 Widow's Benefit (Vdovský dôchodok) and Widower's Benefit (Vdovecký dôchodok) see table VII "Survivors". One-off Compensation Benefit (Jednorazové odškodnenie): 730-times the daily assessment base (daily gross earnings of the deceased) up to a maximum of SKK 1.210 Mil. (€ 36,027). Surviving Annuity (Pozostalostná úrazová renta): only for those
	who were in receipt of alimony by court order. The amount is the same as alimony, but limited to the deceased person's Injury An- nuity (Úrazová renta). The annuity ceases when the insured person reaches the pensionable age.
Orphans (of father or mother, of both parents)	
 Orphans of father or mother: Each orphan: E x 15% with maximum of 45% for group of children. Orphans of both parents: Each orphan: E x 20%. Max.: 60% for group of children. 	Orphan's Pension (Sirotský dôchodok) see table VII "Survivors". One-off Compensation Benefit (Jednorazové odškodnenie): a half of benefit for spouse, but the total amount for all children is up to maximum SKK 1.210 Mil. (€ 36,027) for each deceased parent.
Annuities due until age 18, or until end of entitlement to family benefit, and in case of disabled orphans: for life (or duration of handicap). Conditions set by Royal Decree.	Surviving Annuity (Pozostalostná úrazová renta): only for those who were in receipt of alimony benefit by court order. The amount is the same as alimony, but limited by deceased Injury Annuity (Úra- zová renta). The annuity ceases when the insured person reaches the pensionable age.
Dependent parents and other relatives	
 Father and mother: E x 20% each, if there is neither a spouse nor a legal cohabitant nor a child entitled to benefits; E x 15% if there is still a spouse (or legal chohabitant) without a child beneficiary. Other ancestry: E x 15% under special circumstances. Brothers, sisters, grandchildren: Under special circumstances, 15% each (total max. 45%). 	Surviving Annuity (Pozostalostná úrazová renta): only for those who had alimony benefit, ordered by court. The amount is the same as alimony, but limited by deceased Injury Annuity (Úrazová renta). The annuity ceases when the insured person reaches the pension- able age.
Maximum for all beneficiaries	
Waximum for all beneficiaries With order of priority, see the maxima above.	One-off Compensation Benefit (Jednorazové odškodnenie): • SKK 1.210 Mil. (€ 36,027) for spouse + • SKK 1.210 Mil. (€ 36,027) for all children for each deceased parent. Surviving Annuity (Pozostalostná úrazová renta): benefits for all beneficiaries must not exceed the amount of Injury Annuity (Úrazová renta) that the deceased would have been entitled to at 100% loss of capacity for work.
Capital sum on death	
Allowance for funeral expenses (Indemnité pour frais funéraires/Be- grafenisvergoeding): 30 times the average daily income (30 x S) 365, with a minimum corresponding to the one applicable for sickness and disability insurance. Real expenses related to the transfer of the victim body to the burial place are refunded.	 Lump sums to cover funeral expenses: Costs invoiced by the undertaker, cemetery charges, cost for the headstone, and adjustment of the grave up to maximum of SKK 60,509 (€ 1,802), travel costs and 1/3 of the cost of adequate mourning clothes for close relatives up to SKK 3,000 (€ 89) per person up to maximum of SKK 60,509 (€ 1,802). Funeral Grant (Príspevok na pohreb) see table III: "Sickness – Cash
	benefits".
4. Rehabilitation	
Further information can be attained from the Funds for disabled persons of the (French, Flemish or German speaking) communities and from the Funds for professional diseases.	 Rehabilitation Benefit (Rehabilitačné): 80% of the daily assessment base (average daily earnings in the calendar year before the injury occurred). The benefit is provided during the occupational rehabilitation. Retraining Benefit (Rekvalifikačné): 80% of the daily assessment base (average daily earnings in the calendar year before the injury occurred). The benefit is provided during retraining.

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Adjustment annuity (omställningslivränta) and special survivors' annuity (särskild efterlevandelivränta) with the same qualifications as in the pen- sion scheme: See table VII "Survivors". The amount is calculated on the annuity basis of the deceased and is 20% of the annuity if the deceased has surviving children entitled to annuity or otherwise 45%.	No special provisions for employment injuries or occupational diseases. Same benefits as in table VII "Survivors".
Orphans of father or mother: 40% of the annuity basis of the deceased. Is more than one child entitled to annuity the percentage is raised with 20% for each additional child. The amount is divided equally among the children. Granted until the age of 18, if studies continue to 20. Orphans of both parents: As above but the children can get annuity after both parents.	No special provisions for employment injuries or occupational diseases. Same benefits as in table VII "Survivors".
No other beneficiaries.	No other beneficiaries.
	1
100% of the annuity basis.	No maximum.
Europei europei (ha europei eu	
Funeral grant (begravningshjälp): 30% of the price base amount (prisbas- belopp) at the time of death = SEK 12,300 (€ 1,305).	No special provision under employment injuries or occupational dis- eases scheme. Under survivors benefit, lump sum payment of GBP 2,000 (€ 2,698) may be payable on spouse's death.
Rehabilitation benefit (rehabiliteringsersättning) is paid after a sickness period if a person takes part in vocational training. The benefit is paid with the same amount as sickness cash benefit (sjukpenning), see table III "Sickness - cash benefits". The local social insurance office (försäkring- skassa) may induce the injured person to change occupation. During studies or vocational training rehabilitation benefit (rehabiliteringsersätt- ning) is payable. Loss of income as a result of work injury is compensated through annuity or during rehabilitation by rehabilitation benefit.	Specialist services for people with disabilities are delivered through local Disability Service Teams, and training through Local Learning and Skills Councils. Accessible local employment rehabilitation is promoted through partnerships with the voluntary sector. All the above are Government funded. Mainstream employment services and programmes - often with relaxed entry conditions - are also open to disabled people.

S. Other benefits No other benefits. A product of the product		BELGIUM		SLOVAKIA	
Adjustment for annuities which for specified categories of invalidity Annual adjustment (I ^{III} July) according to the increase of consumer prices and of the average wage. ADJUSTMENT Adjustment for annuities which for specified categories of invalidity rates do not reach a specifie sput of specified subject to possible review get. Annual adjustment (I ^{III} July) according to the increase of consumer prices and of the average wage. TAXATION AMAP SOCIAL CONTRIBUTIONS Taxation of cash benefits I. Taxation of cash benefits Benefits are not subject to taxation. Benefits are subject to taxation a for a structure of a diability less and a diability represent on the subject to taxation. Benefits are not subject to taxation. I. Taxation of cash benefits Image and the allowance for a diability less the not subject to taxation. Benefits are not subject to taxation. J. Dividing the tax presention of the tax presention of the tax presention of the average mage. Image and the allowance for a diability less the not subject to taxation. J. Taxation of cash benefits Image and the allowance for a diability less to taxation. Benefits are not subject to taxation. J. Limit of income for tax relief or tax reluction is calculated in accordance with the taxpayer's income. Image and the allowance for function allocation or hub and the taxpayer's income. J. Social security contributions from benefits Tax reluction allowed. The reduction is calculated in accordance with the taxpayer's income.	5. Other benefits				
Adjustment for annuities which for specified categories of invalidity rates do not reach a specific sum. These sums are fixed by royal decree and are pegged and adjusted subject to possible review every year. Annual adjustment (1 st July) according to the increase of consumer prices and of the average wage. TAXATION AND SOCIAL CONTRIBUTIONS I. Taxation of cash benefits Benefits are subject to taxation as far as they are a compensation of a permanent loss of earnings. In practice, cash benefits granted to pensioners, benefits granted for occupational diseases or for employment injuries (responsible of a disability less than 20%) are not taxable. The allowance for funeral expenses (indemnité pour frais funéraires/begrafenisvergoeding) are not subject to taxation. Benefits are not subject to taxation. I. Limit of income for tax relief or tax reduction Tax reduction allowed. The reduction is calculated in accordance with the taxpayer's income. Not applicable. Benefits are not subject to taxation. Output A reduction allowed. The reduction is calculated in accordance with the taxpayer's income. Not applicable. Benefits from benefits Social security contributions from benefits		No other benefits.		s liečením): costs non-reimbursed by health insurance agencies up to a maximum of SKK 605,075 (€ 18,016). Compensation for Pain (Náhrada za bolest) and Compensation for Reduced Social Oppor- tunities (Náhrada za sťaženie spoločenského uplatnenia) in case of injury: 1 point = SKK 375.22 (€ 11). See also table III "Sickness - cash	
rates do not reach a specific sum. These sums are fixed by royal decree and are pegged and adjusted subject to possible review every year. prices and of the average wage. TAXATION AND SOCIAL CONTRIBUTIONS I. Taxation of cash benefits I. Taxation of cash benefits Benefits are subject to taxation as far as they are a compensation of a permanent loss of earnings. In practice, cash benefits granted to pensioners, benefits granted for occupational diseases or for employment injuries (responsible of a disability less than 20%) are not taxable. The allowance for funeral expenses (indemnité pour frais funéraires/begrafenisvergoeding) are not subject to taxation. Benefits are not subject to taxation. I. Limit of income for tax relief or tax reduction Z. Limit of income for tax relief or tax reduction is calculated in accordance with the taxpayer's income. Not applicable. Benefits are not subject to taxation. J. Social security contributions from benefits	ADJUSTMENT	r			
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Benefits are subject to taxation as far as they are a compensation of a permanent loss of earnings. In practice, cash benefits granted to pensioners, benefits granted for occupational diseases or for employment injuries (responsible of a disability less than 20%) are not taxable. The allowance for assistance of a third party (allocation pour l'aide d'une tierce personne/tegemoetkoming voor hulp van derde) and the allowance for funeral expenses (indemnité pour frais funéraires/begrafenisvergoeding) are not subject to taxation. Benefits are not subject to taxation. 2. Limit of income for tax relief or tax reduction with the taxpayer's income. Tax reduction is calculated in accordance with the taxpayer's income. Not applicable. Benefits are not subject to taxation. 3. Social security contributions from benefits Image: Contributions from benefits Image: Contributions from benefits	TAXATION AN	ID SOCIAL CONTRIBUTIONS			
of a permanent loss of earnings. In practice, cash benefits granted to pensioners, benefits granted for occupational diseases or for employment injuries (responsible of a disability less than 20%) are not taxable. The allowance for assistance of a third party (allocation pour l'aide d'une tierce personne/tegemoetkoming voor hulp van derde) and the allowance for funeral expenses (indemnité pour frais funéraires/begrafenisvergoeding) are not subject to taxation. 2. Limit of income for tax relief or tax reduction Tax reduction allowed. The reduction is calculated in accordance with the taxpayer's income. Not applicable. Benefits are not subject to taxation. 3. Social security contributions from benefits	1. Taxation of c	ash benefits	T		
Tax reduction allowed. The reduction is calculated in accordance with the taxpayer's income. Not applicable. Benefits are not subject to taxation. 3. Social security contributions from benefits Image: Contribution of the taxation of the taxation of the taxation of taxation.		of a permanent loss of earnings. In practice, cash benefits granted to pensioners, benefits granted for occupational diseases or for employment injuries (responsible of a disability less than 20%) are not taxable. The allowance for assistance of a third party (allocation pour l'aide d'une tierce personne/tegemoetkoming voor hulp van derde) and the allowance for funeral expenses (indemnité pour frais		Benefits are not subject to taxation.	
with the taxpayer's income. Image: Comparison of the taxpayer's income. 3. Social security contributions from benefits	2. Limit of income for tax relief or tax reduction				
				Not applicable. Benefits are not subject to taxation.	
Contribution rate of 13.07%. No contributions.	3. Social securi	ty contributions from benefits			
		Contribution rate of 13.07%.		No contributions.	

SWEDEN	UNITED KINGDOM
Disability allowance (handikappersättning) can also be paid: see table V "Invalidity".	Reduced Earnings Allowance (REA) is payable where a loss of earnings has been suffered as a result of an accident at work or a prescribed in- dustrial disease. The amount payable is the difference between earnings from the regular occupation and those from post accident employment up to a maximum of GBP 52.68 (\in 71). On reaching retirement age REA converts to the Retirement Allowance (RA) currently payable at a maxi- mum rate of GBP 13.17 (\in 18). REA and RA were abolished for accidents/ diseases on or after 1 October 1990. Claimants already in receipt of REA and RA before this date continue to receive benefit, subject to continuity conditions. However, claims can still be made where the accident or the date of onset of the disease was before 1 October 1990. The Analogous Industrial Injuries Scheme is a small-scale scheme which compensates both young people and adults for accidents and diseases occurring whilst they are on work based training programmes and who are unable to claim under the statutory Industrial Injuries Scheme. It pays benefit at the same rate as the main Industrial Injuries Scheme. The Pneumoconiosis etc. (Workers' Compensation) Act 1979 pays compensa- tion for sufferers of certain dust-related diseases (or their dependants) who are unable to claim damages from the employers where the dust exposure, which caused the disease, occurred, because the employers concerned have ceased to carry on business. Payment is made in the form of a lump sum. Certain qualifying conditions must be satisfied before payment can be made.
Annual adjustment according to changes in the price base amount (prisbasbelopp). In addition, the annuity is yearly increased by 50% of the overall real wage growth.	Adjustment by legislation at least annually in line with movements in the general level of prices.
Benefits, except disability allowance (handikappersättning) and funeral grant (begravningshjälp), are subject to taxation.	Industrial Injuries Disablement Benefits: Not subject to taxation. Temporary disability benefits: Higher rate short-term incapacity benefit is subject to taxation. Lower rate short-term incapacity benefit is not subject to taxation.
General taxation rules. No special relief for benefits.	Industrial Injuries Disablement Benefits: Not applicable. Temporary disability benefits: General taxation rules. No special relief for benefits.
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No contributions.	No contributions.

COMPARATIVE TABLES

IX FAMILY BENEFITS

BULGARIA - SWITZERLAND - CZECH REPUBLIC - DENMARK



BULGARIA	SWITZERLAND
PLICABLE STATUTORY BASIS	
Family Allowances Act (Закон за семейните помощи) 2002. Law on the State budget of the Republic of Bulgaria for 2007 (Закон за бюджета на държавното обществено осигуряване за 2007 г.). Social Insurance Code (Кодекс за социално осигуряване) 1999 title amended 2003. Law on Integration of People with Disabilities (Закон за интеграция на хората с увреждания) 2004. Decree No 51 of the Council of Minis- ters (Министерски съвет) of 29.03.2005 on Determination of New Monthly Amount of the Guaranteed Minimum Income (Гарантиран минимален доход) and the Amount of the Single Targeted Allowance for Pupils Enrolled in the First Grade of a State or Municipal School for 2005. Family Code (Семеен кодекс) 1985. Ordinance on payment by the State of adjudged maintenance payment 2002.	Federal Law on Family Allowances in Agriculture of 20 June 1952 (Bundesgesetz über die Familienzulagen in der Landwirtschaft, FLG/Loi fédérale sur les allocations familiales dans l'agriculture, LFA). Federal Law on General Provisions concerning Legis- lation on Social Insurances of 6 October 2000 (Bundesgesetz über den Allgemeinen Teil des Sozialversicherungsrechts, ATSG/Loi fédérale sur la partie générale du droit des assurances sociales, LPGA).Cantonal schemes: 26 cantonal schemes on family allowances.
HILD BENEFIT	
Basic principles	
A universal system financed by the State budget providing flat-rate benefits to all beneficiaries.	Federal scheme: Scheme for agricultural workers and self-employed farmers, financed by contributions and taxes. Cantonal schemes: Schemes for employees not involved in agriculture, financed by contributions. In certain cantons, allowances for the self-employed and/or persons not engaged in paid employment.
Field of application: beneficiaries	
 Pregnant women who are Bulgarian citizens; families of Bulgarian citizens: for the children raised in the country; families where one parent is a Bulgarian citizen: for the children with Bulgarian citizenship raised in the country; relatives, acquaintances or host families with which the children are accommodated. pregnant women - foreign citizens and families of foreign nationals residing permanently and raising their children in this country - if receipt of such allowances is envisaged in another law or international agreement to which the Republic of Bulgaria is party. 	Federal scheme: Agricultural workers. Self-employed farmers. Cantonal schemes: Employees not involved in agriculture, in all cantons. Self-employed, in certain cantons. Persons not engaged in paid employment, in certain cantons. Children giving entitlement to allowances: children of married or unmarried parents, adopted children, children of the spouse/registered partner, foster children; in the federal scheme and in certain cantons: also brothers and sisters if the entitled person supports them.
Conditions	
Residence of the child	
The child must reside in Bulgaria.	Federal scheme: No residence conditions. Cantonal schemes: Residence conditions in some cantons.
Other conditions	
 Monthly child benefit (Месечно обезщетение за дете): Paid until completion of secondary education, but not after the age of 20. The average monthly gross income per family member must be lower or equal to BGN 300 (€ 153) provided that the child: is not placed for raising at full state support in a specialized child-care institution; continues his/her studies until graduation from high school, but not after the age of 20, regularly attends school, unless this is impossible because of the child's health; resides permanently in Bulgaria. Monthly benefit for raising child under one year of age (Месечни обезщетения за отглеждане на дете до 1-годишната му възраст): Paid in cash and/or in the form of social investment to the mother (adoptive mother) whose monthly income per family member is lower or equal to BGN 300 (€ 153) provided that: the mother (adoptive mother) is not insured and does not receive maternity benefits in accordance with the procedure of the Social Insurance Code; the child is not placed for raising at a specialised child-care institution at full state support; the child resides permanently in Bulgaria. When the mother is insured but does not receive maternity benefits because she has not completed the necessary period of insurance she has the right to this benefit until its expiry or completion of the required period. 	Federal scheme: No other conditions. Cantonal schemes: In cantons where allowances are paid to the self-employed or persons not engaged in paid employment, in principle the entitlement is subject to means testing.

CZECH REPUBLIC		DENMARK
Act No 117/1995 Coll. on State Social Support (Zákon o státní sociální podpoře).		Con. Act No 909 of 3 September 2004 on child benefits (om Børnetil- skud).
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	_	
Tax financed universal scheme with income tested benefit covering all residents in the Czech Republic.		Tax financed universal scheme covering all residents.
Child under his/her law age. Persons responsible for raising a child or		All residents. For certain benefits: only inhabitants with Danish nationality or
children.		foreigners domiciled in Denmark since 1 or 3 years.
Child and family (jointly considered persons) must be permanent residents		The child must be resident in Denmark.
in the Czech Republic or citizens of the EU or other persons stipulated by Act No 117/1995 Coll. on State Social Support (Zákon o státní sociální podpoře).		
No other conditions.		General family benefits: the parent with the parental authority must pay
		taxes in Denmark in accordance with the law on taxation at the source.

IX **FAMILY** BENEFITS

BULGARIA	SWITZERLAND	
4. Age limit		
Benefit for a child till completion of secondary education: 20 years. Benefit for raising a child until the age of one: One year.	Federal scheme: Ordinary age limit: 16 years; in the case of studies or apprenticeship: 25 years; in the case of sickness or disability: 20 years. Cantonal schemes: Ordinary age limit: in principle, 16 years; in the case of studies or apprenticeship: in principle, 25 years;	
	 in the case of sickness or disability: 18, 20 or 25 years, depending on the canton. 	
5. Benefits		
Monthly amounts		
Monthly child benefit (Месечно обезщетение за дете): Benefits for a child till completion of secondary education: BGN 25 (€ 13) per month for each child and, in case of birth of two or more children simultaneously, 150% of that benefit for each child. Monthly benefit for raising a child under the age of one year (Месечни обезщетения за отглеждане на дете до 1-годишната му възраст): BGN 100 (€ 51) per month. The benefits are granted in cash or in the form of social investments.	 Federal scheme: CHF 190 (€ 115) per month per child, in lowland regions. CHF 210 (€ 127) per month per child, in mountain regions. Cantonal schemes: From CHF 160 (€ 97) to CHF 370 (€ 224) per month, depending on the canton and the number of children. 	
Variation with income		
No variation with income.	Federal scheme: No variation with income. Cantonal schemes: No variation with income for employees.	
Variation with age		
No variation with age.	No variation with age, except in 4 cantons.	
6. Special cases: (unemployed persons, pensioners, orphans)		
Normal family benefits.	Unemployed persons: The unemployment insurance pays a supplement to unemployment allowances which corresponds to the amount of the family benefits the unemployed person would be entitled to if he/she were in work. Pensioners: Child pensions (Kinderrenten/rentes pour enfant) provided by the 1st and 2nd pillars (see tables V "Invalidity" and VI "Old-age"). Orphans: Orphan's pensions (Waisenrenten/rentes d'orphelin) provided by the 1st and 2nd pillars and by accident insurance (see tables VII "Survivors" and VIII "Employment injuries and occupational diseases").	
CHILD-RAISING ALLOWANCES/BENEFITS		
1. Basic principles		
Part of the contributions funded scheme providing flat-rate benefit for raising a small child (Обезщетение за отглеждане на малко дете).	No special allowance.	
2. Field of application: beneficiaries		
Mother, father, adoptive parent or guardian using leave.	Not applicable.	

CZECH REPUBLIC	DENMARK
Until the completion of compulsory education (generally 15 years) but extended up to 26 years if the child remains in further education or vocational training or if the child for serious health reasons cannot work or train for future occupation.	18 years.
 Child Allowance (Přídavek na dítě) is an income-tested benefit set at fixed amount according to child's age. Child Allowance amounts to: CZK 500 (€ 19) for children under 6 year, CZK 610 (€ 23) for children aged 6 to 15, CZK 700 (€ 27) for children aged 15 to 26. 	Child benefit (börnefamilieydelse):For each child of 0 - 2 years:DKK 3,539 (\notin 475) per quarter = DKK 1,180 (\notin 158) per month.For each child of 3 - 6 years:DKK 3,198 (\notin 429) per quarter = DKK 1,066 (\notin 143) per month.For each child of 7 - 17 years:DKK 2,464 (\notin 331) per quarter = DKK 821 (\notin 110) per month.
Entitlement to Child Allowance (Přídavek na dítě) is limited to the family with an income under 2.4 times the family Living Minimum (Životní minimum).	A special allowance depending on the family income is designed for children with one or both parents retired. A degressive reduction of the allowance starts where the family income is over the limit set for Social Pensions supplements. See further in this table "Special cases: Pension- ers".
Child Allowance (Přídavek na dítě) is differentiated according to child's	See "Monthly amounts".
age, see Table IX, "Benefits - Monthly amounts".	
Normal family benefits.	Unemployed persons: Normal family benefits. Pensioners: Benefit for pensioners with the exception of the beneficia- ries of invalidity pensions granted after 1 January 2003: Special allowances of DKK 2,907 (€ 390) per quarter = DKK 969 (€ 130) per month for each child. When one of the parents is pensioner, reduction depending on the income (see above). When both parents are pensioners, the benefits are supplemented by DKK 1,500 (€ 201) per year for each child = DKK 125 (€ 17) per month.
	Orphans: Special additional allowance of DKK 3,000 (€ 402) per quarter for each motherless or fatherless child = DKK 1,000 (€ 134) per month. Special additional allowance for each motherless and fatherless child: Amount is raised to DKK 6,564 (€ 880) per quarter and child = DKK 2,188 (€ 293) per month.
Parental Allowance (Rodičovský příspěvek): Tax financed universal system providing a flat-rate benefit to a parent who personally provides full-time proper care for a small child.	Parental leave: tax financed universal protection scheme.
Permanent residents in the Czech Republic or citizens of the EU or other persons stipulated by Act No 117/1995 Coll. on State Social Support (Zákon o státní sociální podpoře).	Parents with children under the age of 9 are entitled to a leave to take care of them.

IX **FAMILY** BENEFITS

	BULGARIA	SWITZERLAND	
3. Conditions			
	After the expiry of the Pregnancy and childbirth benefit (Обезщетение за бременност и раждане) mother, father, adoptive parent or guardian using leave are entitled to additional paid leave for raising a small child (for first, second and third child: until the child reaches 2 years of age and 6 months for each following child).	Not applicable.	
4. Amounts of l	penefits		1
	Benefit for raising a small child (Обезщетение за отглеждане на малко дете): After the expiry of the Pregnancy and childbirth benefit (Обезщетение за бременност и раждане), mothers and adoptive parents are entitled to additional paid leave for raising a small child (for first, second and third child: until the child reaches 2 years of age and 6 months for each following child). This flat-rate cash ben- efit is paid monthly (currently BGN 220 (€ 112) per month).	Not applicable.	
CHILD CARE A	ALLOWANCES		
1. Basic princip	les		
	No special allowances.	No special allowance.	
2. Field of appli	cation: beneficiaries		
	Not applicable.	Not applicable.	
3. Conditions			1
	Not applicable.	Not applicable.	
4. Amounts of l	penefits		
	Not applicable.	Not applicable.	
OTHER BENER	TTS		
1. Birth and add	option grants		1
	Pregnant women whose average monthly gross income per family member is equal to or lower than BGN 300 (\in 153) are entitled to a lump-sum allowance of BGN 150 (\in 77) if they are not entitled to maternity benefit (обезщетение за бременност и раждане) under the Social Insurance Code (Кодекс за социално осигуряване) and are permanent residents. If the pregnant woman is insured but does not receive a maternity benefit because she has not completed the necessary period of insurance she receives a proportional amount of the benefit according to the days remaining until completion of the period but for no more than 45 days. Each mother is entitled to a one-off benefit upon the birth of a live child regardless of the income of the family if the child is not then placed in a specialised child-care institution.	Federal scheme: No birth allowance. Cantonal schemes: 9 cantons provide a birth allowance (Geburtszulage/allocation de naissance). This varies between CHF 800 (€ 484) and CHF 1,575 (€ 953) per birth, depending on the canton. 5 of these 9 cantons pay a welcome allowance (Adoptionszulage/allocation d'accueil) for the child placed to be adopted.	
	 third and for every subsequent child: BGN 200 (€ 102). Upon birth of twins one of which is the third child the benefit shall be paid for each of the twin children at the amount for a third child. If it is impossible for the mother to receive the benefit, it shall be paid to another legitimate representative of the child. 		

CZECH REPUBLIC	DENMARK
A parent is entitled to a Parental Allowance (Rodičovský příspěvek) when s/he personally provides full-time and proper care for the youngest child in the family. Other conditions also apply e.g. the child can be placed in a child-care facility only for limited time period. Gainful activity of a parent is permitted while retaining the right to receive Parental Allowance if s/ he ensures the care for the child by another adult person.	Salaried, self-employed workers, unemployed, and persons living with a minimum income who fulfil the conditions that entitle them to daily benefits in case of sickness.
Parental Allowance (Rodičovský příspěvek) is paid at three rates that are set at fixed amounts according to duration of receiving: ■ increased rate CZK 11,400 (€ 432) up to 24 th month of child's age,	60% of the allowance of the unemployment insurance.
 basic rate CZK 7,600 (€ 288) up to 36th month of child's age, basic rate CZK 7,600 (€ 288) up to 21st month of child's age and after it reduced rate CZK 3,800 (€ 144) up to 48th month of child's age. 	
Parent caring for child suffering from long-term incapacity is entitled to Parental Allowance (Rodičovský příspěvek) at a basic rate up to 7 years of child's age.	
No special allowance.	Child care allowance: Tax financed. Communes can introduce such benefit for parents taking care of their children instead of putting them in a nursery school. Reduction for brothers and sisters in the same institute.
Not applicable.	Parents with children aged between 24 weeks and 6 years. Communes can fix more detailed age limits.
Not applicable.	Can be granted during a period of 8 weeks to one year. The parent must be resident in Denmark during 7 of the last 8 years. No accumula- tion possible with a salary or transfer income. A household can receive a maximum of 3 allowances and the total amount cannot exceed the maximum rate of daily maternity benefit.
Not applicable.	Cannot exceed 85% of the costs for placing a child in a nursery of the commune. Maximum 3 allowances per household.
 Birth Grant (Porodné) is paid to: mother, father if the mother dies and no Birth Grant was paid to her or to anyone else, any person who takes a child under the age of one year into permanent care in loco parentis, regardless of whether Birth Grant was already paid to the mother or the father of that child. The amount of Birth Grant is CZK 13,000 (€ 493) for each child. 	DKK 1,876 (€ 252) per child and quarter = DKK 625 (€ 84) per month until the children's 7 th birthday, in case of birth of more than one child and in case of adoption of more than one child - brothers and/or sisters born on the same date (flerbørnstilskud). Allowance (single benefit) in case of adoption of a foreign child: DKK 43,225 (€ 5,798).

IX **FAMILY** BENEFITS

BULGARIA	SWITZERLAND		
2. Allowance for single parents			
No special allowance.	No special allowance.		
3. Special allowances for handicapped children			
More than 50% permanent disability diagnosed before child reaches the age of 2 years the mother is entitled to additional one-off benefit of BGN 100 (\in 51). Monthly benefit for raising a child with permanent disabilities of BGN 100 (\in 51) is paid until the child reaches the age of 2 years regardless of family income. The monthly benefit for a child until completion of secondary education with a permanent disability established by the competent health authori- ties is paid regardless of family income at double the amount of the normal benefit. Parents (and adopters) of disabled persons with a permanent disability and who are aged up to 18 years or until completion of secondary education but not over 20 years of age are entitled to a monthly supplement of 70% of the minimum monthly wage [minimum monthly wage is currently BGN 220 (\in 112)].	One canton pays a special allowance.		
4. Advance on maintenance payments			
The Court determines the amount of the regular monthly pay- ment of the maintaining parent according to the borders set by the Council of Ministers (Министерски съвет). If the maintaining parent does not pay then the payment is made by the municipali- ties on his/hers behalf in accordance with the conditions set by the Council of Ministers. The State uses social assistance procedures to undertake the care of needy persons if there is no one obliged to maintain them or if it's impossible for the obliged person to make the payments.	All cantons have a system for advancing support payments.		
5. Other allowances			
Families whose children are enrolled in first grade of state or munic- ipal school and whose gross income per family member (including children) is equal or lower than BGN 300 (€ 153) are granted a lump sum targeted allowance. The amount of the allowance is deter- mined annually by the Council of Ministers (Министерски съвет). When children are accommodated in host families the allowance is granted regardless of the income of the family. The allowance may be granted in cash or in the form of social investment.	 Federal scheme: Household allowance (Haushaltungszulage/allocation de ménage) of CHF 100 (€ 60) per month, paid to agricultural workers. Cantonal schemes: 16 cantons replace the children's allowances by higher vocational training allowances (Ausbildungszulagen/allocations de forma- tion professionnelle) for apprentices and students under the age of 25. The monthly amount varies between CHF 214 (€ 129) and CHF 466 (€ 282), depending on the canton. One canton pays a household allowance of CHF 138 (€ 83) per month. 		
ADJUSTMENT			
The amount of the benefits is determined annually by Parliament in the State budget Law and cannot be less than the amount of the respective benefits for the previous year.	Federal scheme: Regular adjustment to the economic changes and to the develop- ment of allowances set by cantonal laws on family allowances. Cantonal schemes: In almost all cantons, no automatic adjustment.		
TAXATION AND SOCIAL CONTRIBUTIONS			
1. Taxation of cash benefits			
Benefits are not subject to taxation.	Benefits are subject to taxation.		
2. Limit of income for tax relief or tax reduction			
Not applicable. Benefits are not subject to taxation.	General taxation rules. No special relief for benefits.		
3. Social security contributions from benefits			
No contributions.	No contributions.		

CZECH REPUBLIC	DENMARK		
No special allowance. The status of single parents is reflected in the amount of Social Allow- ance (Sociální příplatek), see table XI "Guaranteeing sufficient resources": Other specific non-contributory minima.	The general benefits (ordinært børnetilskud) of DKK 1,139 (\in 153) per quarter = DKK 380 (\in 51) per month are supplemented by an additional allowance (Ekstra børnetilskud) of DKK 1,159 (\in 155) per quarter = DKK 386 (\in 52) per month and per household (irrespective of the number of children). Condition: Proof of single-parent situation once a year.		
1	I		
No special allowance. Longer eligibility for Parental Allowance up to the age of 7 years when the parent cares for at least one child suffering from long-term incapacity, see "Child-raising allowances". Disability of children (and parents) is reflected in the calculation of Social Allowance (Sociální příplatek), see table XI "Guaranteeing sufficient resources": Other specific non-contributory minima. Disability of children is reflected in two Foster Care Benefits (Dávky pěstounské péče): • Foster Child Allowance (Příspěvek na úhradu potřeb dítěte) and • Foster Parent Allowance in Specific Cases (Odměna pěstouna ve zvláštních případech), see "Other allowances".	Income replacement benefit for domiciliary care of a disabled child.		
No special benefit.	Benefit corresponding to the "normal" alimony of DKK 6,564 (€ 880) per 6 months.		
 Social Allowance (Sociální příplatek), see table XI "Guaranteeing sufficient resources": Other non-contributory minima. Foster Care Benefits (Dávky pěstounské péče): Foster Child Allowance (Příspěvek na úhradu potřeb dítěte), Foster Parent Allowance (Odměna pěstouna), Foster Parent Allowance in Specific Cases (Odměna pěstouna ve zvláštních případech) (upbringing of more than 2 children or of a child suffering from long-term incapacity), Fostering Grant (Příspěvek při převzetí dítěte), Motor Vehicle Grant (Příspěvek na nákup motorového vozidla). 	Special allowance for parents still studying: an allowance of DKK 5,976 (€ 802) per year, paid by quarter for each studying parent, but only one for each child. The allowance is reduced by income.		
· · · ·			
In general, the benefits are not adjusted automatically but by the Government Regulation. The government is authorised to increase the amounts of living minimum (Životní minimum) regularly (on January 1, every year) if the growth of consumer price index for sustenance and personal needs exceeds 5%. In case of extraordinary circumstances the amounts can be indexed sooner.	Once a year according to the adjustment rate (satsreguleringsprocent- en).		
Benefits are not subject to taxation.	Benefits are not subject to taxation.		
Not applicable. Benefits are not subject to taxation.	Not applicable. Benefits are not subject to taxation.		
Not applicable. Benefits are not subject to taxation.	Not applicable. Benefits are not subject to taxation.		
 pěstounské péče): Foster Child Allowance (Příspěvek na úhradu potřeb dítěte), Foster Parent Allowance (Odměna pěstouna), Foster Parent Allowance in Specific Cases (Odměna pěstouna ve zvláštních případech) (upbringing of more than 2 children or of a child suffering from long-term incapacity), Fostering Grant (Příspěvek při převzetí dítěte), Motor Vehicle Grant (Příspěvek na nákup motorového vozidla). 	for each child. The allowance is reduced by income.		

COMPARATIVE TABLES

X UNEMPLOYMENT

GERMANY - ESTONIA - GREECE - SPAIN



	GERMANY	ESTONIA
APPLICABI	E STATUTORY BASIS	
	Unemployment insurance (Arbeitslosenversicherung): Social Code (Sozialgesetzbuch), Book III, from 24 March 1997. Basic security benefits for jobseekers (Grundsicherung für Arbeitsuchende): Social Code (Sozialgesetzbuch), Book II, from 24 December 2003.	Unemployment Insurance Act (Töötuskindlustuse seadus) 2001. Labour Market Services and Benefits Act (Tööturuteenuste ja –to- etuste seadus) 2006.
ASIC PRIN	ICIPLES	
	Unemployment insurance (Arbeitslosenversicherung): contribution financed compulsory social insurance scheme for employees. Basic security benefits for jobseekers (Grundsicherung für Arbeitsuchende): Tax-financed scheme of means-tested minimum resources for employable persons in need, who cannot find in spite of intensive efforts any employment or only an employment which does not meet the need. Not employable dependants living together with the recipient may claim for Social Benefit (Sozialgeld).	Compulsory social insurance scheme financed by contribu- tions covering all employees and providing an earnings-related Unemployment Insurance Benefit (töötuskindlustushüvitis). Social assistance scheme financed by taxes covering the active population providing a flat-rate Unemployment Allowance (töötutoetus).
ELD OF A	PPLICATION	
	Unemployment insurance (Arbeitslosenversicherung): All employees (= manual and white-collar workers and trainees including young disabled persons). Voluntary continuation of insurance: Since 1 February 2006 it has been possible for certain categories of persons to join unemployment insurance on a voluntary basis (section 28a of the Social Code, Book III - SGB III). Possible categories of persons include carers who care for family members at least 14 hours per week, self-employed persons working at least 15 hours per week, persons employed outside the European Union or associated countries. Conditions: 12 months of pre-insurance periods (compulsory insurance coverage according to the SGB III or in receipt of unemployment insurance benefits according to the SGB III (e.g. unemployment benefit (Arbeitslosengeld) within the last 24 months, insurable employment or in receipt of unemployment or to take-up of the activity/employment. No other compulsory insurance coverage according to the SGB III.	Unemployment Insurance Benefit (töötuskindlustushüvitis): All employees. Unemployment Allowance (töötutoetus): Active population.
	Basic security benefits for jobseekers (Grundsicherung für Arbeitsuchende): All employable persons in need - if they are not excluded due to particular circumstances - and their family members.	

GREECE	SPAIN
Statutory Order No. 2961/1954. Law No. 1545/1985. Law No. 1892/1990.	Royal Decree No. 625/85 of 2 April 1985. Social Security General Act (Ley General de la Seguridad Social) approved by Legislative Royal Decree No. 1/94 of 20 June 1994. Law No. 45/2002 of 12 December 2002. Law No. 52/2003 on Employment of 16 December 2003. Royal Decree No. 3/2004 of 25 June 2004. Royal Decree No. 200/2006 of 17 February 2006. Royal Decree No. 1369/2006 of 24 November 2006.
Compulsory social insurance scheme financed by contributions covering employees and providing earnings-related benefits.	Compulsory social insurance scheme for employees financed by con- tributions. The scheme comprises a contributory level (insurance level) with earnings-related benefits and a welfare level (assistance level) with flat-rate allowances. The protection provided by the welfare level also includes the Active Integration Income (Renta Activa de Inserción, RAI).
Employees who are insured against unemployment with the Office for Employment and Manpower (O.A.E.D.) No possibility of voluntary insurance.	 Insurance: Employed workers included in a Social Security scheme which covers unemployment contingencies and other persons, treated as such, included in the scope of the protection. Assistance: (1) Allowance: a) Unemployed with family responsibilities under certain conditions. b) Unemployed with family responsibilities under certain conditions. c) Other groups who fulfil certain conditions: Unemployed over 52 years of age, emigrant workers returning from abroad, persons released from prison, invalidity pension beneficiaries who cease receiving such a pension. (2) Active Integration Income (Renta Activa de Inserción, RAI): Long term unemployed persons over 45 years of age; emigrant workers returning from abroad over 45 years of age, emigrant workers returning for abroad over 45 years of age; is emigrant workers returning for abroad over 45 years of age, emigrant workers returning for a broad over 45 years of age, is disabled persons; victims of gender or domestic violence.

GERMANY **ESTONIA TOTAL UNEMPLOYMENT** 1. Conditions Main conditions Unemployment insurance (Arbeitslosenversicherung): Unemployment Insurance Benefit (töötuskindlustushüvitis): An employed person is considered to be unemployed if he or she Involuntarily unemployed, is not engaged in an employment relationship (without work). no working activity or other equivalent activity, takes an effort to put an end to this situation (efforts of his or her to be fit for work and otherwise not prevented from taking a suitable own) and work. • is available for the placement efforts undertaken by the employment to be available for full time work. agency (availability). aged between 16 and pensionable age, except persons on preretirement pension. If the unemployed person has terminated his or her employment registered as unemployed at the labour market board; relation without any important reasons or has given reason to the to be actively seeking employment, termination of the employment relationship due to any behaviour of has paid unemployment insurance contributions. his or her that is contrary to the employment contract, a waiting period of up to 12 weeks may become effective. The person's employment, Unemployment Allowance (töötutoetus): voluntarily or involuntarily unemployed, self-employment or activity as collaborating family member does not rule out that the person is without work if the time of the work or activ- no working activity or other equivalent activity, • to be fit for work and otherwise not prevented from taking a suitable ity performed is less than 15 hours per week. A person is considered available if he or she work. • is able and allowed to take up an insurable reasonable work of at to be available for full time work, • age between 16 and pensionable age, except for persons on preleast 15 hours per week under the conditions usual on the section of the labour market which is considered suitable, retirement pension, is able to react quickly and on the spot to the offers made by the registered as unemployed at the labour market board. employment agency to his or her integration into the labour market, to be actively seeking employment, • is ready to take up any reasonable insurable employment of up to 15 residents. fulfilment of conditions and activities agreed in an individual job hours per week and • is ready to participate in any occupational integration measures. searching plan. Employees having completed the age of 65, are no longer entitled to unemployment benefits as of the beginning of the month following their birthday. The unemployed is requested to register in person with the competent employment agency. It is also permissible to register if unemployment has not yet occurred, but if unemployment is to be expected within the next 3 months. The unemployed is obliged to make use of all possibilities of occupational integration. He or she is obliged to fulfill the duties mentioned in the integration agreement, which has been concluded between the unemployed and the employment agency. Own efforts of the unemployed person include the collaboration of third parties in the placement and the consultation of the information self-service facilities provided by the employment agency. Subject to insurance are only employed persons having an employment in Germany. Under certain conditions and if pre-insurance periods exist, it is possible for employed persons taking up an employment abroad, to remain insured on a voluntary basis. Basic security benefits for jobseekers (Grundsicherung für Arbeitsuchende): Employable persons in need receive unemployment benefit II (Arbeitslosengeld II), independent of the fact whether they are unemployed within the meaning of the above defined conditions for unemployment. The following persons are entitled to receive unemployment benefit II: between 15 and under 65 years of age; • employable, i.e. when, as result of sickness or infirmity, she or he is not able to work during an indefinite period for at least 3 hours a day under the regular labour market conditions; • in need of help; e.g. is not able to earn his or her living out of the income or the assets to be considered or from other aid: must have his or her usual residence in Germany; must not be excluded as a result of in-patient care exceeding six months, as a result of receiving an old-age pension or priority benefits such as a student's loan (BAföG) or a vocational training grant (Berufsausbildungsbeihilfe, BAB). Social Benefit (Sozialgeld) for non-employable members of the eligible household, unless they are entitled to basic security benefits in old age and in the event of reduced capacity to work (under Chapter 4 of the Social Code, Book XII.)

GREECE

SPAIN

 To be unemployed involuntarily; not to be working for more than 3 days a week, or 12 days a month; to be capable and available for work; to be registered at an employment exchange and to be at the disposal of the exchange; 	 Insurance: involuntarily unemployed as legally defined; capable and willing to work; to be over 16 years of age and under ordinary retirement age for the purpose of receiving such pension, except in cases where the worker does not credit sufficient contributions; register as job seeker and to be at the disposal of the employment office with a promise to actively seek employment: affiliated to a social security scheme that cover this risk and to be an active contributor or in a situation treated as such on the date when the job is lost. Assistance: (1) Allowance: involuntarily unemployed as legally defined; to be over 16 years of age and under ordinary retirement age for the purpose of receiving such pension, except in cases where the worker does not credit sufficient contributions; register as job seeker and to be at the disposal of the employment office with a promise to actively seek employment; no income from any other source exceeding 75% of the minimum wage (Salario Minimo Interprofesional) in effect and family responsibilitie; solario the relevant allowance. (2) Active Integration Income (Renta Activa de Inserción, RAI): unemployed under 65 years of age; or thave according to the relevant allowance. (2) Active Integration Income (Renta Activa de Inserción, RAI): unemployed under 65 years of age; or thers, according to the relevant group.

	GERMANY	ESTONIA
Qualifying pe		
	Unemployment insurance (Arbeitslosenversicherung): The unemployed person must have been compulsorily insured for at least 12 months during the last 2 years. Basic security benefits for jobseekers (Grundsicherung für Arbeitsuchende): No qualifying period.	 Unemployment Insurance Benefit (töötuskindlustushüvitis): Insurance period (payment of contributions) of 12 months over the 36 months preceding registration as an unemployed. Unemployment Allowance (töötutoetus): 180 calendar days of work or equivalent activity over the 12 months before the application.
Means test		
	 Unemployment insurance (Arbeitslosenversicherung): No means-test. Basic security benefits for jobseekers (Grundsicherung für Arbeitsuchende): Means test, income and assets are credited as a rule. Exceptions: No crediting of certain pensions, small income, funds granted by third parties up to a certain limit and various interim allowances or transitional allowances; no crediting of special-purpose income/funds granted by non- governmental welfare organizations up to a certain ceiling and damages; deductibles for taxes, compulsory social security contributions and insurance premiums, as far as legally determined or appro- priate in accordance with reasoning and amount, income-related expenses and subsidised sums for old-age provision; sliding scale of exclusion amounts for crediting earned income and for taking into account assets. 	Unemployment Insurance Benefit (töötuskindlustushüvitis) and Unemployment Allowance (töötutoetus): No means test.
Waiting peric	d	
	No waiting period.	 Unemployment Insurance Benefit (töötuskindlustushüvitis): 7 calendar days. Unemployment Allowance (töötutoetus): Generally 7 calendar days, 60 calendar days from the date of registration as an unemployed person in case of: students after graduation, termination of previous contract by employer on the basis of loss of confidence.
2. Benefits		
Determining		
	Unemployment insurance (Arbeitslosenversicherung): Benefits are based on the salary, on the fiscal category figuring in the tax card and on the existence or not of children. Basic security benefits for jobseekers (Grundsicherung für Arbeitsuchende): Need-oriented and means-tested welfare aid, the amount of which is determined in line with social assistance, in order to guarantee a socio-cultural subsistence level.	Unemployment Insurance Benefit (töötuskindlustushüvitis): Reference earnings. Unemployment Allowance (töötutoetus): No reference to previous earnings.
Earnings taken	as reference and ceiling	
	Unemployment insurance (Arbeitslosenversicherung): Average daily wage during the last year up to a ceiling of benefits of € 5,300 per month in the old Länder and € 4,500 per month in the new Länder. Basic security benefits for jobseekers (Grundsicherung für Ar- beitsuchende): The necessary subsistence level is granted accord- ing to the standard benefits at federal level in the form of standard rates (Regelsätze) which are the same all over Germany. Actual housing and heating costs are covered to the full amount if these are adequate. The standard allowance is granted as a lump-sum covering the costs for food, personal hygiene, household equip- ment and personal needs of daily life.	 Unemployment Insurance Benefit (töötuskindlustushüvitis): Average daily earnings upon which unemployment insurance contributions have been paid over the 12 months preceding registration as unemployed, but not earnings over three times the national average daily income for the previous calendar year. Unemployment Allowance (töötutoetus): Flat-rate benefit.

GREECE	SPAIN
 At least 125 days of work during the 14 months preceding job loss or, at least, 200 days of work during the 2 years preceding job loss. For first time claimants, an additional requirement of at least 80 days of work per year during the 2 previous years applies. 	Insurance: Minimum contribution period of 360 days during the 6 years immediately preceding the legal unemployment situation. Assistance: • Allowance: Generally none, although certain unemployment allowances require a minimum contribution of 3 months (with family responsibilities) or 6 months (without family responsibilities) or 6 years in the course of the person's career (persons over 52 years of age). • Active Integration Income (Renta Activa de Inserción, RAI): No qualifying period required.
No means test.	 Insurance: No means-test. Assistance: Allowance: Not having income from any source exceeding 75% of the minimum wage (Salario Mínimo Interprofesional) in effect. In those cases where having family responsibilities is required, the monthly income of the family unit divided by the number of the family members must not exceed 75% of the minimum wage in effect. Active Integration Income (Renta Activa de Inserción, RAI): Not having income from any source exceeding 75% of the minimum wage, either on an individual basis or, where appropriate, on the basis of the whole family unit.
6 days.	 Insurance: In general, no waiting period. Assistance: Allowance: One month at the disposal of the employment office as from the expiry date of the contributory benefit. In other cases, there is no waiting period. Active Integration Income (Renta Activa de Inserción, RAI): In general, no waiting period.
The monthly salary for the employees and the daily salary for manual workers.	The unemployment benefit (prestación por desempleo) amount is de- termined on the basis of contributions which are established according to salaries. The amount of the unemployment allowance and the Active Integration Income (Renta Activa de Inserción, RAI) are calculated according to the Public Income Rate of Multiple Effects (Indicador Público de Renta de Efectos Múltiples, IPREM) established annually by law.
Earnings at the time of job loss.	Insurance: The amount of the benefit is determined on the average of the employee's contribution bases for the 180 days immediately preceding unemployment. Assistance: The amount of the allowance is related to the amount of the Public Income Rate of Multiple Effects (Indicador Público de Renta de Efectos Múltiples, IPREM) in force.

GERMANY	ESTONIA
Rates of the benefits	
 Unemployment insurance (Arbeitslosenversicherung): Beneficiaries with children: 67% of net earnings (net earnings are determined on a flat-rate basis by deducting the usual employee's stoppage from the gross salary). Beneficiaries without children: 60% of net earnings. Basic security benefits for jobseekers (Grundsicherung für Arbeitsuchende): Employable persons in need receive (1) benefits securing their subsistence (unemployment benefit II - Arbeitslosengeld II): Regular benefit: Single person: € 347 per month, partners over the age of 18: 90% of the regular benefit. Reasonable costs for accommodation and heating. One-time benefits for the initial equipment of a flat including household appliances and clothing, school trips lasting several days. Loans for need that cannot be declined or in the event of possible income in the period concerned. (2) under certain conditions a graduated degressive supplement limited to 24 months if the conditions for an entitlement to unemployment benefit II (Arbeitslosengeld II) are met, once the entitlement to unemployment benefit II (Arbeitslosengeld II) are met, once the entitlement to unemployment benefit II (Arbeitslosengeld II) are met, once the entitlement to unemployment benefits mentioned above under 1 are reduced by the income and assets to be credited. 	Unemployment Insurance Benefit (töötuskindlustushüvitis): • 50% of reference earnings up to 100 calendar days, • 40% of reference earnings thereafter. Unemployment Allowance (töötutoetus): Flat-rate benefit of EEK 32.90 (€ 2.10) per day.
 Unemployment insurance (Arbeitslosenversicherung): Different rates of benefits (see above). Basic security benefits for jobseekers (Grundsicherung für Arbeitsuchende): Increased requirements for pregnancy, single parenthood, disability and cost-intensive nutrition, benefits for the initial equipment of a flat and clothing, in case of pregnancy or confinement, for school trips lasting several days, non-employable family members receive social benefit (Sozial-geld), which includes the benefits securing subsistence including reasonable costs for accommodation and heating. The amount of the regular benefit varies between 60% and 90% dependent on age. 	No family supplements.
Other supplements	
Unemployment insurance (Arbeitslosenversicherung) and Basic security benefits for jobseekers (Grundsicherung für Arbeitsuchende): No other supplements.	Unemployment Insurance Benefit (töötuskindlustushüvitis): No other supplements. Unemployment Allowance (töötutoetus): An additional retraining grant amounting to 2 times the rate of employment services retraining grant of EEK 3.75 (€ 0.24) per hour and a transport and accommodation grant amounting up to EEK 1,200 (€ 77) is paid if the claimant attends retraining courses.

GREECE	SPAIN
GREECE Manual workers: 40% of daily wage. White-collar workers: 50% of monthly wage. Minimum: Two-thirds daily minimum wage. Maximum (basic amount plus extra for dependants): 70% of fictitious reference earnings for the appropriate insurance class. After prescribed payment period has expired, additional benefit of 50% of allowance.	 Insurance: 70% of the calculation basis for first 180 days; afterwards 60%. Maximum: 175%, 200% or 220% of the Public Income Rate of Multiple Effects (Indicador Público de Renta de Efectos Múltiples, IPREM) according to the number of dependent children. Minimum: 107% of the IPREM with dependent children; 80% of the IPREM without dependent children. Assistance: Allowance: 80% of the IPREM. For long-term unemployed over 45 years of age who have exhausted a contributory benefit for 720 days, there is a special 6 month allowance varying from 80% to 133% of the IPREM according to the number of dependent family members. Active Integration Income (Renta Activa de Inserción, RAI): 80% of the IPREM amounts to € 17.23 per day or € 516.90 per month or € 6,202.80 per year.
 10% increase of unemployment allowance for each dependant. Maxi- mum for benefit including increases: 70% of daily wage.	No family supplements.
Special supplementary benefits for Christmas and Easter.	No other supplements.

GERMANY	ESTONIA
Duration of payment	
Unemployment insurance (Arbeitslosenversicherung): The duration of benefits (DB) depends on the duration of compulsory insurance coverage and on the age of the beneficiary: DB (months) Age (years) DP (months) 12 6 16 8 20 10 24 12 30 55 36 55 36 55 36 55 36 55 908 and whose entitlement is not yet exhausted, in case they had the entitlement for the maximum period of entitlement according to the provision that was valid till 31 December 2007: increase to 15 or 24 months). ^(*) Basic security benefits for jobseekers (Grundsicherung für Arbeitsuchende): Unemployment benefit II (Arbeitslosengeld II) and social benefit (Sozialgeld) are in principle unlimited if the conditions of eligibility are met; however, the benefit is only granted as a rule for a duration of six months, then it is necessary to prove the entitlement again.	 Unemployment Insurance Benefit (töötuskindlustushüvitis): 180 calendar days for a person with an insurance period less than 56 months, 270 calendar days for a person with an insurance period from 56 to 110 months, 360 calendar days for a person with an insurance period of 111 or more months. Unemployment Allowance (töötutoetus): Generally up to 270 calendar days.
3. Sanctions	
Under certain circumstances, entitlement to unemployment benefit is suspended during 12 weeks (i.e. unemployment caused by the person) and for up to 12 weeks in the event of an unjustified refusal of a reasonable job. Basic security benefits for jobseekers (Grundsicherung für Arbeitsuchende) : Sanctions possible for capable recipients who do not make an effort to participate in the labour market or do not accept a reasonable employment. Reduction of the unemploy- ment benefit II (Arbeitslosengeld II) by 30% of the relevant standard allowance for three months if the beneficiary fails to comply with his or her duties for the first time and by further 30% of the relevant standard allowance if the beneficiary fails to comply with his or her duties for a second time. In the case of repeated failure of the beneficiary within a 12-month-period the unemployment benefit II will cease. Stricter sanctions for capable recipients aged between 16 and 25 years if they fail to comply with their duties.	Unemployment Insurance Benefit (töötuskindlustushüvitis): Payment is discontinued if the person does not attend the local employment office at least once every 30 calendar days or refuses an offer of a suitable work, in these cases however the person may further receive the unemployment allowance (töötutoetus).

GREECE	SPAIN
Generally proportional to periods of employment: Employment duration: 125 days - 5 months 150 days - 6 months 220 days - 8 months 220 days - 10 months 250 days - 12 months If aged 49 or more: 210 days - 12 months In all cases, 3 additional months at reduced rate, if 4,050 da additional months. For the newcomers on the labour mark between 20-29 years): 5 months of benefits. In all cases, 25 daily unemployment benefit for each month.	et (youngsters age.
The unemployment benefit is suspended when the benefi react after 3 calls from the employment agency for a job of vocational training opportunity.	

GERMANY	ESTONIA
4. Accumulation with other social security benefits	
 Unemployment insurance (Arbeitslosenversicherung): Pensions: Accumulation depending on individual circumstances. Sickness benefit (Krankengeld): No accumulation. Basic security benefits for jobseekers (Grundsicherung für Arbeitsuchende): No accumulation with: old-age pension/pension due to permanent incapacity for work, sickness benefit, vocational training grant (Berufsausbildungsbeihilfe, BAB) or student's loan (BAföG), as far as the need is determined by education. Accumulation possible with: basic pension in accordance with the Federal Compensation Act (Bundesentschädigungsgeetz) or the legislation foreseeing the application of the said act, pensions/supplementary benefits for physical/health impairments and death in accordance with the Federal Compensation Act (Bundesentschädigungsgesetz). 	Unemployment Insurance Benefit (töötuskindlustushüvitis): No accumulation with State old age pensions, accumulation with other pensions and social security benefits possible. Unemployment Allowance (töötutoetus): No accumulation with State pensions, accumulation with other social security benefits possible. possible.
5. Accumulation with earnings from work	
 Unemployment insurance (Arbeitslosenversicherung): Income from any part-time work (less than 15 hours per week) reduces entitlement to unemployment benefit (Arbeitslosengeld). An amount of € 165 per month is not taken into account. Other income or assets are neither taken into account. Basic security benefits for jobseekers (Grundsicherung für Arbeitsuchende): Accumulation possible (see above "Means test"). 	Accumulation not possible.
PARTIAL UNEMPLOYMENT	
1. Definition	

 Partial unemployment (Teilarbeitslosigkeit): Loss of a job under compulsory insurance coverage, carried out in addition to another job under compulsory insurance coverage and search for a new job under similar coverage. Short-time work (Kurzarbeit): Temporary shortage of work due to economic reasons. 	No special provisions.
Unemployment due to weather conditions (Witterungsbed- ingter Arbeitsausfall): In the building sector, temporary unem- ployment due to weather conditions (1 November to 31 March).	

not extend to the remaining period of the full duration of the labour

GREECE	SPAIN
Accumulation with other social security benefits (pensions) possible, pro- viding that the rate is lower than the rate of minimum old-age pension (see table VI "Old-age").	 Insurance: Accumulation with social security pensions or cash benefits is not possible unless these had been compatible with the work that gave rise to the unemployment benefit. Assistance: Allowance and Active Integration Income (Renta Activa de Inserción, RAI): Accumulation with social security pensions or cash benefits is not possible unless these had been compatible with the work that gave rise to the unemployment allowance or Active Integration Income, provided their monthly amount does not exceed 75% of the minimum wage (Salario Mínimo Interprofesional) in effect.
The unemployed person can work for a maximum of 3 days a week (or 12 days a month) during the period of receipt of unemployment benefit.	Insurance:Receiving total unemployment benefits is compatible with carrying out a part-time gainful activity as employee, but the amount of the benefit is reduced in proportion to work. They are neither compatible with full- time employed work nor with self-employed work.Assistance: Allowance and Active Integration Income (Renta Activa de Inserción, RAI): Accumulation is possible with earnings from part-time employment unless they exceed 75% of the minimum wage (Salario Mínimo Interprofesional) in effect, although the amount of the allow- ance is reduced in proportion to work. They are neither compatible with full-time employed work nor with self-employed work.
Partial unemployment: resulting from the seasonal fluctuations of certain branches of the eco- nomic activity (building sector, hotel industry, artistic professions).	When the worker's ordinary working day is temporarily reduced by at least one third, provided there is a proportional reduction in wages. For these purposes, the reduction of ordinary working time should be a temporary reduction authorised during the duration of a redundancy plan. It does not entail a definitive reduction in working time and does

contract.

	GERMANY	ESTONIA	
2. Conditions			
	 Partial unemployment benefit (Teilarbeitslosengeld): Partial unemployment. Personal declaration at the employment agency. Waiting period: the unemployed must have been working in a job under compulsory insurance coverage for at least 12 months during the last two years, in addition to the job he/she is carrying on. 	Not applicable.	
	 Short-time work unemployment benefit (Kurzarbeitergeld): Unavoidable shortage of work affecting at least one third of staff and resulting in a loss of income from work of more than 10% of monthly gross income from work. Continuation of a non-terminated employment under compul- sory insurance coverage. 		
	 Bad winter weather allowance (Winterausfallgeld): Shortage of work due to bad weather conditions for workers employed in the building sector at a work place affected by weather conditions. Claim to a collective (organisation-wide or individually contracted) bad weather allowance is exhausted. Employment with compulsory insurance coverage at the date of the work loss. 		
3. Rates of the	benefits		
	Partial unemployment benefit (Teilarbeitslosengeld): Reference salary and benefit rate: the same as for unemployment benefit (based on lost earnings). Length: six months. Short-time work unemployment benefit (Kurzarbeitergeld): determined on the basis of the difference between the short-term wage in the case of work shortage and the gross wage for full employment and the net wage thus resulting (net payment difference) (percent rates as for unemployment benefit (Arbeitslosengeld) according to the official scale). Financed from the first hour of work shortage by the unemployment benefit. Financed from the 31st hour of work shortage by a levy of the employer in the business sector, when a collective agreement exists, from the 101st hour or work shortage by the unemployment insurance. Reimbursement of the social charges (sickness, long-term care and retirement insurance) to the employer for the 31st - 100th lost hour of work. From the deduction for the building trade in winter.	Not applicable.	
4. Sanctions			
	As for total unemployment: under certain circumstances, entitlement to unemployment insur- ance benefits is suspended during 12 weeks (i.e. unemployment caused by the person) and for up to 12 weeks in the event of an unjustified refusal of a reasonable job.	Not applicable.	
5. Accumulatio	on with other social security benefits		
	Pensions: Accumulation depending on individual circumstances.	Not applicable.	
	Sickness benefit (Krankengeld): No accumulation.		
6. Accumulatio	on with earnings from work		
	The amount from a secondary activity is entirely taken into account if the job started during the payment of the short-time work unem- ployment benefit or the bad winter weather allowance.	Not applicable.	

GREECE		SPAIN
A salaried worker from a certain social and professional category must certify a definite number of insurance days for the year previous the pay- ment of the unemployment benefit (minimum 50-210 and maximum 240 insurance days). If the conditions necessary for a monthly unem- ployment benefit are not fulfilled, the insured can benefit from a special unemployment benefit.		In addition to those applying in the case of total unemployment, entitle- ment to benefit for partial unemployment is dependent on decision by labour administration within the framework of a redundancy plan.
The special benefit is paid yearly in a lump-sum. The amount varies ac- cording to the social and professional category of the beneficiary.		The benefit paid is in principle calculated as for total unemployment but in proportion to reduction in working time.
The special unemployment benefit is not paid if the beneficiary receives other insurance benefits with a rate higher than the one of the minimum old-age pension (see Table VI "Old-age").		As for "total unemployment".
As for "Total unemployment".		As for "total unemployment".
	_	
As for "Total unemployment".		As for "total unemployment".

GERMANY	ESTONIA
BENEFITS FOR OLDER UNEMPLOYED	
1. Measure	
 Part-time for elder employees (Altersteilzeit): Reduction of the hitherto existing working time by 50% for employees aged 55 or over, if provided for in collective agreements, enterprise agreements or individual contracts of employment. After the reduction, the employment must continue to be compulsorily insured, i.e. the monthly remuneration must exceed € 400. Old-age pension due to unemployment or after part-time for elder employees: see table VI "Old-age". 	Continued payment of Unemployment Allowance (töötutoetus) up to the pensionable age.
2. Conditions	
 Part-time for elder employees (Altersteilzeit): If the insurable gross salary for such part-time work (regular salary) for older workers is increased by at least 20% and if additional contributions are paid for the statutory pension insurance at least at the level of the 80% of the compulsory contributions based on the regular salary, the Federal Employment Agency (Bundesagentur für Arbeit) will refund the employer the wage supplement of 20% as well as the additional pension insurance contributions provided that the working place is taken up again by a former unemployed person or a person after the termination of occupational training. Old-age pension due to unemployment or after part-time for elder employees: see table VI "Old-age". 	After receipt of Unemployment Allowance (töötutoetus) for 180 calendar days, if less than 180 calendar days remain until the pen- sionable age.
3. Rates of the benefits	
See table VI "Old-age". The salaried must reimburse the benefits unduly credited if he is responsible of this illegal payment.	Ordinary rate of Unemployment Allowance (töötutoetus) of EEK 32.90 (€ 2.10) per day.
4. Accumulation	
No accumulation possible with an old-age pension for Part-time for elder workers (Altersteilzeit). If so: cancellation of the pension.	Accumulation not permitted.
ADJUSTMENT	
Unemployment insurance (Arbeitslosenversicherung): No automatic adjustment. Basic security benefits for jobseekers (Grundsicherung für Arbeitsuchende): The regular benefit to secure the jobseeker's subsistence will be adjusted every 1 July by the percentage by which the current pension value in statutory pension insurance has changed. New adjustments, as for social assistance according to the Social Code, Book XII, are carried out in those years, for which results of new income and consumption samples will be produced.	Unemployment Insurance Benefit (töötuskindlustushüvitis): No automatic adjustment. Unemployment Allowance (töötutoetus): The rate is fixed and reviewed by the Government.
TAXATION AND SOCIAL CONTRIBUTIONS	
1. Taxation of cash benefits	
Benefits are not subject to taxation (but subject to progression).	Unemployment Insurance Benefit (töötuskindlustushüvitis): Benefits are subject to taxation. Unemployment Allowance (töötutoetus): Benefits are not subject to taxation.
2. Limit of income for tax relief or tax reduction	
Not applicable. Benefits are not subject to taxation.	Unemployment Insurance Benefit (töötuskindlustushüvitis): General taxation rules. No special relief for benefits.

GREECE	SPAIN
Unemployed aged more than 49 are given the possibility to be granted during 12 months whenever they have worked 210 days in the last 14 months previous the unemployment.	See Table VI "Old-age": "Early Pension" and "Partial Pension".
See above.	See Table VI "Old-age": "Early Pension" and "Partial Pension".
As for "Total unemployment".	See Table VI "Old-age": "Early Pension" and "Partial Pension".
As for "Total unemployment".	In certain cases accumulation possible with social security benefits and with earnings from work.
On the proposal of the Administrative Council of the Office for Employ- ment (O.A.E.D.), charged to deliver the benefits, the Minister of Em- ployment and Social Protection decides whether to adjust or not the unemployment benefits rate for the reference year.	No automatic adjustment.
Benefits are subject to taxation.	Benefits are subject to taxation.
	· · ·
General taxation rules. Certain exemptions for persons crippled in war, war victims and their families, blind persons and persons suffering from paraplegia.	General taxation rules. No special relief for benefits.

GERMANY	ESTONIA	
3. Social security contributions from benefits		
Unemployment insurance (Arbeitslosenversicherung): The beneficiary is not required to pay social security contributions. However, the Federal Employment Agency (Bundesagentur für Arbeit) pays contributions for retirement, sickness and long-term care insurance for the beneficiaries of unemployment insurance benefits. Basic security benefits for jobseekers (Grundsicherung für Arbeitsuchende): The beneficiary is not required to pay social security contributions. However, the competent authority pays contributions for the beneficiaries of unemployment benefit It o sickness as well as long-term care insurance (if there is no family insurance), and to pension insurance (unless there is compulsory pension insurance for other reasons, such as dependent employment). When exempted from corresponding insurance duties, the competent authority pays a subsidy towards private health and long-term care insurance or towards voluntary/private pension insurance.	 Unemployment insurance benefit (töötuskindlustushüvitis): The Unemployment Insurance Fund pays social tax (sotsiaalmaks) (at the rate of 13% for health insurance) and contribution to the mandatory pension fund of 2% on behalf of recipients of unem- ployment insurance benefits. Unemployment Allowance (töötutoetus): The Labour Market Board pays social tax (sotsiaalmaks) (at the rate of 13% for health insurance) on behalf of recipients of unemploy- ment allowance and for those who do not receive it, but have registered as unemployed. 	

GREECE	SPAIN
No contributions.	 Insurance: Social security contributions have to be paid (not for employment injuries and occupational diseases, unemployment, wage guarantee fund and vocational training). Assistance: Allowance: Only contributions for health care, family allowances and for retirement, although the latter are applicable in the case of allowances for persons over 52 years of age who fulfil all the conditions to retire except the age and for permanent discontinuous workers under certain circumstances. Active Integration Income (Renta Activa de Inserción, RAI):Only contributions for health care and family allowances.

COMPARATIVE TABLES XI GUARANTEE OF SUFFICIENT RESOURCES

FRANCE - ICELAND - IRELAND - ITALY



XI GUARANTEE OF SUFFICIENT RESOURCES

	FRANCE	ICELAND
GENERAL NO	ON-CONTRIBUTORY MINIMUM	
Designation		
	Revenu Minimum d'Insertion (RMI).	Félagsleg aðstoð (Social assistance).
Applicable stat	utory basis	· · · · · · · · · · · · · · · · · · ·
	Social action and Family Code (Code de l'action sociale et de la famille), articles L. 262-1 and following.	Local Authorities' Social Services Act (Lög um félagsþjónustu sveit- arfélaga) no. 40/1991 of March 1991. Social Assistance Act (Lög um félagslega aðstoð) no. 99/2007 of May 2007.
Basic principle:	5	
	To enable those in need to dispose of minimum revenues in order	Local Authorities Social Services:
	to satisfy essential requirements and to encourage sociological and professional integration of deprived persons. Differential amount (the situation of the family is taken into account). Subjective right, non-discretionary.	To guarantee financial and social security and to work for the welfare of the inhabitants on the basis of mutual help. The financial assistance is aimed towards those who cannot support themselves or their children by other means, such as salaries or income from the social security. State social assistance: To provide additional assistance within the limit set by the law in special circumstances to defined groups of people.
Entitled persor	ns / beneficiaries	
	Individual right. Family situation is taken into account (couple mar- ried or not, children, adults, dependants under 25 years of age).	Local Authorities Social Services: Individuals. The family; couples and children are considered as one unit. (The municipality of Reykjavík does not include the cost of children).
		State social assistance: In principle individual right.
GENERAL CO	ONDITIONS	
1. Duration		
	Three months, possibility to be extended for periods of between three months and one year.	Unlimited.
2. Nationality		
	Nationals and foreigners living in stable conditions in France, said stability being determined with regard to residence permits in their possession.	No nationality requirements.
3. Residence		
	Lasting and regular residence in France.	Legal residence in the State.
4. Age		
	With effect from 25 years of age; those under 25 who have to support a child, possibly not yet born.	Local Authorities Social Services: Persons aged 18 and older.
		State social assistance: No age condition.
5. Willingness	to work	
	Must be available for training, integration, or employment activities on the basis of an integration contract. The person concerned undertakes to participate in social integration activities proposed by the Département.	All individuals are obliged to support themselves, their spouse and children under 18 years of age. They have to verify that they are actively searching for a job.
6. Exhaustion	of other claims	
	Applicants must vindicate their rights to social benefits and to maintenance payments.	Local Authorities Social Services: Other means must have been exhausted, including social security benefits from the state. State social assistance: Obligation to claim all social security benefits he/she may be entitled to.

IRELAND	ITALY
Supplementary Welfare Allowance.	"Minimo Vitale" or "Reddito minimo" (minimum income).
Social Welfare Consolidation Act 2005.	Set by the regional authorities. Most regions settle their services by means of laws of reorganisation of supplementary benefit services. In other regions (such as Toscana, Emilia-Romagna) the municipalities or local Health Centres (Unità Sanitarie Locali, USL) fix the amount of the "minimum income" by means of individual regulations of social help allowances. Regions with a specific regulation concerning this subject: Umbria, Aosta Valley and autonomous province de Bolzano.
Supplementary Welfare Allowance gives a basic weekly income to peo- ple who have little or no means. In addition, weekly supplements for rent or mortgage interest costs may be payable and certain other lump-sum payments can be made to meet urgent or exceptional circumstances.	Allowance which achieves a transfer of public resources in favour of citizens who really have no work and who do not have an income above a certain determined level (corresponding to a hypothetical subsistence level). Differential amount according to the composition of the family and of the basic minimal income fixed by the region, the municipalities and the local Health Centres (Unità Sanitarie Locali, USL). Subjective right, non-discretionary.
Basic allowance is paid to the individual, with supplements in respect of adult and child dependants.	All citizens in a situation of need due to a lack of individual economic resources.
Unlimited.	Limited, with possibility of renewal depending on duration of the situa-
 Unlimited.	Limited, with possibility of renewal depending on duration of the situa- tion of need.
Unlimited. No nationality conditions.	
	tion of need. Nationals, foreign residents and political refugees.
No nationality conditions. Must be habitually resident in the State (except for a person with the status of a 'worker' within the meaning of EU legislation and for once-off	tion of need. Nationals, foreign residents and political refugees. Residence in the regional or municipal territory (according to the author-
No nationality conditions. Must be habitually resident in the State (except for a person with the status of a 'worker' within the meaning of EU legislation and for once-off exceptional and urgent needs payments).	tion of need. Nationals, foreign residents and political refugees. Residence in the regional or municipal territory (according to the author- ity administering the service). No age limit; apart from the Region Campania which rules the atten-
No nationality conditions. Must be habitually resident in the State (except for a person with the status of a 'worker' within the meaning of EU legislation and for once-off exceptional and urgent needs payments).	tion of need. Nationals, foreign residents and political refugees. Residence in the regional or municipal territory (according to the author- ity administering the service). No age limit; apart from the Region Campania which rules the atten-
No nationality conditions. Must be habitually resident in the State (except for a person with the status of a 'worker' within the meaning of EU legislation and for once-off exceptional and urgent needs payments). Normally paid from 18 years of age. Jobseekers will normally be entitled to a jobseeker's payment as distinct	tion of need. Nationals, foreign residents and political refugees. Residence in the regional or municipal territory (according to the authority administering the service). No age limit; apart from the Region Campania which rules the attendance in kind administered by the communities for minor orphans. The beneficiary must be prepared to participate in activities in an effort to improve his/her situation. With this intention communities or the

XI GUARANTEE OF SUFFICIENT RESOURCES

	FRANCE	ICELAND	
7. Other condit	ions		
	No other conditions.	Local Authorities Social Services: No other conditions. State social assistance: Social assistance is only paid to persons legally residing in Iceland and subject to other conditions of the law and regulations. The benefits may be indexed to income other than housing benefits, as applicable. Property is generally not taken into account, but income from property can be taken into account.	
GUARANTEE	D MINIMUM		
1. Determinati	on of the minimum		
	By decree.	Local Authorities Social Services: The local authorities are obliged to lay out rules on financial assistance where the minimum amount is determined. The Ministry of Social Affairs and Social Security has provided guidelines for the determination of the minimum. The guidelines suggest that the local authorities apply the standards from the social security for individuals (i.e. invalidity benefits, income supplement and household supplement). State social assistance: Minimum and maximum assistance or refund of costs is set in the law.	
2. Level of dete	rmination		
	At national level. No regional differentiation.	Local Authorities Social Services: Regional level. State social assistance: National level.	
3. Domestic un	it for the calculation of resources		
	The applicant and those persons living in the same household (spouse, cohabitant, dependants under 25 years of age).	Local Authorities Social Services: The applicant, the spouse and his/her children up to the age of 18. State social assistance: The applicant and spouse.	
4. Resources ta	ken into account		
	Resources of any nature, including family allowances: Earnings from activities, revenue procured from movable or im- movable property, etc.; some special social allowances granted to cope with a specific requirement and not considered as providing resources contributing to the global solvency of the recipient of said allowances. Maximum of monthly resources for Guaranteed Minimum Resourc- es (Revenu Minimum d'Insertion, RMI) and other resources: Single person: € 447.91	 Local Authorities Social Services: All income (wages, social security benefits, family allowances, child support) is accounted for when the need for financial assistance is assessed, except housing allowances and home-care allowances. State social assistance: As a rule, all resources. 	
	■ Household: € 671.87		
GUARANTEE	DAMOUNIS		
1. Categories	 Single person: Basis amount. This basis amount is increased by: 50% for the first additional person in the household; 30% for each person in addition to the first; 40% for each further person after the third person without taking into account the partner or cohabitant. 	Local Authorities Social Services: Basic amount for individuals 18 years and older. The basic amount increases proportionally with each family member. Specific supplement based on individual assessment (see however above, Entitled persons). State social assistance: Assistance, grants, supplements, reimbursement of costs. See table V "Invalidity", table VI "Old-age", and below.	

IRELAND		ITALY
Not normally available for people in full-time employment or full-time education. Not available to people involved in trade disputes but may be paid to their dependants.		No other conditions.
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Fixed by Government.		The regulations vary according to the regions.
The level of the basic rate is centrally determined at the national level. No regional differentiation. Local Community Welfare Officers have a certain degree of discretion in relation to individual cases, particularly in the case of clients with special needs.		Determined by the Regions. Considerable regional differentiation: the amount for a single person varies between \in 232 and \in 269. Exception: in the Aoste Valley, people living in rented accommodation receive \in 372. If they are home-owners the benefit amount is equal to \notin 223.
The household: the applicant and his dependants.		Family as a result of a certificate of the family status. The law is extended to the effective family nucleus who live in the same flat and who share the family resources.
All cash income, including other social security payments, as well as the value of property (except the home of the applicant), investments and savings. Family Benefit payments are excluded from the assessment of income.		All family earnings, except the family dwelling.
	_	
	_	
 Personal rate of Supplementary Welfare Allowance. Additional allowances paid in respect of adult or child dependants. Supplements paid for special needs and exceptional needs. 		Amounts are fixed by local bodies; reference thresholds depend on 2 pa- rameters: the minimum pension (pensione minima) and the non-taxable earnings (depending on general taxation for employees) the benefits vary in direct relation with the number of family members. Increases can be provided in special cases (orphans, travelling people, etc.).

XI GUARANTEE OF SUFFICIENT RESOURCES

	FRANCE	ICELAND
2. Specific supplements	s and single benefits	
A back t awarded professi months the 12 th	to work grant (prime de retour à l'emploi) of $\in 1,000$ is ed to persons undergoing training or practising a minimal sional activity (at least 78 hours per month) for at least 4 is during the period of reception of benefits. From the 4 th to th month of activity, payment of a flat-rate grant of $\in 150$ per i for a single person or of $\in 225$ for a family.	 Local Authorities Social Services: Housing allowances and subsidies of day care costs, see table IX "Family benefits". The rules from the local authorities differ but all take specific/unexpected situations into account (see below, Other specific non contributory minima). State social assistance: Single parent allowance (mæðralaun), see table IX. Child pension with respect to education (barnalífeyrir vegna skólanáms), see table IX. Home Care allowance (umönnunargreiðslur), see table IX. Death allowance (dánarbætur), see table VII. Rehabilitation allowance (endurhæfingarlífeyrir), see table V. Household supplement for a single person (heimilisuppbót) and further supplements (frekari uppbætur), see tables V and VI. Spouse's benefits (makabætur) granted to the spouse of a pen- sioner in special circumstances. Supplement to purchase a motor vehicle. Supplement for the operating costs of an automobile. Reimbursement for substantial expenses of medical and medici- nal costs.
3. Guaranteed minimur	m and family allowances	
	ed. The Guaranteed minimum resources (Revenu Minimum tion, RMI) take dependant children into account.	Local Authorities Social Services: General family allowances are granted but taken into account when the need is assessed. Basically all income is accounted for (see above). State Social Assistance: General family allowances are granted independently.
4. Examples		
Family b For a For the Family b Family b Family b Family b Family b Family b Family b For a for 2 For th If the ho	Jle person: € 447.91 Jle person: € 447.91 Jle parent family with 1 child: € 671.87 Jle parent family with 2 children: € 806.24 ple with 1 child: € 806.24 ple with 2 children: € 940.62 ple with 3 children: € 1,119.78 benefits are taken into account. The housing allowances are ed in the family's resources up to a certain flat-rate: a single person: 12% of the basis RMI, 2 persons: 16% of the RMI for 2 persons, hree persons: 16.5% of the RMI for three persons. housing allowance actually received is below these flat-rates, nsideration will be limited to this allowance.	 Local Authorities Social Services: The Guidelines from the Ministry of Social Affairs and Social Security, monthly amounts, not including housing benefits: Individual: ISK 99,319 (€ 1,080) Family of two: ISK 158,910 (€ 1,727) Family of three: ISK 178,774 (€ 1,943) Family of four: ISK 198,638 (€ 2,159) Single adults (over 18 years) living in the same household receive ISK 99,319 (€ 1,080) each. Family of two can either be an adult with a child or a couple. Family of three means at least one child. If there are more single family members over 18 years each of them receives the amount of ISK 99,319 (€ 1,080). State social assistance: See tables V "Invalidity" and VI "Old-age".
5. Relations between th		
	person: 100%	Local Authorities Social Services: The monthly amount stated in
Couple Couple Couple Couple	e with no children: + 50% e + 1 st child: + 30% e + 2 nd child: + 30% e + 3 rd child: + 40% allowances included except for some special benefits.	the guidelines from the Ministry of Social Affairs and Social Security takes standpoint in the identical amount, which was paid from the national pension scheme and state social assistance to a single pensioner with full pension rights who lives alone in 2005 (basic pension + income supplement and household supplement from the state social assistance). This amount is reviewed once a year in accordance with the national consumer price index. State social assistance: Not applicable.

IRELAND	ITALY
Specific supplements may be paid in respect of rent and mortgage inter- est payments or if a person has exceptional heating expenses due to ill- health or has been prescribed a special diet due to a medical condition. Exceptional Needs Payments are designed to alleviate hardship by providing for essential, once-off exceptional expenditure. Payments may be made in respect of essential household equipment, funerals or other large unforeseen expenses. These payments are made at the discretion of the Health Service Executive (HSE). Urgent Needs Payments may be paid to people who do not normally qualify for assistance under the scheme. These payments would usually be made to help with immedi- ate needs such as food and clothing in the aftermath of fire or flood.	The regulations vary according to the regions.
Family allowances (i.e. Child Benefit) are paid separately and do not affect entitlement to payments for dependants.	Family benefits and "minimo vitale" benefits are granted independently from one another. The right to family allowance is accorded to persons who receive income from employment.
Basic minimum allowance (monthly rates): Single person: $\in 857$ Couple without children: $\in 1,426$ Couple with one child: $\in 1,530$ Couple with 2 children: $\in 1,634$ Couple with 3 children: $\in 1,738$ Single parent family with one child: $\in 961$ Single parent family with two children: $\in 1,065$ All child dependants are treated the same. $\in 24$ per week, regardless of age. Examples including family benefits (see table IX): Couple with one child: $\in 1,690$ Couple with 2 children: $\in 1,954$ Couple with 3 children: $\in 2,149$ Single parent family with one child: $\in 1,121$ Single parent family with wo children: $\in 1,385$	 The amounts vary from region to region and are differentiated only according to the number of family members and not according to its composition. Figures are given here as examples and only apply to level below and above benefit amounts. Levels set by the regions (no information exists on the benefits granted by municipalities and local Health Centres): Persons living alone: min. € 232, max. € 269 2 persons: min. € 338, max. € 542 3 persons: min. € 440, max. € 697 4 persons: min. € 542, max. € 914. In the Aoste Valley and in the self-governed province of Trente, these amounts are supplemented, by allowances for rent, heating and other general costs.
 Single person: 100% 2nd adult of couple: + 66% 1st child (incl. family benefits): + 31% 2nd child (incl. family benefits): + 31% 3rd child (incl. family benefits): + 35% 	Different rates between the regions. Relations according to the above mentioned amounts: Single person: 120% 2 nd adult of couple: + 75% 1 st child: + 50% 2 nd child: + 20% 3 rd child: + 20% These percentages are only approximations and are based on the "minimo vitale" amounts set by the regions. No indication of the amounts paid by the town councils and the local health organisations.

XI GUARANTEE OF SUFFICIENT RESOURCES

1	FRANCE	ICELAND
RECOVERY		
	Recovery of wrongly or unnecessarily granted payments from future allowances; recovery in the case of the cession of financial means or from the inheritance of a deceased beneficiary.	Local Authorities Social Services: Financial assistance is either a loan or a grant. It is granted as a loan if the applicant so wishes or if an evaluation of the circumstances reveals that it is reasonable to demand repayment. Financial assistance which has been provided on the basis of false or misleading information is always recoverable. State social assistance: Reimbursement according to general rules. Deduction also possible from benefits the beneficiary may subsequently become entitled to. Retroactive corrections of calculation of benefits are also made upon receipt of income information or tax declarations.
INDEXATION		
	Adjustment once a year according to consumer price index.	Local Authorities Social Services: The Ministry of Social Affairs and Social Security recommends to the municipalities adjustments once a year in accordance with the national consumer price index. State social assistance: Adjustment in accordance with the cur- rent state budget.
TAXATION AN	ID SOCIAL CONTRIBUTIONS	
1. Taxation of ca	ash benefits	
	The Guaranteed minimum resources (Revenu Minimum d'Insertion, RMI), the family benefits and the housing allowance are not subject to taxation.	General taxation rules.
2. Limit of incor	me for tax relief or tax reduction	
	Not applicable. Benefits are not subject to taxation.	General taxation rules. No special relief for benefits.
3. Social securit	ty contributions from benefits	
	No contributions.	No contributions.
MEASURES ST	FIMULATING SOCIAL AND PROFESSIONAL INTEGRATION	
	Integration contract (Contrat d'insertion) and Minimum activity income (revenu minimum d'activité): During the contract period, the person concerned receives an income equal to the minimum income (SMIC) corresponding to the number of hours worked. During the whole contract period, this person continues to receive the Guaranteed minimum resources (Revenu Minimum d'Insertion, RMI) allowance from which the aid paid to the employer is deducted (amount of RMI allowance for a single person). A total and then partial accumulation of salary and the allowance is possible. Back to work grant (prime de retour à l'emploi): see "Guaranteed amounts: 2. Specific supplements and single benefits".	Local Authorities Social Services: No general scheme. Several local authorities invite clients to take part in different programs aimed at improving their living condi- tions. The local authorities provide social counselling, consisting of guidance in the field of finances, housing, upbringing of children, divorce etc. Local employment Agencies assist the unemployed with their search for employment, supply information and advice on job choice and vocational training and ensure that the unem- ployed have access to advice and remedial measures such as edu- cation programs or vocational training, based on individual needs. State social assistance: See table V "Invalidity", Rehabilitation.
ASSOCIATED F	RIGHTS	
1. Health		
	Benefits in kind from the general regulations of sickness-maternity insurance (general system) or of the basic Universal Health Cover- age (Couverture Maladie Universelle, CMU) and benefit from the complementary CMU.	Public health care available to all residents. See table II "Health care". Possible to seek reimbursement according to the law on state social assistance for substantial expenses of medical and medicinal costs, see above, specific supplements.
2. Housing and		
	Extension of entitlement to social housing allowance (allocation logement social) to all RMI-recipients; the differential allowance of the RMI is not taken into account when determining resources in housing allowance matters.	Local Authorities Social Services: Housing allowances see Table IX "Family benefits". State social assistance: Special supplements for pensioners living alone, see tables V "Invalidity" and VI "Old-age".

IRELAND	ITALY
When the allowance is paid on an interim basis pending the process- ing of claims to other social security benefits, recovery takes place from benefits subsequently awarded.	Different regulations of the Regions.
Adjusted once each year.	Amounts related to the minimum pension (pensione minima) are yearly adjusted, depending on pension increases (adjusted to consumer price index and salary increases). All the figures mentioned above are provided for information only. Other amounts: adjustment without predetermined conditions.
Benefits are not subject to taxation.	Benefits are not subject to taxation.
Not applicable. Benefits are not subject to taxation.	Not applicable. Benefits are not subject to taxation.
No contributions.	No contributions.
Back to Work Allowance: A scheme for long-term recipients (2 years or more) of jobseeker's payments and recipients (15 months or more) of lone parent and disability payments (3 years or more for Illness Benefit) who take up employment. A percentage of the qualifying payment (75% in year one, 50% in year two and 25% in year three) is payable. If self-employment is commenced, the rate payable in year one is 100% with reducing amounts (as above) in the following three years. Jobseekers taking up self-employment need only be in receipt of unemployment payments for 2 years or more. Back to Education Allowance: This is a second and third level education opportunities scheme for persons who have been in receipt of jobseeker's/lone parent or long-term disability payments for at least 12 months. Payment is made at the same level as the qualifying payment for the duration of the academic terms.	Special initiatives for professional training in particular for the integration of certain groups (women, young people).
No direct rights; however, persons in receipt of the allowance are usu- ally entitled to a full range of medical services on the basis of their low income.	Health care is guaranteed to all citizens via the National Health Service (Servizio Sanitario Nazionale, S.S.N.). Persons with an income less than the social pension (assegno sociale) are exempted from participation in costs. See table II "Health care".
No direct rights. But recipients may also qualify for rent supplements un- der the Supplementary Welfare Allowance scheme, Mortgage Interest re- lief under the taxation system or local authority differential rent schemes, where the rent payable depends on the income of the tenant(s) and the household circumstances.	In some regions, particularly for aged persons special housing supple- ments for total or partial housing cost reduction. Some regions cover electricity or gas bills or take into account costs for unavoidable interior restructuring measures.

XI GUARANTEE OF SUFFICIENT RESOURCES

	FRANCE	ICELAND		
OTHER SPEC	IFIC NON-CONTRIBUTORY MINIMA			
I. Old-age				
1. Designation				
	Solidarity allowance for old people (allocation de solidarité aux personnes âgées).	No specific minimum; covered by the national pension scheme, see table VI "Old-age".		
2. Principle				
	Differential allowance.	No special scheme.		
3. Main conc	litions of eligibility			
	 Residence in France; aged at least 65 (60 in the case of incapacity to work); resources are below a certain ceiling. 	No special scheme.		
4. Amount p	ayable			
	 Solidarity allowance for old people (allocation solidarité aux personnes âgées). Maximum: Single beneficiary: € 7,719.52 per year. Couple: € 13,521.27 per year. 	No special scheme.		
II. Invalidity				
1. Designation	Allowance for disabled adults (allocation aux adultes handicapés,			
	AAH).	No specific minimum. Covered by the national pension scheme, see table V "Invalidity".		
2. Principle	Т			
	Differential allowance.	No special scheme.		
3. Main conc	litions of eligibility			
	Persons aged between 20 and 60 who are permanently at least 80% disabled or acknowledged, on account of their disability, as being unable to secure employment, and whose resources do not exceed a certain ceiling. The benefit can be completed by complementary resources (Complément de ressources) or a supplement for an autonomous life (Majoration pour vie autonome) in order to guarantee some minimum resources.	No special scheme.		

	IRELAND	ITALY
State Pension (Non-Cont	ributory).	Assegno sociale (social pension).
To provide an income for	those 66 or over who do not qualify for a	A means-tested non-contributive benefit subject to age and residence
contribution-based pens		conditions.
 Age 66 or more, not qualified for a cont resident in Ireland, means test. 	tributory pension,	The beneficiary must be older than 65 years. Income (excluding rents) of less than € 5,142.67 if single or € 10,285.34 if married.
 € 24 per week for child Supplements: Living Alor ance of € 10 per week; Fr 	ek maximum for adult dependants. I dependants. ne Allowance of € 7.70 per week; Over 80 Allow- ee Travel and, if eligible, Electricity, Television	€ 5,142.67 per year, annual increase.
Licence and Telephone R	ental Allowances.	
Disability Allowance.		 Pension for disabled civilians (Pensione per invalidi civili). Pension for blind civilians (Pensione per ciechi civili). Pension for deaf-mutes (Pensione per sordomuti). Allowance for partially disabled civilians (Assegno mensile per invalidi civili parziali). Allowance for disabled civilians under 18 years (Indennità mensile di frequenza, indennità mensile per invalidi civili minori). Attendance allowance (Indennità di accompagnamento). Special allowance for partially blind people (Indennità speciale per ciechi parziali). Communication allowance for deaf-mutes (Indennità di comunicazione per sordomuti).
To provide income for a c reason of that disability.	disabled person who is unable to work by	The principal source for economic protection of disabled people is article 38 of the Italian Constitution: "Every citizen who is unable to work and is lacking necessary means to live, is entitled to maintenance allowances and social assistance".
capped in undertaking w from that disability, woul qualifications. That disabi	by reason of disability, be substantially handi- vork of a kind which, if he/she were not suffering d be suited to his/her age, experience and lity must be expected to last for at least a year te to this effect must be supplied on application one.	 Pensions: Only totally disabled civilians (100%), blind persons and deaf-mutes are entitled to pensions. Monthly benefits: Partially disabled civilians (74-99%) are entitled to a monthly allowance (Assegno mensile per invalidi civili parziali); disabled persons under 18 years are entitled to a monthly allowance (Indennità mensile di frequenza per invalidi civili minori). Allowances: Totally disabled people who are unable to walk or are not self-sufficient and totally blind persons are entitled to a special allowance (Indennità speciale per ciechi parziali), deaf-mutes to a communication allowance (Indennità di accompagnamento). Partially blind persons are entitled to a special allowance (Indennità speciale per ciechi parziali), deaf-mutes to a communication allowance (Indennità di comunicazione per sordomuti). Pensions and monthly benefits are subject to the limits of individual income, whereas allowances are not means-tested. The income ceiling which cannot be exceeded is for pensions € 14,466.57 and for monthly benefits and allowances to the partial disabled € 4,238.26. Only the individual income is taken into account, not spouse's or family income.

XI GUARANTEE OF SUFFICIENT RESOURCES

FRANCE	ICELAND
4. Amount payable	
Up to € 628.10 per month. Complementary resources (Complé- ment de ressources): € 179.31. Supplement for an autonomous life (Majoration pour vie autonome): € 104.77.	No special scheme.
III. Other specific non-contributory minima	
 Temporary waiting period allowance (allocation temporaire d'attente): Means-tested flat-rate benefit for certain groups of Job-seekers. Amount: € 10.38 per day. Single Parent Allowance (allocation de parent isolé, API): Means-tested differential allowance for pregnant women living alone or single parents with a dependant child. Amounts: € 566.79 per month for a pregnant woman without dependant children, plus € 188.93 per dependant child. 	 Local Authorities Social Services: Financial assistance in particular situations. Needs are assessed on an individual basis. Examples of financial assistance according to the rules in the municipality of Reykjavík: Special child allowance ISK 10,000 (€ 109) for parents with children whose income is ISK 99,329 (€ 1,080) or less than ISK 158,926 (€ 1,728) for couples. Special child allowance ISK 10,000 (€ 109) for parent with children when the family receives regular support from social worker. Study allowances: Assistance to 18-24 years old that have not completed elementary or secondary school because of financial hardship. Assistance to single parents who have not completed elementary or secondary school and income is under ISK 1,000,000 (€ 10,871) the last 12 months. Assistance to individuals who have been unemployed or received financial assistance for 6 months or longer and have not finished elementary school. Assistance to youngsters 16-17 years old who live with parents whose income is under the minimum according to the rules. Furniture/household allowances paid once to individuals ISK 100,000 (€ 1,087). Special allowances to cover dental costs of ISK 40,000 (€ 435) and sessions with psychologists, social workers and psychiatrists of ISK 55,000 (€ 598) for individuals who have received financial assistance for 12 months. Burial grants of ISK 100,000 (€ 1,087). Cost for personal emergency alarm system. Assistance in trauma/ unexpected situations, such as loss of household, to individuals with income under the minimum or very low income; max. ISK 100,000 (€ 1,087).

IRELAND	ITALY
Weekly amounts: Disabled person: € 197.80 Adult dependant: € 131.30 Child dependant: € 24	 Amounts per month: Disabled people, deaf-mutes and totally blind persons in hospitals and partially blind persons: € 246.73. Totally blind persons (not in hospitals): € 266.83. Mobility allowance for disabled people: € 465.09. Mobility allowance for totally blind people: € 733.41. Special allowance for partially blind persons: € 172.86. Communication allowance for deaf-mutes: € 233.
 One Parent Family Payment aged under 66: Non-contributory benefit to provide support for someone who is bringing up child/ren without the support of a partner and without sufficient means. Weekly amounts: Lone parent: € 197.80 Child dependant: € 24 Widow's and Widower's (Non-Contributory) Pension aged under 66: Tax financed pension to provide support to widows and widowers without children (those with children would qualify for one-parent family payment instead) who do not qualify for a social insurance widow's or widower's pension, and who are without sufficient means. Amount: € 197.80 per week. A higher rate is paid to those over 66 and/or living alone. Several special allowances for certain groups or needs: Blind Person's Pension aged under 66 is payable to blind people and others with low vision. Other benefits include: Rent/Mortgage Interest Supplements. Supplements for Special Needs. Exceptional Needs Payments. Back to School Clothing and Footwear Allowance etc. 	 Financial assistance for political refugees (Ministry of the Interior). Financial assistance for victims of natural catastrophes (Ministry of the Interior). Assistance for students: study grants and allowances. "Arrival" grants for immigrants (regions and local authorities). Financial assistance to cope with situations of particular hardship (local level).

COMPARATIVE TABLES

XII LONG-TERM CARE

CYPRUS - LATVIA - LIECHTENSTEIN - LITHUANIA



XII LONG-TE	XII LONG-TERM CARE		
	CYPRUS	LATVIA	
APPLICABLE STATUTORY BASIS			
The Public Assistance ar Βοηθημάτων και Υπηρε The Public Assistance ar Homes for the Elderly ar για Ηλικιωμένους και Αν Health care: The Gover General Regulations (Οι Υπηρεσιών Γενικοί Κανο	s (Υπηρεσίες Κοινωνικής Ευημερίας): nd Services Law (Ο περί Δημόσιων σιών Νόμος) of 2006. nd Services Regulations of 2006. nd Disabled Persons Laws (Οι περί Στεγών απήρους Νόμοι) of 1991 - 1994. nment Medical Institutions and Services περί Κυβερνητικών Ιατρικών Ιδρυμάτων και νισμοί) of 2000 and 2005. Psychiatric Care ς Νοσηλείας Νόμος) 77(I)/1997.	Law on Social Services and Social Assistance (Sociālo pakalpojumu un sociālās palīdzības likums) of 31 October 2002.	
BASIC PRINCIPLES			
Long-term care is organ vices. Services are delive throughout Cyprus. It is Services legislation and (entitlement based upo State budget (under the Both in-kind and cash b Health care: Services an (Υπουργείο Υγείας) thro Health Centres. The serv	s (Υπηρεσίες Κοινωνικής Ευημερίας): ised centrally by the Social Welfare Ser- ered through six District Welfare Services provided through the Public Assistance and is based on a philosophy of social assistance n need). Long-term care is financed by the e article for public assistance and services). enefits are provided for long-term care. The provided by the Ministry of Health ugh the District General Hospitals and local rices are provided under the legislation indi- e services are State budget financed. Health kind.	Long-term care is provided according to person's individual needs and resources (assessment is carried out by social worker). Services to needy persons are provided in their place of residence or as close as possible to their place of residence (home care, semi-stationary care). If person needs special services, social care is provided by long-term social care institutions. Financed by state budget or municipalities budgets. There is no specific scheme for long-term care, it is integrated within social services for elderly, children and disabled.	
RISK COVERED			
Definitions			
Need of care due to me	s (Υπηρεσίες Κοινωνικής Ευημερίας): ntal or physical incapacity or social distress. [.] mental disease or impairment.	Inability of person to take care of herself/himself and perform every- day activities due to their age, health problems as well as orphans and children deprived of parental care. Elderly persons and disabled children or adults with mental of physical disorders (if their family members are unable to provide the necessary care to them) due to age, health problems and employment problems are also entitled. Children deprived of parental care, if they have no possibility to stay in their own family and there is no possibility to find.	
FIELD OF APPLICATION			
All persons legally residi ficient to meet their spe care is based upon need not compulsory. Only p entitled to long term ca	s (Υπηρεσίες Κοινωνικής Ευημερίας): ng in Cyprus whose resources are not suf- cial needs for care. The system of long-term d (Public Assistance, Δημόσιο Βοήθημα); it is ersons entitled to public assistance may be re. The frequency of home care or day care ial care is based upon individual needs. I "Health care".	 Citizens, non-citizens and aliens who have been granted a personal identity number, except for persons who have received a temporary residence permit and persons who have been granted alternative status and their family members, orphans and children left without parental care who have acquired alternative status. 	

LIECHTENSTEIN	LITHUANIA
Sickness Insurance Act (Gesetz über die Krankenversicherung, KVG), LGBI. 1971, No. 50. Compulsory Accident Insurance Act (Gesetz über die obligatorische Unfallversicherung, UVG), LGBI. 1990 No. 46. Invalidity Insurance Act (Gesetz über die Invalidenversicherung, IVG), LGBI. 1960 No. 5. Old-age and Survivors' Insurance Act (Gesetz über die Alters- und Hinter- lassenenversicherung, AHVG), LGBI. 1952 No. 29. Act on supplementary benefits for Old-age, Survivors' and Invalidity Insurance (Gesetz über Ergänzungsleistungen zur Alters-, Hinterlassenen- und Invalidenversicherung, ELG), LGBI. 1965 No. 46.	Law on Social Services (Socialinių paslaugų įstatymas) of 19 January 2006 (No. X-493). Law on Health Care Institutions (Sveikatos priežiūros įstaigų įstatymas) of 6 June 1996 (No. I-1367).
 Sickness insurance: Contribution and tax-financed benefits for domiciliary care (Hauskrankenpflege, Spitex), home care and stay in nursing care homes. Accident insurance: Contribution and tax-financed helplessness allowance (Hilflosenentschädigung). Invalidity insurance, supplementary benefits and old-age and survivors' insurance: Benefits according to IVG, ELG and AHVG are rather of a subordinate nature: Helplessness allowances (Hilflosenentschädigung), different aids, health care in the event of particular congenital defects; means tested benefits to pensioners. 	Granted for all residents in need. Financed by the State, local budgets and Health Insurance Fund. Long-term care is organised in day centres, home care services, station- ary social care institutions and nursing hospitals. No special legislation. Benefits in-kind are provided for long-term care.
 Sickness insurance: Measures of out-patient care which are provided by persons or organisations of health care or nursing care (Spitex). Domiciliary care benefits if stay and care in nursing homes would otherwise be necessary. Accident insurance: Flat-rate Helplessness allowance (Hilflosenentschädigung) for helpless persons, who, on the grounds of invalidity, continuously require the assistance of a third party or personal attention in order to perform the basic activities of daily living. 	Recipients of old-age and disability or lost working capacity pensions in need of care from another person not more than 10 hours per week receive home attendance. If they need care for no more than 8 hours per day and no more than 7 days per week, they receive social care at home or stay in day care centres. If they need the care more than 8 hours per day, they could receive temporary short-term social care at home (no more than 30 days) and in care institutions (no more than 6 months per year) or long-term social care (more than 6 months per year) in stationary social care institutions.
Sickness insurance: Persons insured on the grounds of place of residence or gainful employ- ment. Accident insurance: Gainfully employed persons.	See table II "Health care".

XII LONG-TERM CARE

	CYPRUS	LATVIA
CONDITION	15	
1. Age		
	Social Welfare Services (Υπηρεσίες Κοινωνικής Ευημερίας): No age limits. In practice, most recipients of long-term care are old persons entitled to Public Assistance (Δημόσιο Βοήθημα).	No age limits.
	Health care: No age limit.	
2. Qualifying	period	
	Social Welfare Services (Υπηρεσίες Κοινωνικής Ευημερίας): No qualifying period required.	No qualifying period required.
	Health care: See table II "Health care".	
BENEFITS IN	N KIND	
1. Home care	<u>}</u>	
	Social Welfare Services (Υπηρεσίες Κοινωνικής Ευημερίας):The State (Social Welfare Services) employs home carers to perform housework and provide personal care to the recipient (e.g. dressing, personal hygiene, shopping, visit to the doctor).Health care: Apart from the psychiatric home care (community based) for people with mental problems - home nursing palliative	Care by a trained person, or someone to perform housework as well as delivery of the free meals. If home care is provided by family members, the local authority supports them by training, consulting and if necessary also by providing benefits in cash.
	care is not as yet well organised.	
2. Semi static	onary care	
	Social Welfare Services (Υπηρεσίες Κοινωνικής Ευημερίας): TheState (Social Welfare Services) provides day care facilities in publicresidential homes where recipients of Public Assistance (ΔημόσιοBoήθημα) may attend for a number of hours during the day. Thereare no time limits for the use of day care facilities. Specialisedservices provided in residential homes may include occupationaltherapy, physiotherapy, meals and laundry services.Health care: Day care facilities are provided by a limited number oflocal authorities e.g. geriatric day care, medical care and occupa-tional therapy and recreation.	Is provided for various groups - care and possible involvement in physical and mental activities is provided to elderly, disabled with physical disorders, people with mental disorders, persons after seri- ous and continuous diseases. The number of hours that the recipient may attend the institution and any specialized services are set by the municipalities accord- ing to agreements with care institutions. Day centres are run by municipalities or NGOs. Day centres for people with mental disabilities are partly financed by state. Persons with mental disabilities who do not need care in institutions are eligible for the care in group houses (flats). For persons with mental disabilities who live in long term care institutions and are expected to be able to live outside institutions, short term rehabilitation in half-way homes is provided.
3. Nursing ho	ome care	
	Social Welfare Services (Υπηρεσίες Κοινωνικής Ευημερίας): The State (Social Welfare Services) provides full time care in residen- tial homes for older persons and persons with mental and physical disabilities. The State also operates Community Homes (small family units of 5 persons) for persons with mild mental and physical dis- abilities.	 Fulltime care is provided by long-term social care institutions for: orphans and children deprived of parental care, people of retirement age and the disabled with physical disorders or blind people, children and adults with serious mental disorders.
	Health care: Full-time nursing care is provided by the government at public old-age homes, psychiatric institutions, the paraplegics centre and the oncology centre.	Nursing care institutions are run by state and municipalities.

LIECHTENSTEIN	LITHUANIA
No age conditions.	No age limits.
No qualifying period.	No qualifying period required.
Sickness insurance: Domiciliary care (Hauskrankenpflege) of a sick person at home following the doctor's orders: costs for basic and treat- ment care. Accident insurance: Aids to compensate physical handicaps or mal- functions (according to list).	People in need for care at home are regularly visited by social workers from local social assistance administration who determines the need for social care. Social attendance at home includes performance of house- work; care by home-helpers. Home care includes nursing and social care services, which are provided by various specialists at person's home.
Sickness insurance: Domiciliary care (Hauskrankenpflege) of a sick person at home following the doctor's orders: costs for basic and treat- ment care. Accident insurance: Aids to compensate physical handicaps or mal- functions (according to list).	Elderly and disabled people can receive day care in day care centres no more than 8 hours per day and no more than 5 days per week or tempo- rary short-term social care in stationary social care institutions no more than 6 months per year or at home no more than 30 days.
Sickness insurance: Contribution to cost of care in the event of a stay in a nursing care home. The amount depends on the need for care. Accident insurance: Aids to compensate physical handicaps or malfunctions (according to list).	Stationary social care institutions (where people in need for long-term care stay permanently) are available in all main regions. Some of them are owned by county administration, smaller ones by municipalities and by NGO owners. Person accredited by municipal institution or commission decides about provision of long-term social care services according to the social worker's determination of the person's need. Stay in special care hospitals is financed by the Health Insurance Fund for no longer period than for 4 months in one case.

XII LONG-TERM CARE

CYPRUS	LATVIA	
4. Other benefits		
 Social Welfare Services (Υπηρεσίες Κοινωνικής Ευημερίας): The Social Welfare Services subsidises the Pancyprian Volunteer- ism Coordinative Council which may, among others, offer training courses for non-governmental home carers. Health care: Benefits in kind provided to those in need of long- term care include: the provision of special equipment like wheel- chair, nebulisers, or apparatus. 	 State provides technical aids for persons to help prevent or reduce the functional incapacity caused by long-term or irreversible functional disorders of the body or anatomic defects: persons with functional disorders, children with functional disorders under age of 18, persons of retirement age and children who need technical aids to reduce or prevent their functional incapacity, persons with anatomic defects who need a prosthesis or orthopaedic footwear. 	
CASH BENEFITS		
1. Home care		

1. Home care	
Social Welfare Services (Υπηρεσίες Κοινωνικής Ευημερίας): The State may pay a private home carer who may be a family mem- ber (it is possible to compensate a family member who provides long-term care, if a family member is required to quit a job for that purpose or s/he is of low socio-economic standing) or a friend or a non-governmental organisation offering home care services for the provision of long-term care to persons entitled to Public Assistance (Δημόσιο Βοήθημα) who are in need of care. Cash allowances vary depending on the needs and the type of care required. It may vary from € 43 to € 342 per month.For all cases mentioned above, a contract is signed between the Di- rector of Social Welfare Services, the home carer and the beneficiary. The beneficiary receives the cash allowance and is responsible for paying the home carer. In case a recipient of public assistance is not in a position to manage his/her monthly public assistance allow- ance (including the care allowance) due to a mental disability, then another person is designated responsible for that. Welfare Officers of the Social Welfare Services are responsible for the beneficiary concerned.2. Semi stationary care	
2. Seni Stationary care	

	Social Welfare Services (Υπηρεσίες Κοινωνικής Ευημερίας): The State may pay a cash benefit to recipients of Public Assistance (Δημόσιο Βοήθημα) who are in need of long-term care in order to assist or enable them to pay for care in a day centre depending on the person's financial situation. Cash benefits may vary from € 85 to € 137 per month, depending on the beneficiary's needs and the type of services provided. Day centres are run by non-government organisations which are subsidised by the government. There is legislation on standards of operation for day centres (The Adult Day-Care Centres Law of 1997 and Regulations of 2000).		No cash benefits.	
3. Nursing home	3. Nursing home care			
	Social Welfare Services (Υπηρεσίες Κοινωνικής Ευημερίας): The State may pay a monthly cash benefit to cover the costs of full- time nursing care in public, private or non-governmental residential homes for persons entitled to Public Assistance (Δημόσιο Βοήθημα). Cash benefits may vary from € 551 to € 658 per month and are provided only to residential homes registered according to the relevant legislation (The Homes for the Elderly and Disabled Persons Laws (Οι περί Στεγών για Ηλικιωμένους και Αναπήρους Νόμοι) of 1991 - 1994 and Homes for the Elderly and Disabled Persons Regulations of 2000). Residential homes may be public, private or non-governmental.		No cash benefits.	

 LIECHTENSTEIN	LITHUANIA
No other benefits.	Other benefits in-kind include provision of special equipment.
 Sickness insurance: Share to cover the cost exceeding the normal costs of living that occur in connection with home care. The amount of the benefit is calculated according to the degree of the need for care (maximum CHF 100 (€ 60) per day). Other costs that occur in connection with home care and are not borne by the AHV/IV, but are indispensable for the implementation of care. Accident insurance: Helplessness allowance (Hilflosenentschädigung) graded according to three categories of helplessness: CHF 586 (€ 355) per month, CHF 1,172 (€ 709) per month, CHF 1,758 (€ 1,064) per month. Tax-financed pursuant to the ELG: Helplessness allowance graded according to three categories of helplessness: CHF 442 (€ 267) per month, CHF 663 (€ 401) per month, CHF 884 (€ 535) per month, 	If municipalities are not able to provide needed social services, they may pay so-called "money for care" so the recipient should buy needed services. Special Compensation for Care Expenses (Slaugos išlaidų tiklsinė kompensacija): Paid for disabled children with a severe degree of dis- ability, to disabled persons with a reduction in capacity for work of 75% -100% or to the persons of retirement age if the need of permanent care is determined. The amount is 250% of the social insurance basic pension. Special Compensation for Attendance Expenses (Priežiūros (pagalbos) išlaidų tikslinė kompensacija): Paid to disabled children and to disabled persons with a reduction in capacity for work of at least 60% and to persons of retirement age if the need of permanent attendance is deter- mined. The amount is 50% or 100% of the social insurance basic pension depending on the category of the recipient.
Accident insurance: Helplessness allowance (Hilflosenentschädigung) see home care.	No cash benefits.
No cash benefits.	No cash benefits.

XII LONG-TERM CARE

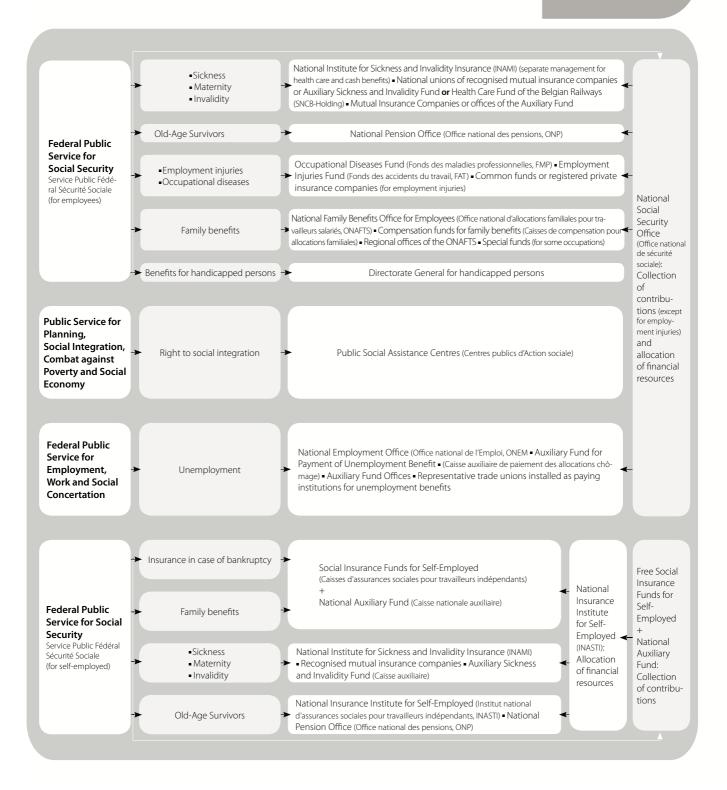
	CYPRUS	LATVIA	
4. Other bene			
	Social Welfare Services (Υπηρεσίες Κοινωνικής Ευημερίας): Cash payments may be made for the following services to persons entitled to Public Assistance (Δημόσιο Βοήθημα) who are in need of long-term care: Heating or other household utilities (electricity is included in the basic needs allowance), special equipment, home repairs. Health care: No cash benefits are provided.	The municipality can grant additional benefits.	
PARTICIPATI	ON OF THE BENEFICIARY		
	Social Welfare Services (Υπηρεσίες Κοινωνικής Ευημερίας): Recipients of Public Assistance (Δημόσιο Βοήθημα) are expected to make a contribution of 80% of their social insurance benefit towards the fees for residential care (public, non-governmental or private). In cases where home care is provided, a recipient's income from whatever source is taken into account when estimating their supplementary public assistance entitlements in either cash or in kind benefits. Social Welfare Services set a ceiling on the fees for home-care and residential care paid through the public assistance fund. Rates are reviewed annually. Current rates for care are as follows: Home Care: € 5.13 per hour or a maximum of € 342 per month. Residential Care: € 551 - € 658 per month. The State does not control the prices of these goods and services except from the cases of Public Assistance (Δημόσιο Βοήθημα).	All of the person's social security income is used to cover the expenses related to his/her stay in a long-term care institution except for 15% of their income from pension.	
ACCUMULAT	TION		
	Social Welfare Services (Υπηρεσίες Κοινωνικής Ευημερίας): When estimating the monthly amount for Public Assistance (Δημόσιο Βοήθημα) (including the costs of long-term care), any income from work, social insurance or other sources of income is subtracted from the monthly allowance. Health care: Not applicable.	Accumulation with pensions is possible.	
TAXATION		· · ·	
	Social Welfare Services (Υπηρεσίες Κοινωνικής Ευημερίας): Notsubject to taxation.Health care: Not applicable.	Benefits are not subject to taxation.	

LIECHTENSTEIN	LITHUANIA
No other benefits.	No cash benefits. Utility costs (heating of dwelling area and hot water) are partially compensated for low-income families.
Participation of the cost for benefits in kind according to KVG in the form of a franchise and a share in per cent borne by the beneficiary. Maximum annual participation of the cost CHF 800 (\in 484). Exemption or reduction for particular categories of persons and/or particular benefits (see Table II "Health care"). The costs for aids are covered for simple and reasonable versions; the costs for different aids according to AHVG are only covered to 75%.	 The fee for long-term social care is determined considering the income and property: up to 80% of the income or, when the income is not sufficient, 1% of value of property exceeding limits set by the municipality. The fee for social day care for persons at home or in day care centres is: up to 20% of the income of a person living alone; up to 20% of the income of a person living with family if the family income is less than 3 times the State Supported Income (Valstybės remiamos pajamos) for one family member; up to 50% of the income of a person living with family if the family income exceeds 3 times the state supported income for one family member.
Helplessness allowances (Hilflosenentschädigungen) will not be paid according to ELG if there is an entitlement to helplessness allowance ac- cording to UVG. The cash benefits of the sickness insurance are reduced under certain circumstances by the helplessness allowance pursuant to the ELG.	Long-term care is not combined with pensions or with income from work.
The contribution to home care according to KVG, helplessness allow- ances (Hilflosenentschädigungen), supplementary benefits (Ergänzung- sleistungen) and contributions to costs for aids (IVG, ELG, AHVG) are not subject to taxation.	Benefits are not subject to taxation.

ANNEX 2 The organisation of social protection

CHARTS AND DESCRIPTIONS

ORGANISATION OF SOCIAL PROTECTION BELGIUM



BELGIUM

In proper terms social security is a federal affair which is subject to the competence of the Minister in charge of social affairs, of the Minister for employment (Ministre de l'Emploi), of the Minister for pensions (Ministre des Pensions), of the Minister for public affairs, social integration, development of big cities and equal opportunities (Ministre de la Fonction publique, de l'Intégration sociale, de la politique des grandes villes et de l'égalité des chances), of the Minister dealing with Middle Classes questions and of the Secretary of State for family affairs and people with disabilities (Secrétaire d'Etat aux familles et aux personnes handicapées).

The National Social Security Office (Office national de Sécurité sociale) is a public institution of social security which has the task to collect contributions (with the exception of employment injuries) and to allocate the funds between the central institutions responsible for the administration of the different branches of social security through the so-called "Global Management".

The public institutions of social security are managed by a Management Committee which is composed of an equal number of representatives of the employers and employees, appointed by the King, runs this office and these institutions with equal representation. In some cases these are also representatives of organisations that are interested or involved in a special insurance branch; this applies above all for family benefits and health care. The Management Committee is presided by an independent person, frequently a member of Parliament, or a high-ranking official. The Committee has a self-administration in the sense that it can take decisions as regards administration. However, policies, legislation and general regulations are in principle the task of Parliament, the King or the competent ministry. An important detail consists in the fact that the competent minister normally has to consult the Committee when drafts for a law or regulations are on the agenda which concern the activities of the Fund. The competent minister presides the Committee via a Commissioner of the Government who has to be vigilant that the decisions of the Committee are not contrary to the general rules and the general interest. If this were the case the minister could annul the decision questioned.

Sickness, maternity, invalidity

The field of sickness, maternity and invalidity is run by the National Institute for Sickness and Invalidity Insurance (Institut national d'assurance maladie-invalidité, INAMI), which above all distributes the financial resources between the different insurance funds responsible for the benefits (mutual insurance companies, which are affiliated to one of the five national associations of recognised mutual insurance companies, regional offices of the Auxiliary Sickness and Invalidity Fund or the Health Care Fund of the Belgium National Railway Company, SNCB-Holding). The choice of insurance fund is free with the exception of the employees of the Belgium National Railway Company.

Old-age and survivors

The field of old-age and survivors' pensions is run by the National Pension Office (Office national des pensions), which is in charge of the assessment and payment of pensions. The application for a pension will be made via the local administration of the town in which the applicant is resident.

Employment injuries and occupational diseases

Employment injuries: This field is run by the Employment Injuries Fund, whose task is above all to grant benefits in the form of damages of sailors, seamen, and employers that do not meet their obligations. The Employment Injuries Fund makes a technical and medical control, and ratifies the agreement settling the employment injury between the victim and the insurance fund. The employers have to insure the risks of accidents at work with a registered insurance fund or a common insurance fund to the benefit of their staff.

Occupational diseases: the Occupational Diseases Fund, a public institution of social security has the monopoly on occupational diseases insurance. This fund also implements the legal regulations in the field of prevention. This institution comprises also the Asbestos Funds for the payment of indemnities to victims of asbestos.

Family benefits

The implementation of legislation is carried out on the one hand by the National Family Benefits Offices for Employees (Office national d'allocations familiales pour travailleurs salariés) and the special Compensation Funds for Family Benefits and on the other hand by the independent Compensation Funds. The main tasks of the National Office are: to distribute the financial resources between the different compensation funds and to guarantee the role of a compensation fund for the employers insured with the Office. Furthermore the Office has been allocated the supervision of the compensation funds, For some occupations special funds have been created (public funds), which the corresponding employers should join. The independent Compensation Funds are institutions which have been founded upon the employers' initiative and managed by them. They are approved by the King and can only be responsible for the granting of statutorily provided benefits.

Unemployment

The field of unemployment is run by the National Employment Office (Office national de l'emploi) and its regional units, which will decide on the concerned person's entitlement. The payment of benefits is made by the registered trade union organisation of which the employee is member or by the auxiliary fund for payment of unemployment benefit that has received the application.

Social assistance

The field of social assistance falls within the scope of the Minister for pensions, of the Minister for social integration, and of the Secretary of State for family affairs and people with disabilities. The minimum guaranteed income for old persons is granted by the National Pension Office (Office national des pensions). The right to social integration (like the integration income, revenu d'intégration) is granted by the concerned Public Social Assistance Centre (Centre Public d'action sociale) (there are 589 centres in Belgium). Benefits for the disabled are managed by the General Direction for Disabled Persons of the Public Federal Service of Social Security (Service public fédéral de Sécurité sociale).

IMPORTANT ADDRESSES

Federal public service Social Security: Service Public Fédéral Sécurité Sociale Eurostation II - Place Victor Horta, 40 bte 20 – 5ème étage - 1060 BRUXELLES www.socialsecurity.fgov.be

FPS Employment, Labour and Social Dialogue: Service Public Fédéral -Emploi, Travail et Concertation Sociale

Rue Ernest Blerot, 1 - 1070 Bruxelles - www.emploi.belgique.be

National Office for social security: Office National de Sécurité Sociale Place Victor Horta, 11 - 1060 Bruxelles - www.onssrszlss.fgov.be

Institute for sickness and invalidity insurance: Institut National d'Assurance Maladie-Invalidité (I.N.A.M.I.)

Avenue de Tervuren, 211 - 1150 Bruxelles - www.inami.fgov.be or www.riziv.be

National Office for pensions: Office National des Pensions (O.N.P.) Tour du Midi - 1060 Bruxelles - www.onprvp.fgov.be

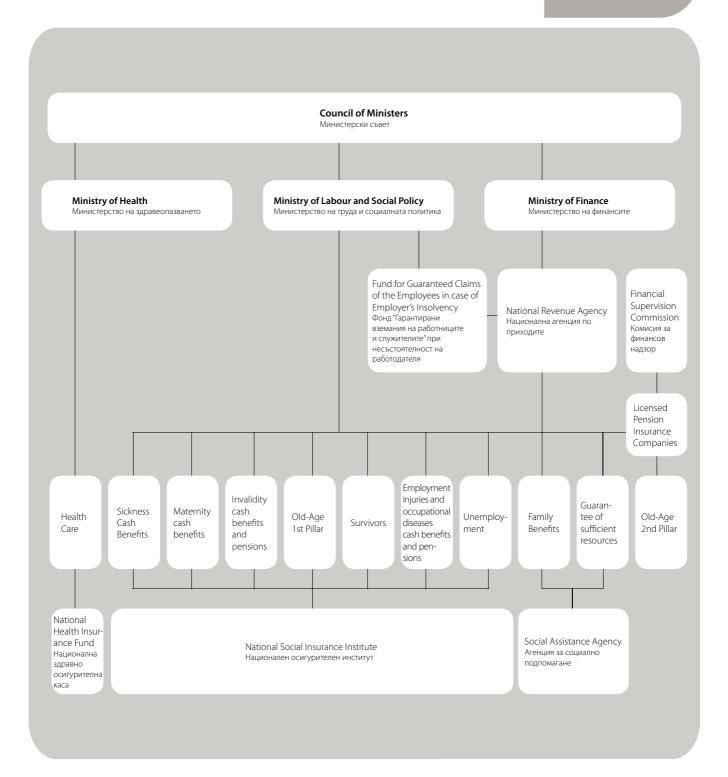
National Office for family benefits to employees: Office National d'Allocations Familiales pour Travailleurs Salariés (O.N.A.F.T.S.) Rue de Trèves, 70 - 1040 Bruxelles - www.onafts.fgov.be

Professional diseases fund: Fonds des Maladies Professionnelles (F.M.P.) Avenue de l'Astronomie, 1 - 1210 Bruxelles - www.fmp.fgov.be or www.fbz.fgov.be

Work injury fund: Fonds des Accidents du Travail (F.A.T.) Rue du Trône, 100 - 1040 Bruxelles - www.fat.fgov.be or www.fac.fgov.be

National Office for employment: office National de l'Emploi (O.N.E.M.) Boulevard de l'Empereur, 7 - 1000 Bruxelles - www.onem.be or www.rva.be

ORGANISATION OF SOCIAL PROTECTION **BULGARIA**



BULGARIA

The social security system in Bulgaria covers the nine standard risks as in ILO Convention 102.

The Bulgarian pension model consists of three pillars. Since 2000, in addition to the pay-as-you-go scheme, a compulsory supplementary old-age scheme is introduced and covers all compulsory insured persons under the state public insurance, born after 31 December 1959. This scheme is administered by private insurance companies, under the supervision of the authorities through the Financial Supervision Commission (Комисия за финансов надзор).

The institutions and the activities of social security are subject to statutory supervision, which is implemented by the three branches of the Central Government: the Parliament, the Cabinet of Ministers and the Judiciary in cooperation with the representative organisations of workers and employers and other organisations of the public society, e.g. organisations for protection of patients.

The National Revenue Agency (Националната агенция по приходите), established in 2005, is responsible for the establishment and control of both taxes and social insurance obligations and their collection.

The National Social Insurance Institute (Национален осигурителен институт), established in 1995 organises the membership of the public insurance schemes for cash benefits.

The National Health Insurance Fund (Националната здравноосигурителна каса) has operated since 1999 and began contracting health services with providers on July 1, 2000.

The Employment Agency (Агенцията по заетостта) (established in 1990) implements proactive measures for the employment of job seekers regardless of their insurance affiliation.

The Social Assistance Agency (Агенцията за социално подпомагане) manages activities, related to the provision of sufficient funds, social care and family benefits.

In 2005 the Agency for people with disabilities (Агенция за хората с увреждания) was created that implements different activities in the field of integration of people with disabilities.

IMPORTANT ADDRESSES

Министерство на труда и социалната политика (МТСП) Ул. "Триадица" 2 - 1051 СОФИЯ www.mlsp.government.bg

Министерство на здравеопазването (МЗ) Пл. "Света Неделя" 5 - 1000 СОФИЯ www.mh.government.bg

Национална агенция по приходите (НАП) Бул. "Дондуков" 52 - СОФИЯ www.nap.bg

Национален осигурителен институт (НОИ) Бул. "Ал. Стамболийски" 62-64 - 1303 СОФИЯ www.nssi.bg

Национална здравно-осигурителна каса (НЗОК) Ул. "Кричим" 1 - 1117 СОФИЯ www.nhif.bg

Агенция за социално подпомагане (АСП)

Ул. "Триадица" 2 - 1051 СОФИЯ www.asp.government.bg

Агенция за хората с увреждания

Ул. "Софроний Врачански" 104-106 - 1233 СОФИЯ www.ahu.mlsp.government.bg

Комисия за финансов надзор (КФН)

Ул. "Шар планина" 33 - 1303, СОФИЯ www.fsc.bg

Агенция по заетостта (АЗ)

Бул. "Дондуков" 3 - 1000, СОФИЯ www.az.government.bg

Ministry of Labour and Social Policy (MLSP)

2, Triaditza Street - 1051 SOFIA www.mlsp.government.bg

Ministry of Health (MH)

5, Sveta Nedelya Square - 1000 SOFIA www.mh.government.bg

National Revenue Agency

52 Dondukov Blvd. - SOFIA www.nap.bg

National Social Insurance Institute

62-64, Al. Stambolijsky Blvd. - 1303 SOFIA www.nssi.bg

National Health Insurance Fund

1, Krichim Street - 1117 SOFIA www.nhif.bg

Social Assistance Agency

2, Triaditza Street - 1051 SOFIA www.asp.government.bg

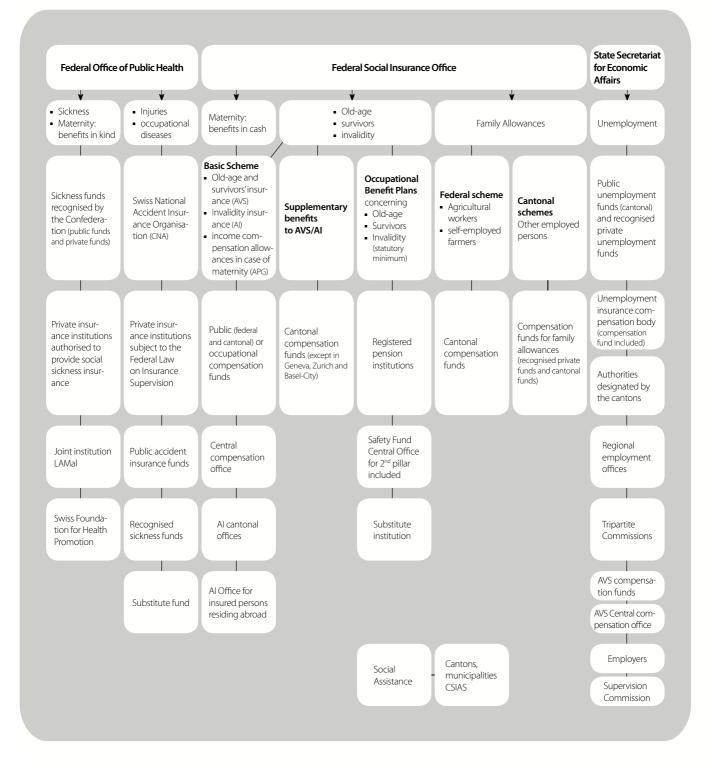
Agency for the people with disabilities 104-106, Sofronii Vratchanski Str. - 1233 SOFIA

www.ahu.mlsp.government.bg

Financial Supervision Commission 33, Shar Planina Str. - 1303 SOFIA www.fsc.bg

Employment Agency 3, Dondukov Blvd. - 1000 SOFIA www.az.government.bg

ORGANISATION OF SOCIAL PROTECTION SWITZERLAND



SWITZERLAND

As for **Social Security**, the sickness and accident branches are placed under the supervision of the Federal Office of Public Health (OFSP), which is part of the Federal Department (Ministry) of Home Affairs. The old-age, survivors' and invalidity branches, the income compensation allowance scheme (APG scheme) as well as family allowances in agriculture, are placed under the supervision of the Federal Social Insurance Office (OFAS), which is part of the same Department. Unemployment insurance comes under the remit of the State Secretariat for Economic Affairs (seco), itself part of the Federal Department for Economic Affairs.

Social sickness insurance is divided into two sections: the health care insurance, which is compulsory for the whole population, and the daily allowance insurance, which is still optional.

Accident and occupational disease insurance covers all kind of injuries and occupational diseases, compulsorily for employees and optionally for the self-employed. Those who are not insured against injuries under the Law on Accident Insurance are covered under sickness insurance.

As far as maternity is concerned the benefits in kind are provided under the Law on Sickness Insurance while the benefits in cash are paid by the income compensation allowance scheme (APG scheme), which provides next to maternity allowances also allowances during the military service, the civilian service or the civil defence service.

Old-age, survivors' and invalidity protection is organised following a system based on a public pension scheme (basic federal insurance) covering the whole population, supplemented by an occupational pension scheme for employees, part of which is compulsory for those in a particular income bracket and optional for the rest, left to the choice of the employer (occupational benefit plans). In addition to this, there is a voluntary private savings plan benefiting from incentive measures (individual private provident measures). This is the so-called "three pillar system" in Switzerland.

Family benefits to agricultural workers and self-employed farmers are governed at federal level while other categories of workers are submitted to one of the 26 cantonal legislations.

Unemployment insurance is compulsory for employees.

Each branch of social security is managed by different entities.

Sickness insurance is managed by recognised sickness funds and by private insurance institutions authorised to provide social sickness insurance.

Accident insurance is managed by the Swiss National Accident Insurance Organisation (CNA), which insures more than the half of all employees and by public or private insurance institutions.

The old-age, survivors' and invalidity insurance (AVS/AI, 1st pillar) is managed by cantonal, federal and occupational compensation funds and by a Central Compensation Office. Invalidity insurance is additionally managed by AI cantonal offices.

The APG scheme (benefits in cash in case of maternity) is managed by the bodies of the old-age and survivors' insurance (AVS).

Cantons set the entities responsible for receiving and examining the demands, for fixing and paying the supplementary benefits to the 1st pillar, these entities being normally the cantonal compensation funds.

The occupational benefit plans concerning old-age, survivors and invalidity (2nd pillar) are managed by the registered pension institutions.

In the federal scheme, family allowances are managed by cantonal compensation funds and, in the cantonal schemes, by funds for family allowances (recognised private funds and cantonal funds). Unemployment insurance is managed by several bodies; mainly by public unemployment funds, by private recognised unemployment funds; by authorities designated by the cantons and by certain bodies of the old-age and survivors' insurance.

The last net of social protection, **social assistance** is generally provided under the competence of cantons, while its execution is supplied by municipalities. Social assistance is therefore essentially based on 26 cantonal systems, what produces important disparities. Recommendations from the Swiss Conference of social action institutions (CSIAS) help to maintain a certain level of harmonisation for these benefits.

IMPORTANT ADDRESSES

Federal Office of Public Health Office Fédéral de la Santé Publique 3003 Berne - www.bag.admin.ch Federal Social Insurance Office Office Fédéral des Assurances Sociales Effingerstrasse 20 - 3003 Berne - www.bsv.admin.ch

State Secretariat for Economic Affairs Secrétariat d'État à l'Économie 3003 Berne - www.seco.admin.ch

Liaison Bodies (conventions)

1. Sickness and Maternity Joint Institution LAMal Institution commune LAMal Gibelinstrasse 25 - 4503 Solothurn - www.kvg.org

2. Old-age, survivors and invalidity - 1st pillar Swiss Compensation Fund Caisse suisse de compensation Avenue Edmond-Vaucher 18 - Case postale 3100 - 1211 Genève 2 www.zas.admin.ch/cdc/cnc3/cdc.php?pagid=31

- 2nd pillar Safety Fund LPP Fonds de garantie LPP Belpstrasse 23 - Case postale 5032 - 3001 Berne - www.sfbvg.ch

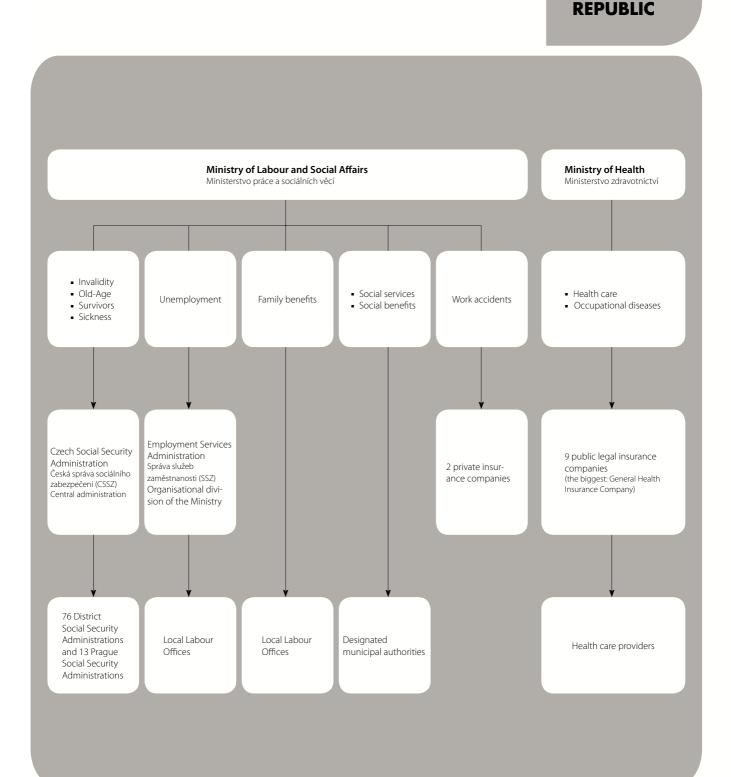
3. Accidents and occupational diseases Swiss National Accident Insurance Organisation Caisse nationale suisse d'assurance en cas d'accidents Fluhmattstrasse 1 - 6002 Lucerne - www.suva.ch

4. Family allowances
Federal Social Insurance Office
Office fédéral des assurances sociales
Effingerstrasse 20 - 3003 Berne - www.bsv.admin.ch

5. Unemployment insurance State Secretariat for Economic Affairs Secrétariat d'Etat à l'économie 3003 Berne - www.seco.admin.ch

ORGANISATION OF SOCIAL PROTECTION

CZECH



CZECH REPUBLIC

Health Care

The central authority of the State health care administration is the Ministry of Health (Ministerstvo zdravotnictví), which, inter alia, prepares the legislative framework in this field. Health insurance is compulsory for all persons with permanent residence or employed by an employer whose seat is in the territory of the Czech Republic. The insurance is provided by nine health insurance companies as independent private legal entities. The entitled persons have the right of free choice among the health insurance companies and also among the health care providers which have a contract with her/his health insurance company. The Law guarantees the contracting rules and the accessibility and quality of health care.

Old Age, Invalidity, Survivors, Sickness Benefits in Cash

The Ministry of Labour and Social Affairs (MOLSA) (Ministerstvo práce a sociálních věcí) draws up legislation for the whole sphere of social security (except health insurance). The administration is dealt with by offices of the Czech Administration of Social Security (Česká správa sociálního zabezpečení, CSSZ), which is subordinated to and supervised by the Ministry. The Centre of the Czech Administration of Social Security (Ústředí České správy sociálního zabezpečení, CSSZ) supervises 76 District Social Security Administrations (Okresní správa sociálního zabezpečení, OSSZ).

The main task of the CSSZ is to collect contributions for the basic pension insurance system, the sickness insurance scheme, and the system of State employment policy (unemployment insurance and employment policy programmes). The CSSZ is also responsible for the calculation and payment of benefits from pensions and sickness schemes as well as the keeping of records on insured individuals (excluding the system of State employment policy).

Unemployment

District Labour Offices (Úřad práce) operate in the individual regions and are subordinated to MOLSA's Employment Services Administration (Správa služeb zaměstnanosti). Their main activities are the payment of unemployment benefits, keeping records on job applicants and promoting and creating employment opportunities. They also develop and organise employment programmes (placement, vocational guidance, resettlement, etc).

Family

The schemes of State social support, which cover family benefits and funeral grant, are administrated in individual districts by Labour Offices (Úřad práce) and in Prague by City Districts Offices (Úřad městské části). These offices are responsible for all activities related to the administration of State social support benefits, in particular, collection of applications, registering applicants, compiling the necessary data and operation of nation-wide information system as well as decision making concerning benefits and issuing of official decisions. In order to make it easier for citizens to apply, Labour offices have established contact places in some small towns.

Social Assistance

Social Assistance Benefits for Severely Handicapped Persons

One-off or recurrent benefits are provided by municipal authorities (financed from taxes). These are obligatory or facultative benefits for acquisition of special aids, flat modification, purchase, special modification and operation of motor vehicle, individual transport, increased cost of living, use of barrier-free flat, feed of a guide dog.

Assistance in Material Need

As assistance in material need, the following recurrent or one-off benefits are provided: allowance for living, supplement for housing and extraordinary immediate assistance. Benefits are designated to persons with weak income or in case of emergency situation. Municipal authorities administer assistance in material need at the central budget expense.

Social services

Social services provide assistance and support to persons in adverse social situation and an allowance in respect of the need of care. The care allowance is a recurrent monthly allowance provided to person who is dependent on assistance of someone else due to long term adverse health conditions. The care allowance is administered by the municipal authorities.

IMPORTANT ADDRESSES

Ministry of Labour and Social Affairs: Ministerstvo Práce a Sociálních Věcí Na poricnim pravu 1 128 01 Praha 2 www.mpsv.cz

MOLSA - Employment Services Administration: Správa Služeb Zaměstnanosti

Na poricnim pravu 1 128 01 Praha 2 www.ssz.mpsv.cz

Czech Administration of Social Security:

Česká Správa Sociálního Zabezpečení Krizova 25 225 08 Praha 5 www.cssz.cz

Ministry of Health:

Ministerstvo Zdravotnictví Palackeho namesti 4 128 00 Praha 2 www.mzcr.cz

ORGANISATION OF SOCIAL PROTECTION **DENMARK**

Ministry of Health Ministry of Social Welfare **Ministry of Employment Ministry of Taxation** and Prevention Ministeriet for sundhed og forebyggelse Beskæftigelsesministeriet Velfærdsministeriet Skatteministeriet Supplementary Pension ATP Sickness and Health Care General Family Allowances Unemployment Invalidity – Old-Age Family Benefits Death Grants Sickness Activation Rehabilitation Minimum resources Re-education Maternity Cash Benefits Insurance for Employment Injuries and Professional Diseases General Directorate for Directorate Unemployment insurance National Social Security Agency National Board of Health Customs and Taxes Told og Skat Arbeidsdirektoratet Den Sociale Sikringsstyre Sundhedsstyrelse Body for the Supplementary Pension ATP National Board of Industrial Injuries Arbejdsskadestyrelsen The Board of the Labour Market Occupational Diseases Fund Arbejdsmarkedets Erhvervssygdomssikring Regional and local Local administrations Local authorities administrations Unemployment Insurance Funds Registered private insurance companies

DENMARK

Pension Schemes

All Danish citizens resident in Denmark are entitled to an anticipatory pension in the case of invalidity (invalidity pensions) under the age 65. At the age of 65 they are entitled to an old-age pension. Pensions are calculated on the basis of the years in which the person concerned was resident in Denmark. This pension system (the social pensions) is run by the local authorities. The Ministry of Social Welfare (Velfærdsministeriet) supervises the implementation of the legislation. However, it does not have the right to interfere in individual cases.

The system of the supplementary pensions (Arbejdsmarkedets Tillægspension, ATP) grants those employees, who work at least 9 hours per week, a supplement in addition to the social pension. The employees receive the supplementary pension at the age of 67. However, persons who reached the age of 60 after 1 July 1999 may claim the pension before the age of 67, but not before the age of 65.

The system of the supplementary pension ATP also includes a lump-sum payment or a capitalised pension to the surviving spouse or cohabitant and children. The ATP supplementary pension system is managed by a central body and falls within the scope of the Ministry of Employment (Beskæftigelsesministeriet).

The SP, another additional scheme, is a special pension scheme plan. It is a compulsory plan gathering the contributions of all employees and self-employed and it is managed by the ATP institution. However, for the period 2004-2008, the contributions have been suspended.

The labour market supplementary pension scheme for recipients of anticipatory pension (i.e. public invalidity pension) is a statutory, voluntary scheme, which came into force on 1 January 2003. The objective is to give recipients of anticipatory pension (invalidity pension) access to a labour market pension – supplement to public old-age pension.

The unemployment insurance partial pension and early retirement schemes are transitional systems in between the working life and retirement. They are managed by the Ministry of Employment.

Sickness Insurance

The sickness insurance which provides for the whole population is run and financed by the regional and local authorities. The Ministry of Health and Prevention (Ministeriet for Sundhed og Forebyggelse) is in charge of the insurance. All residents of Denmark have sickness insurance. The cash benefits in the case of sickness are paid by the local authorities (within the scope of the Ministry of Employment).

Family Benefits

The general family benefits and the various other family allowances are administered by the local authorities (within the scope of the Ministry of Taxation, Skatteministerie, and the Ministry of Social Welfare, Velfærdsministeriet). Cash benefits in the case of maternity are paid by local authorities (within the scope of the Ministry of Social Welfare).

Unemployment Insurance

Unemployment insurance is voluntary. The unemployment insurances are distributed according to the various branches; two insurances are reserved for the self-employed. The insured and the employers pay contributions into the insurances. These contributions and the contributions which the employees and the self-employed pay into the Labour Market Fund cover the State share for the expenses related to the unemployment insurance including early retirement. The Ministry of Employment is in charge of the unemployment insurance.

IMPORTANT ADDRESSES

Ministry of Employment:

Beskæftigelsesministeriet Ved Stranden 8 1061 København K www.bm.dk

National Directorate of Labour:

Arbejdsdirektoratet Stormgade 10 1009 København K www.adir.dk

Labour Market Supplementary Pensions Institution:

Arbejdsmarkedets Tillægspension (atp) Kongens Vænge 8 3400 Hillerød www.atp.dk

National Board of Industrial Injuries:

Arbejdsskadestyrelsen Sankt Kjelds Plads 11 P.O. Box 3000 2100 København Ø www.ask.dk

Ministry of Social Welfare:

Velfærdsministeriet Holmens Kanal 22 1060 København K www.socialministeriet.dk

National Social Security Agency:

Den Sociale Sikringsstyrelse International Service Landemærket 11 1119 København K www.dss.dk

Ministry of Health and Prevention:

ministeriet for Sundhed og Forebyggelse Slotsholmsgade 10-12 1216 København K www.sum.dk

National Board of Health:

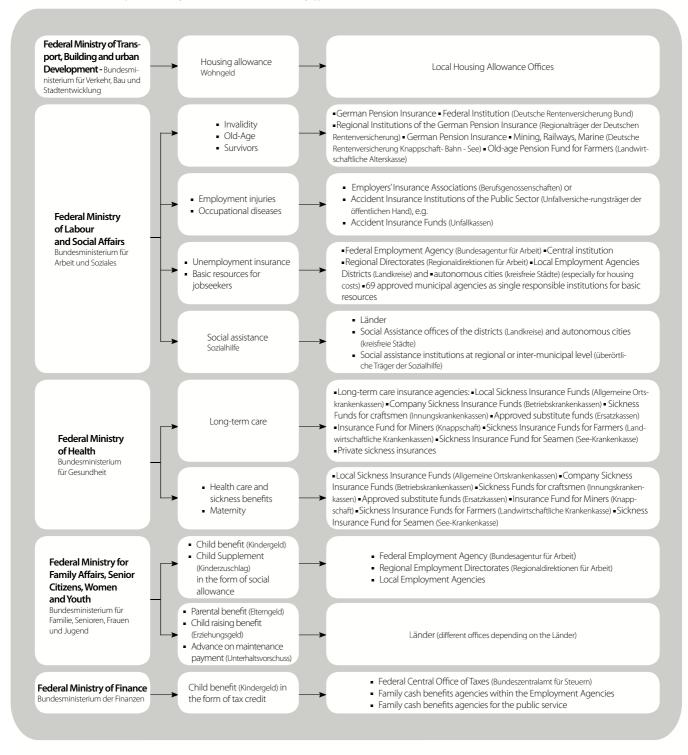
Sundhedsstyrelsen Islands Brygge 67 P.O. Box 1881 2300 København S www.sundhedsstyrelsen.dk

Ministry of Taxation:

Skatteministeriet Nicolai Eigtvedsgade 28 1402 København K www.skat.dk

ORGANISATION OF SOCIAL PROTECTION **GERMANY**

Federal Insurance Office (Bundesversicherungsamt): Supervisory body for insurance funds exceeding more than 3 Länder. Where the German Pension Insurance – Federal Institution is responsible for basic issues and horizontal functions, the supervision is carried out in some cases directly by the Federal Ministry of Labour and Social Affairs, in other cases supervision is done by the Länder ministries for social affairs or by appointed institutions.



GERMANY

The following five branches of social insurance exist in Germany:

1) Statutory pension insurance

The statutory pension insurance (Gesetzliche Rentenversicherung) is organised by the German Pension Insurance - Federal Institution (Deutsche Rentenversicherung Bund), the Regional Institutions of the German Pension Insurance (Regionalträger der Deutschen Rentenversicherung) the German Pension Insurance - Mining, Railways, Marine (Deutsche Rentenversicherung Knappschaft-Bahn-See) and the old-age pension funds for farmers (Landwirtschaftliche Alterskassen).

2) Statutory sickness insurance

The statutory sickness insurance (Gesetzliche Krankenversicherung) is in the hands of roughly 220 insurance funds, some of which operate regionally (local sickness insurance funds, Ortskrankenkassen) and some of which operate at a national level (e.g most of the substitute funds, Ersatzkassen). These funds are open to all members regardless of occupation or employment in a company. (Exceptions are the fund for seamen and the agricultural funds for farmers). Apart from a few special categories (e.g. civil servants, judges, soldiers) all employees are subject to compulsory insurance, unless the remuneration is above the annual assessment ceiling. For minor employment, special rules are applied. The sickness insurance funds administer the collection of the overall social insurance contributions for all branches.

3) Statutory long-term care insurance

Each statutory sickness insurance fund has established a long-term care insurance fund which is responsible for granting benefits to beneficiaries who are in need of long-term care. All persons who are members of a statutory sickness insurance fund are covered against the risk of need for long-term care in the same fund. Persons with private sickness insurance coverage must correspondingly conclude a private long-term care insurance contract.

4) Statutory accident insurance

The relevant organisations of the statutory accident insurance (Gesetzliche Unfallversicherung) are the Employers' Insurance Associations (Berufsgenossenschaften) and the Accident Insurance Institutions of the Public Sector (e.g. Accident Insurance Funds). The following categories of persons are covered: employees, certain self-employed persons, pupils and students, children in kindergartens or in day-care, certain volunteers, persons undergoing rehabilitation and certain other persons.

5) Unemployment insurance

Statutory unemployment insurance (Gesetzliche Arbeitslosenversicherung) is implemented by the Federal Employment Agency (Bundesagentur für Arbeit). It is divided into the main office, the regional directorates and the local agencies. All employees are covered (manual workers, white-collar workers, trainees including young disabled persons).

Self-administration

The individual branches of social insurance are self-governed by representative's meetings and board meetings or administrative boards which consist of the same number of representatives of the employers and the persons insured. In the field of unemployment insurance representatives of the public sector are included as a third party. The self-administration of substitute funds consists only of the representatives of the persons insured.

Supervision

As regards supervision the Federal Ministry of Health (Bundesministerium für Gesundheit) is responsible for the branches of sickness and long-term care insurance. The Federal Ministry of Labour and Social Affairs (Bundesministerium für Arbeit und Soziales) is responsible for (old-age, survivors' and invalidity) pension, accident, and unemployment insurance. As regards the competence of the supervisory authorities it is decisive whether the insurance fund is a Länder or a federal institution. An insurance fund qualifies as a Land institution when its responsibilities do not extend beyond its Land. Furthermore, a fund whose responsibilities touch over onto other Länder, but do not exceed three is also to be considered a Land institution, provided the Länder involved stipulate one supervising Land. In such a case, supervision falls under the responsibility of the highest social insurance administrative body at a Länder level, or the authority stipulated by the Land's legislation. This is also the case for associations at a Länder level. In all other cases, the insurance fund qualifies as a federal institution (as for instance the German Pension Insurance - Federal Institution (Deutsche Rentenversicherung Bund) and the Substitute Health Insurance Funds (Ersatzkrankenkassen). The Federal Insurance Office (Bundesversicherungsamt) is the competent supervisory body.

Other Benefits

Apart from the social insurance branches mentioned, there are public social assistance, different family benefits and housing benefit.

IMPORTANT ADDRESSES

Bundesministerium für Gesundheit Rochusstraße 1 - 53123 BONN - www.bmg.bund.de

Bundesministerium für Arbeit und Soziales Wilhelmstr. 49 - 10117 BERLIN - www.bmas.de

Bundesministerium für Familie, Senioren, Frauen und Jugend Alexanderstr. 3 - 10178 Berlin - www.bmfsfj.de

Bundesministerium für Wirtschaft und Technologie Scharnhorststr. 34-37 - 10115 BERLIN - www.bmwi.de

Bundesministerium für Verkehr, Bau und Stadtentwicklung Invalidenstr. 44 - 10115 BERLIN - www.bmvbs.de

Bundesministerium der Finanzen Wilhelmstr. 97 - 10117 Berlin - www.bundesfinanzministerium.de

Bundeszentralamt für Steuern An der Küppe 1 - 53225 Bonn - www.bzst.bund.de

Deutsche Rentenversicherung Bund Ruhrstr. 2 - 10709 Berlin - www.deutsche-rentenversicherung-bund.de

Bundesagentur für Arbeit Regensburger Str. 104 - 90478 Nürnberg - www.arbeitsagentur.de

Bundesversicherungsamt Friedrich-Ebert-Allee 38 - 53113 Bonn - www.bva.de

Deutsche Gesetzliche Unfallversicherung e.V. Mittelstr. 51 - 10117 BERLIN - www.dguv.de

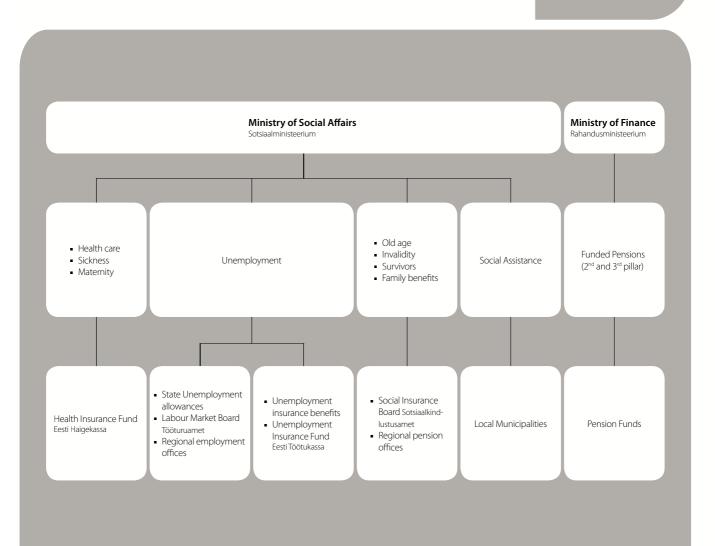
AOK-Bundesverband

Kortrijker Str. 1 - 53177 Bonn - www.aok-bv.de

Deutsche Verbindungsstelle Krankenversicherung – Ausland (DVKA) Pennefeldsweg 12c - 53177 Bonn - www.dvka.de

ORGANISATION OF SOCIAL PROTECTION

ESTONIA



ESTONIA

The Ministry of Social Affairs (Sotsiaalministeerium) is responsible for social security and social welfare. The role of the Ministry includes policy development and the drafting of legislation. Under the Ministry there are two governmental agencies - the Social Insurance Board (Sotsiaalkindlustusamet) and the Labour Market Board (Tööturuamet) - and two public legal bodies - the Health Insurance Fund (Eesti Haigekassa) and the Unemployment Insurance Fund (Eesti Töötukassa) - which are responsible for the administration of the different branches of social security.

The Social Insurance Board administers the schemes of pension insurance, family benefits, social benefits for disabled persons and funeral grants and keeps the register of insured persons and beneficiaries. The Board ensures that pensions and benefits according to the national legislation and international agreements are paid in due time. Medical examination for the permanent incapacity for work is executed by a Commission of the Board. The regional pension offices, subordinated to the Social Insurance Board process applications of the above mentioned benefits and arrange the payment through banks or post offices.

The Labour Market Board administers the scheme of unemployment allowances, while processing of the claims, granting and payment of allowances is carried out by the regional employment offices, subordinated to the Board.

The Unemployment Insurance Fund is in charge of the unemployment insurance scheme, the aim of what is to pay out unemployment insurance benefits, collective termination of employment contracts benefits and insolvency of employer benefits.

The Health Insurance Fund runs the scheme of health insurance, which includes medical services, compensation for pharmaceuticals and cash benefits (sickness, maternity and care benefits). The Fund makes annual contracts with the providers of medical services, and covers the expenses of the medical care of insured persons to the service providers under these contracts. The Fund also pays sickness, maternity and care benefits to insured persons.

Operating within the area of government of the Ministry of Social affairs there are also Health Protection Inspectorate (Tervise-kaitseinspektsioon), Health Care Board (Tervishoiuamet), State Agency of Medicines (Ravimiamet) and Labour Inspectorate (Tööinspektsioon).

Social assistance cash benefits and social services are provided by local municipalities.

Social contributions (social tax and unemployment insurance contributions) are collected by the Tax Board (Maksuamet).

The supplementary pension scheme, which is a mandatory funded scheme, is administered by individual pension funds under the supervision of the Ministry of Finance (Rahandusministeerium). Subscription to the funded pension is mandatory for persons born in 1983 or later, and voluntary for those born before the year 1983. The funded pension is based on preliminary financing – a working person pays 2% of his/her gross salary to the fund. The State adds 4% out of the current social tax (33%), and retains 29%.

Payments according to the Funded Pensions Act will not be made before 1 January 2009.

Making of contributions in the supplementary funded pension scheme (3rd pillar) is voluntary for all persons and the amount of contributions is not prescribed by the state. The person is entitled to receive payments after she/he has turned 55, or in case she/he has become fully and permanently disabled and unable to work.

IMPORTANT ADDRESSES

Ministry of Social Affairs:

Sotsiaalministeerium Gonsiori 29 15027 Tallinn www.sm.ee

Social Insurance Board: Sotsiaalkindlustusamet

Lembitu 12 15092 Tallinn www.ensib.ee

Labour Market Board:

Tööturuamet Gonsiori 29 15027 Tallinn www.tta.ee

Estonian Health Insurance Fund:

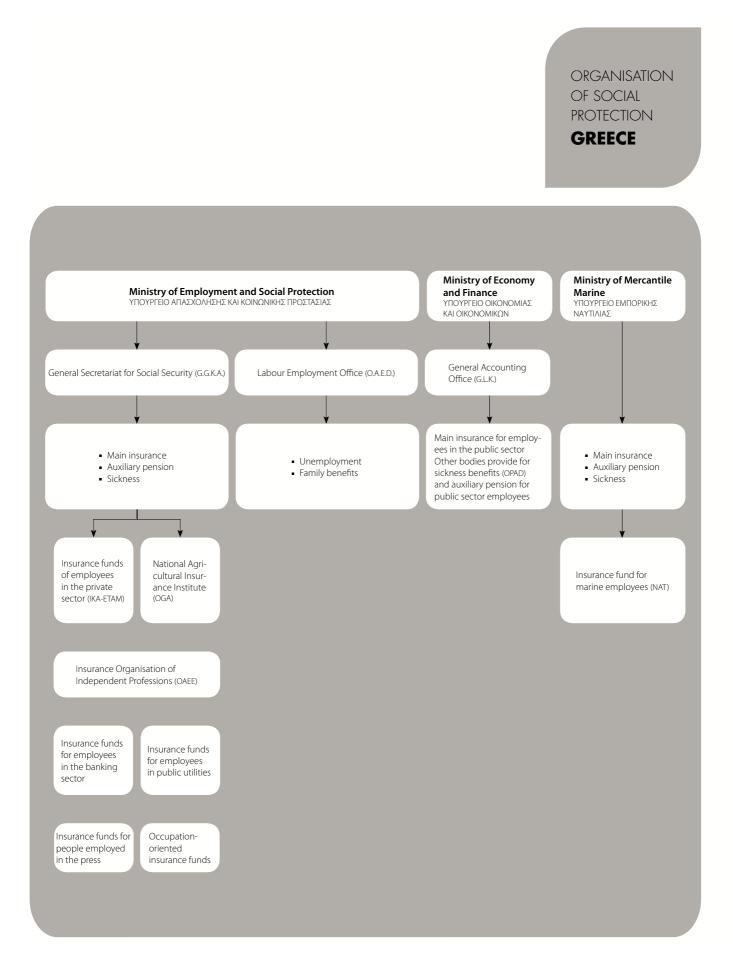
Eesti Haigekassa Lembitu 10 10114 Tallinn www.haigekassa.ee

Estonian Unemployment Insurance Fund:

Eesti Töötukassa Lõkke 4 10122 Tallinn www.tootukassa.ee

Ministry of Finance:

Rahandusministeerium Suur-Ameerika 1 15006 Tallinn www.fin.ee



GREECE

The Greek Constitution of 1975, revised in 2001, established the principle of the "Social State" by means of provisions guaranteeing to a large extent social protection. In particular, Article 22 § 5 concerning social security stipulates the obligation of the State to provide social security for workers.

In Greece the prerequisite for being directly covered by social security is to be working. The affiliation to a scheme depends on the nature and the type of work performed.

The social security system in Greece is based on two pillars: the basic protection and the supplementary protection (called "auxiliary" in Greece). It comprises a great number of insurance funds and a large variety of schemes, including, from 2004 (based on law 3029/2002), occupational funds.

- The main insurance institution is the Social Insurance Institute (IKA-ET-AM) to which the greater majority of salaried workers and other categories of employees are affiliated. IKA-ETAM is the "general Greek scheme for the insurance of salaried workers". Apart from IKA-ETAM there are special schemes for salaried workers to which certain categories coming from the civilian population are affiliated, e.g. the insurance fund for employees of the public electricity company or other public utilities, insurance funds for people employed in the press, etc. Based on law 3029/2002 and relevant subsequent laws (3371/2005, 3522/2006 and ministerial Decision Ф10048/26904/1732 of 2004), in an attempt to reduce the number of social security funds and thus to improve the system's efficiency, a number of insurance funds (the so called "Special Funds") are merging in IKA-ETAM.
- Farmers are members of the insurance scheme for agricultural employees (OGA, National Agricultural Insurance Institute).
- As regards the social security of self-employed persons, there are special funds for persons belonging to certain socio-professional categories (e.g. lawyers, the medical professions, persons engaged in a business, craftsmen, civil engineers, etc.). The main fund for the self-employed is OAEE (Insurance Organisation of Independent Professions) for craftsmen, businessmen and drivers.

Each insurance institution is subject to a different legislation. In some cases the benefits, the conditions for granting these benefits and the corresponding formalities differ from one institution to the other.

IKA-ETAM covers the risks of sickness, maternity, old-age, invalidity and death.

OAED (Labour Employment Office) is a special institution in charge of the risk of unemployment; it is also in charge of family benefits; however, it is IKA-ET-AM which collects the contributions for OAED.

The majority of the social security institutions are under the authority and supervision of the Ministry of Employment and Social Protection. A small number of social security institutions are subordinated to and supervised by other ministries.

The public authorities intervene against possible fraud in order to preserve the general interest and see to the correct application of legislation and provisions by the social security organisations (Insurance Funds).

These institutions are administered by the administrative boards in which the representatives of the insured, the pensioners, the employers and the State participate.

IMPORTANT ADDRESSES

ΥΠΟΥΡΓΕΙΟ ΑΠΑΣΧΟΛΗΣΗΣ ΚΑΙ ΚΟΙΝΩΝΙΚΗΣ ΠΡΟΣΤΑΣΙΑΣ ΓΕΝΙΚΗ ΓΡΑΜΜΑΤΕΙΑ ΚΟΙΝΩΝΙΚΩΝ ΑΣΦΑΛΙΣΕΩΝ ΔΙΕΥΘΥΝΣΗ ΔΙΑΚΡΑΤΙΚΗΣ ΚΟΙΝΩΝΙΚΗΣ ΑΣΦΑΛΙΣΗΣ ΣΤΑΔΙΟΥ 29 - 10110 ΑΘΗΝΑ

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ΠΕΙΡΑΙΩΣ 40 - 10182 ΑΘΗΝΑ

ΙΔΡΥΜΑ ΚΟΙΝΩΝΙΚΩΝ ΑΣΦΑΛΙΣΕΩΝ ΔΙΕΥΘΥΝΣΗ ΔΙΕΘΝΩΝ ΣΧΕΣΕΩΝ ΧΑΛΚΟΚΟΝΔΥΛΗ 17 - 10241 ΑΘΗΝΑ

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Ministry of Employment and Social Protection General Secretariat for Social Security Directorate for International Relations Stadiou Street 29 - 10110 Athens www.gqka.gr

Ministry of Employment and Social Protection Directorate International Relations Section E.U. Pireos Street 40 - 10182 Athens C.P.

www.ypakp.gr

Social Insurance Institute (IKA-ETAM)

Directorate for International Relations Chalkokondili 17 - 10241 Athens www.ika.gr

National Agricultural Insurance Institute (O.G.A.) Service for public and international relations Section E.U.

Patission Street 30 - 10170 Athens C.P. www.oga.gr

Labour Employment Office (O.A.E.D.) Directorate Insurance Section bilateral relations and implementation of EU directives Ethnikis Antistassis Street 8 - 17342 Ano Kalamaki C.P. www.oaed.gr

ORGANISATION OF SOCIAL PROTECTION

SPAIN

Ministry of Health and Consumption **Ministry of Labour and Social Affairs** Autonomous regions Ministerio de Sanidad y Ministerio de Trabajo y de Asuntos Sociales Comunidades Autónomas Consumo Incapacity for work Maternity Paternity Risk during Social Services pregnancy Non-contributory Employment injuries Risk during benefits Minimum income Health Care Occupational Unemployment breastfeeding Assistance to for integration diseases Invalidity emigrants Old-Age Long-term care Death and surviving dependants Family benefits National Social National Institute for Health Management Security Office (Instituto Nacional de la Seguridad Social, (Instituto Nacional Institute for Elderly National Social de Gestión Sanitaria, and Social Services Security Office Bodies of the INGESA) INSS) (Instituto de Mayores (Instituto Nacional de la autonomous Bodies of the - Firms: voluntary co-State Public Employment y Servicios sociales, Seguridad Social, INSS) regions (Comunidaautonomous regions operation in dealing IMSERSO) Service Servicio Público de Empleo Mutual insurance des autónomas) and (Comunidades autónowith temporary Bodies of the companies for the autonomous mas) with transferred incapacity for work Estatal (SEPEE) autonomous employment injuries cities of Ceuta and powers. Mutual insurance regions (Comunidaand occupational Melilla Enterprises: voluntary companies for emdes autónomas) with diseases cooperation in the ployment injuries transferred powers management of and occupational health care diseases General Social Security Revenue Office (Tesoreria General de la Seguridad Social) = collection of all contributions, control of affiliation

SPAIN

The Spanish Social Security System comprises a General Scheme (employees in industry and in the service sector) and special schemes for the workers of other sectors of production (agricultural workers, self-employed workers, miners, sailors and fishermen, and domestic servants).

The following bodies run these schemes:

- The National Social Security Office (Instituto Nacional de la Seguridad Social, INSS), which manages the cash benefits, i.e. old-age pensions, permanent invalidity, widower's and widow's pensions, orphans' pensions, pensions for family members, cash benefits in the case of temporary incapacity for work, maternity, paternity, risk during pregnancy, risk during breastfeeding, family benefits and other allowances and benefits.
- The National Institute for Health Management (Instituto Nacional de Gestión Sanitaria, INGESA), which is a body for cooperation among the State and the Autonomous Communities, dependent on the Ministry of Health and Consumption, whose purpose is promoting health care coherence within the National Health System, as competence on health care has been transferred to every Autonomous Community, except in the autonomous cities of Ceuta and Melilla.
- The State Public Employment Service (Servicio Público de Empleo Estatal, SEPEE) which manages the unemployment benefits.
- The Institute for Elderly and Social Services (Instituto de Mayores y Servicios Sociales, IMSERSO), which determines additional social services and administers at the same time social assistance allowances, non-contributory benefits and long-term care.
- The Navy's Social Office (Instituto Social de la Marina, ISM) which is in charge of the social protection of the employees of the merchant navy, the fishermen and in general of the employees in marine shipping.
- The General Social Security Revenue Office (Tesorería General de la Seguridad Social, TGSS), which is the only fund within the whole system entitled to collect contributions, register employers, affiliate workers and manage the Social Security Reserve Fund, amongst the responsibilities assigned.

The abovementioned bodies are institutions under public law and act as legal entities. They are subordinate to public administration: the Ministry of Labour and Social Affairs (Ministerio de Trabajo y asuntos sociales) is in charge of INSS, SEPEE, IMSERSO, ISM and TGSS; the Ministry of Health and Consumption (Ministerio de Sanidad y Consumo) is in charge of INGESA.

The employers' associations and the employees' organisations (trade unions) participate in the supervision of the administration via the National Council and the Councils of the Regions, where employers, workers and the representatives of the public administration are equally represented in a tripartite structure.

The public administration of the said bodies can cooperate with the employers' associations (Mutual insurance associations for employment injuries and occupational diseases) and the companies. For such cooperation to be possible, the insurance funds have to meet certain requirements: participation of at least 50 employers and 30,000 employees. The companies have to fulfil certain conditions as well. The cooperation can also be carried out with associations, foundations, public or private institutions, as soon as they have been authorised and registered in a public register.

IMPORTANT ADDRESSES

Ministry of Labour and Social Affairs: Ministerio de Trabajo y Asuntos Sociales c/ Agustín de Bethencourt, 4 28003 Madrid www.mtas.es

www.mtas.es www.seg-social.es

Ministry of Health and Consumption:

Ministerio de Sanidad y Consumo Paseo del Prado, 18 28014 Madrid www.msc.es

National Social Security Office:

Instituto Nacional de la Seguridad Social c/ Padre Damián, 4 28036 Madrid www.seg-social.es

National Institute for Health Management: Instituto Nacional de Gestión Sanitaria

c/ Alcalá, 56 28014 Madrid www.ingesa.es

Institute for Elderly and Social Services:

Instituto de Mayores y de Servicios Sociales Avda. de la llustración s/n 28071 Madrid

www.seg-social.es/imserso

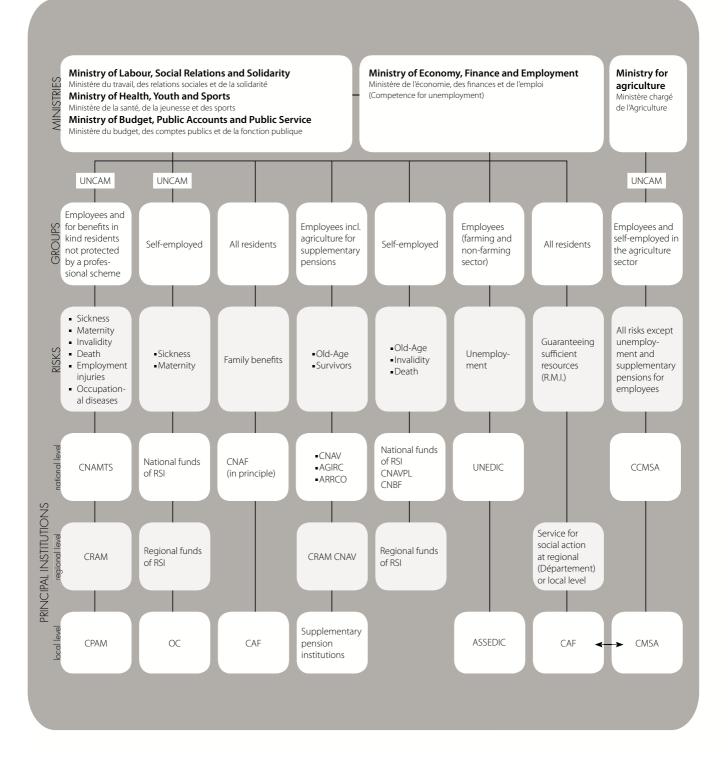
State Public Employment Service: Servicio Público de Empleo Estatal

c/ Condesa de Venadito, 9 28027 Madrid www.inem.es

General Social Security Revenue Office: Tesorería General de la Seguridad Social

Plaza de los Astros, 5 y 7 28007 Madrid www.seg-social.es AGIRC: Supplementary pension for managerial staff (Association générale des institutions de retraite des cadres); ARRCO: Supplementary pension for employees (Association pour le régime de retraite complémentaire des salariés); ASSEDIC: Association for Employment in Industry and Commerce (Association pour l'emploi dans l'industrie et le commerce); CAF: Family Benefits Fund (Caisse d'allocations familiales); CCMSA: Central Mutual Insurance Fund for Farmers (Caisse centrale de mutualité sociale agricole); CMSA: Mutual Insurance Fund for Farmers (Caisse de mutualité sociale agricole); CMSA: Mutual Insurance Fund for Farmers (Caisse de mutualité sociale agricole); CMSA: Mutual Insurance Fund (Caisse nationale d'allocations familiales); CLMMTS: National Sickness Insurance Fund for Employees (Caisse nationale d'assurance maladie des travailleurs salariés); CNAV: National Old-Age Insurance Fund (Caisse nationale d'assurance vieillesse); CNAVPL: National Old-Age Insurance Fund for the liberal professions (Caise nationale d'assurance vieillesse des professions libérales); CMBF: National Fund of the French Bar Council (Caisse nationale des bareaux français); CPAM: Primary Sickness Insurance Fund (Caisse primaire d'assurance maladie); CRAM: Regional Sickness Insurance Fund (Caisse retionale); CC: Agency under contract (Organisme conventionne); RSI: Social Protection Scheme for the Self-employed (Régime social des independants); UNCAM: National Union of Sickness Funds (Union nationale des caises d'assurance maladie); UNEDIC: National Union for Employment in Industry and Commerce (Union nationale genul 'emploi dans l'industrie et le commerce). Social security contributions are collected: for employees and in respect of all risks, by the URSSAF (Incespect of Self Insurance and Family Benefits Contributions, Unions for the COMSAF (Unions for the Collection of Social Insurance and Family Benefits, Cof, CRDS), by the sections of self-employed occupations (old-age and rivalidity) and by the RSI (incespect of all risks); for the l

ORGANISATION OF SOCIAL PROTECTION FRANCE



FRANCE

The French scheme of social security can be divided into five large groups:

- the general scheme which covers most of the employees as well as other categories of persons (students, recipients of certain benefits, simple residents) who have been included into the general scheme in the course of the years, and all residents in the case of family benefits;
- the special schemes for employees of which some cover all risks and others only cover old-age, with the general scheme providing coverage for the other risks;
- the agricultural scheme which includes all risks with two different administrative bodies for farmers and employees of the agricultural sector;
- the schemes for self-employed persons: one scheme for sickness insurance and three schemes for old-age insurance (craftsmen, traders and manufacturers, and one autonomous scheme for members of the professions);
- unemployment schemes.

The general scheme is organised in four branches:

- the branch for sickness, maternity, invalidity and death,
- the branch for employment injuries and occupational diseases,
- the branch for old-age,
- the family branch.

The National Sickness Insurance Fund for Employees (Caisse nationale d'assurance maladie des travailleurs salariés, CNAMTS) is in charge of the first two branches. At local level and supervised by the CNAMTS, there are two types of bodies which do not have any hierarchic connection. These are the regional Sickness Insurance funds and the primary Sickness Insurance funds.

The branch for old-age is administered by the National Old-age Insurance Fund (Caisse nationale d'assurance vieillesse, CNAV) which has transferred certain tasks to the regional Sickness Insurance funds.

The family branch is administered by the National Family Allowance Agency (Caisse nationale des allocations familiales) which is the supervisory body of the family benefits funds.

At the local level the collection of contributions is carried out by the union for the collection of social insurance and family benefit contributions (unions de recouvrement des cotisations de sécurité sociale et d'allocations familiales URSSAF) which is subordinate to the Central Agency of the Social Security Organisations (Agence Centrale des Organismes de Sécurité Sociale, ACOSS). The ACOSS has the task to follow the finances of each branch as regards planning and implementation.

The traditional scheme of unemployment insurance is administered by parity organisations, namely by the Associations for Employment in Industry and Commerce (associations pour l'emploi dans l'industrie et le commerce, ASSEDIC) with the National Union for Employment in Industry and Commerce (Union nationale pour l'emploi dans l'industrie et le commerce, UNEDIC) at the national level.

Apart from the basic old-age pension insurance there are compulsory supplementary pension pay-as-you-go schemes for the employees (administered by parity organisations ARRCO, AGIRC) and for the self-employed.

Finally, supplementary collective schemes, based on compulsory or voluntary membership, are established in the professional framework (companies or branches), mainly for old-age, sickness and invalidity.

These different schemes can be completed by personal insurances individually purchased.

IMPORTANT ADDRESSES

Ministere du travail, des relations sociales et de la solidarite Ministere de la sante, de la jeunesse et des sports

Ministere du budget, des comptes publics et de la fonction publique

Direction de la sécurité sociale 14, avenue Duquesne, 75350 PARIS 07 SP www.sante.gouv.fr - www.securite-sociale.fr - www.travail-solidarite.gouv.fr

Ministere du travail, des relations sociales et de la solidarite

Direction Générale de l'action sociale 7-11, place des Cinq Martyrs du Lycée Buffon, 75696 PARIS Cedex 14 www.travail-solidarite.gouv.fr

Ministere de l'economie, des finances et de l'emploi

Délégation Générale à l'emploi et à la formation professionnelle 7, square Max-Hymans, 75741 PARIS Cedex 15 www.travail-solidarite.gouv.fr

Ministere de l'agriculture et de la peche

Direction des exploitations, de la politique sociale et de l'emploi 78, rue de Varenne, 75349 PARIS 07 SP www.agriculture.gouv.fr

Agence centrale des organismes de securite sociale (ACOSS)

65, boulevard Richard Lenoir, 75536 PARIS Cedex 11 www.acoss.fr

Union nationale des caisses d'assurance maladie (UNCAM)

26 à 50 avenue du professeur André Lemierre, 75986 PARIS Cedex 20

Caisse nationale de l'assurance maladie des travailleurs salaries (CNAMTS)

26 à 50 avenue du professeur André Lemierre, 75986 PARIS Cedex 20 www.ameli.fr

Caisse nationale d'assurance vieillesse (CNAV)

110, avenue de Flandre, 75951 PARIS Cedex 19 www.cnav.fr

Caisse nationale des allocations familiales (CNAF)

32, rue de la Sibelle (CNAF), 75685 PARIS Cedex 14 www.caf.fr

Union nationale interprofessionnelle pour l'emploi dans l'industrie et le commerce (UNEDIC)

80, rue de Reuilly, 75012 PARIS www.assedic.fr

Caisse centrale de la mutualite sociale agricole (CCMSA)

Les Mercuriales 40, rue jean Jaurès, 93547 BAGNOLET Cedex www.msa.fr

Caisse nationale du RSI

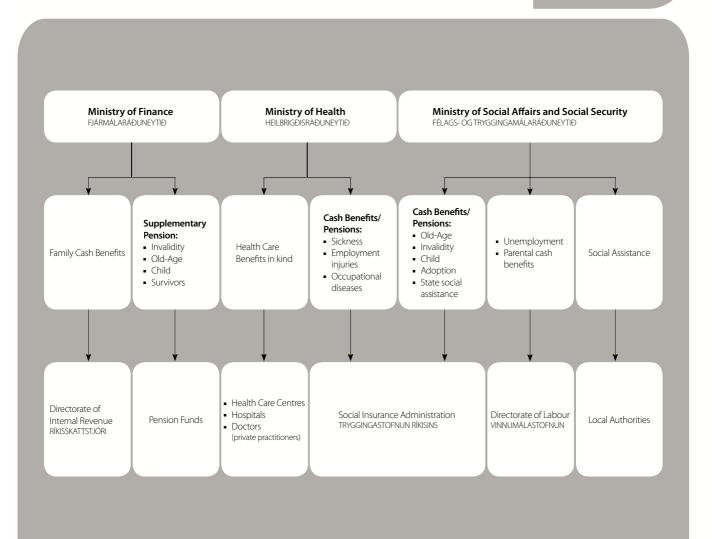
264, avenue du Président Wilson, 93457 LA PLAINE SAINT DENIS Cedex www.le-rsi.fr

GIE AGIRC ARRCO

16 rue Jules César, 75012 PARIS www.arrco.fr - www.agirc.fr - www.agirc-arrco.fr

ORGANISATION OF SOCIAL PROTECTION

ICELAND



ICELAND

Pension Schemes

The national social pension scheme is administered by the Social Insurance Administration (TRYGGINGASTOFNUN RÍKISINS) under the supervision of the Ministry of Social affairs and Social security (FÉLAGS- OG TRYGGIN-GAMÁLARÁÐUNEYTIÐ). The pension scheme is financed by the social security contribution (tryggingagjald) paid by the employers and by taxes. The pension scheme covers old age pension, invalidity pension, and survivor's pension in the form of child pension.

Persons 67 years of age who have been resident in Iceland for at least 3 years between the ages of 16 and 67 are entitled to an old age pension. Icelandic citizenship is not a condition for pension. A full annual pension is paid to those who have been resident in Iceland for at least 40 years between the ages of 16 to 66 inclusive. Shorter periods reduce the pension proportionally. The pension amount is reduced or withdrawn if the pensioner's annual income exceeds an income criterion. Persons can defer the right to pension until the age of 72 and increase their pension for 0.5% for each month (maximum 30%).

Persons resident in Iceland are entitled to an invalidity pension if they are between the ages of 16 and 67 and have been resident in Iceland for at least the three years immediately prior to application and have had their permanent disability assessed at 75% as a result of a medically recognised disease or invalidity.

The supplementary pension scheme, which is a fully funded scheme, is administered by individual occupational pension funds under the supervision of the Ministry of Finance (FJÁRMÁLARÁÐUNEYTIÐ). Employed and self-employed persons have a legal obligation to pay contributions to their respective occupational pension funds. Contribution to the funds must be no less than 12% of gross salary, 8% paid by the employer, and 4% by the employee. These are minimum rates, collective agreements between the social partners may provide for a higher contribution. The pension funds pay old-age pensions (pension age is usually between 65-70 years), invalidity pensions, and pension payments to surviving spouses and/or children.

Health Care and Health Insurance

Health care is administered by health care centres, hospitals, and doctors who are private practitioners. The health insurance scheme which is financed by taxes is administered by the Social Insurance Administration (TRYGGIN-GASTOFNUN RÍKISINS). Both health care and health insurance is under the supervision of the Ministry of Health (HEILBRIGÐISRÁÐUNEYTIÐ). Persons who have been resident in Iceland for six months are covered by the health care and health insurance.

Family Benefits

Family benefits are financed by taxes and are the responsibility of the Directorate of Inland Revenue (RÍKISSKATTSTJÓRI) under the supervision of the Ministry of Finance (FJÁRMÁLARÁÐUNEYTIÐ).

Parental Benefits

Parental benefits to parents on the labour market are funded by the social security contribution (tryggingagjald) paid by the employers. Benefits to parents that are not working are financed by taxes. The administration of parental benefits is by the Directorate of Labour (VINNUMÁLASTOFNUN). The Directorate of Labour is under the supervision of the Ministry of Social Affairs and Social Security (FÉLAGS- OG TRYGGINGAMÁLARÁÐUNEYTIÐ).

Unemployment Insurance

Unemployment insurance is funded by the social security contribution (tryggingagjald) paid by the employers. The benefits are paid out of the unemployment fund and are administered by the Directorate of Labour (VIN-NUMÁLASTOFNUN). The Directorate of Labour is under the supervision of the Ministry of Social Affairs and Social Security (FÉLAGS- OG TRYGGIN-GAMÁLARÁÐUNEYTIÐ).

Social Assistance

Social assistance is twofold in Iceland, the first is the state social assistance, and the second is the social assistance by local authorities. The state social assistance is the responsibility of the Social Insurance Administration (TRY-GGINGASTOFNUN RÍKISINS). General social assistance is administered by the local authorities. Social assistance at state and local level is supervised by the Ministry of Social Affairs and Social Security (FÉLAGS- OG TRYGGIN-GAMÁLARÁÐUNEYTIÐ). The latter is the main services and is the safety net of the Icelandic welfare system.

IMPORTANT ADDRESSES

Ministry of Health: - HEILBRIGÐISRÁÐUNEYTIÐ Vegmúli 3 - 150 Reykjavík www.stjr.is/hbr

Ministry of Finance: - FJÁRMÁLARÁÐUNEYTIÐ Arnarhvolur - 101 Reykjavík

www.stjr.is/fjr

Ministry of Social Affairs and Social Security: FÉLAGS- OG TRYGGINGAMÁLARÁÐUNEYTIÐ

Hafnarhúsinu V/Tryggvagötu - 101 Reykjavík www.stjr.is/fel

Social Insurance Administration: - TRYGGINGASTOFNUN RÍKISINS

Laugavegur 114-116 - 150 Reykjavík www.tr.is

Directorate of Labour: - VINNUMÁLASTOFNUN

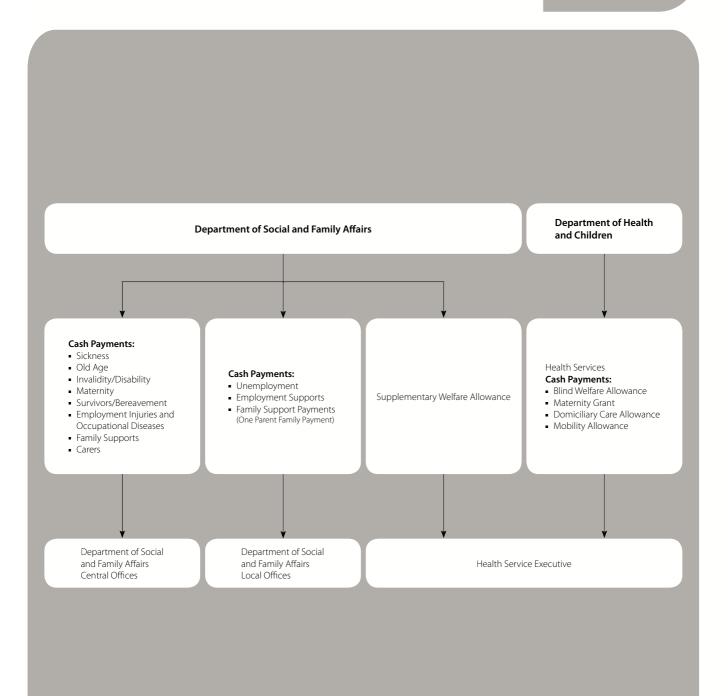
Hafnarhúsinu V/Tryggvagötu - 101 Reykjavík www.vinnumalastofnun.is

Directorate of Inland Revenue: - RÍKISSKATTSTJÓRI

Laugavegur 166 - 150 Reykjavík www.rsk.is

ORGANISATION OF SOCIAL PROTECTION

IRELAND



IRELAND

Department of Social and Family Affairs

The Department supports the Minister for Social and Family Affairs in the discharge of governmental, parliamentary and departmental duties. The main functions of the Department are:

- To formulate appropriate social protection and social inclusion policies;
- To administer and manage the delivery of statutory and non-statutory social protection schemes and services; and
- To work with Departments and agencies in the delivery of Government priorities.

The Department is divided along Aireacht / Executive (Social Welfare Services) lines. The Aireacht (which comprises the Planning and Corporate Services Divisions) is responsible for the formulation of social protection and other social support policies and for the provision of support and advice to the Minister and Government.

Social Welfare Services is responsible for the day to day administration of schemes and delivery of services. Local delivery of services, through a network of nearly 130 local/branch offices, is structured on an 8-region basis.

The Social Welfare Appeals Office is an office of the Department independently responsible for determining appeals against decisions on social welfare entitlements, insurability of employment issues and certain decisions made by the Health Service Executive under the Supplementary Welfare Allowance Schemes.

The General Register Office is the central civil repository for records relating to Births, Deaths and Marriages in the Republic of Ireland. This office transferred to this Department from the Department of Health and Children on 1st January 2008.

A number of statutory agencies, listed below, operate under the aegis of the Department:

 The Citizens Information Board provides information, advice and advocacy services in relation to social services

(web address: www.citizensinformationboard.ie);

- The Combat Poverty Agency has responsibilities in the areas of advice to the Minister, project support and innovation, research and public education in relation to poverty in Ireland (web address: www.cpa.ie);
- The Family Support Agency is responsible for the Family and Community Services Resource programme, the support, promotion and development of marriage and relationship counselling and other family supports and the provision of a family mediation service. The Agency's responsibilities also include undertaking research, providing and disseminating information about parenting and family issues, and providing advice to the Minister on matters relating to families (web address: www.fsa.ie);
- The Pensions Board is responsible for overseeing the implementation of the Pensions Act which concerns the regulation of occupational pensions and Personal Retirement Savings Accounts. The Board also advises the Minister in relation to pensions policy (web address: www.pensionsboard.ie);
- The Office of the Pensions Ombudsman investigates complaints of financial losses due to maladministration, disputes of fact or law, in relation to occupational pension schemes and Personal Retirement Savings Accounts. The Pensions Ombudsman is a statutory officer and exercises his functions independently (web address: www.pensionsombudsman.ie).

Department of Health and Children

The Department of Health and Children is responsible for supporting the Minister and the wider democratic process, strategic health policy formulation and evaluation, resource issues, performance measurement and management of the wider delivery system. The Department is currently involved in a programme of organisational change and reform of the country's health service. The management and delivery of health and personal social services are the responsibility of the Health Service Executive (HSE) under the Health Act, 2004. The HSE manages services through a structure designed to put patients and clients at the centre of the organisation. It has three clearly defined interdependent areas - Health and Personal Social Services, Support Services and Reform & Innovation.

Health and Personal Social Services are divided into three service delivery units:

- Population Health promotes and protects the health of the entire population.
- Primary, Community and Continuing Care (PCCC) delivers care in the community.
- National Hospitals Office (NHO) provides acute hospital and ambulance services.

All of the services provided by PCCC and NHO are delivered through four Administrative Areas - Dublin Mid-Leinster, Dublin North-East, West, and South. The PCCC Directorate is responsible for the planning, management and delivery of all PCCC services, which includes primary care, community based health and personal social services and continuing care hospitals and services. Primary, Community and Continuing Care services will be delivered primarily through Local Health Offices based on the existing 32 community care areas. The NHO Directorate is responsible for the provision of all acute hospital care and ambulance pre-hospital emergency care. The management and co-ordination of all statutory and non-statutory acute hospitals will be through 10 Hospital Networks.

Within Support Services are six management units which provide the corporate services necessary to enable the organisation to function efficiently and cost effectively. They are:

- Human Resources responsible, directly and indirectly, for more than 100,000 staff;
- Finance responsible for a budget of almost € 15 billion;
- Shared Services delivers economies of skill and scale;
- Information and Communications Technology provides the technology for delivering quality services;
- Estates manages a € 10 billion capital infrastructure and the annual capital plan;
- Procurement ensures that the HSE maximises its purchasing power.

Reform and Innovation drives the HSE's strategic and corporate planning processes, plays a lead role in major initiatives and creates national consistency. It includes:

- Corporate Planning and Control Processes;
- SPRI Strategic Planning, Reform and Implementation;
- Expert Advisory Groups.

One of the key policy aims of the Health Strategy is the delivery of high quality services which are based on evidence-supported best practice. In order to promote quality of care throughout the health and personal social services system, and to ensure that high quality information is available to the system, the Government, as one of the recommendations of the Reform Programme, established the Health Information Quality Authority (HIQA) in May 2007.

IMPORTANT ADDRESSES

Department of Social and Family Affairs

Headquarters - Aras Mhic Dhiarmada - Store Street- Dublin 1 www.welfare.ie

Department of Social and Family Affairs

Social Welfare Services

Goldsmith House - Pearse Street - Dublin 2 - www.welfare.ie

Department of Health and Children

Headquarters - Hawkins House - Dublin 2 - www.doh.ie

Health Service Executive

Head Office - Limetree Avenue - Millenium Park - Naas - Co. Kildare www.hse.ie

ORGANISATION OF SOCIAL PROTECTION ITALY

Ministry Ministry of **Ministry of Labour and Social Protection Ministry of Social Solidarity** of Health the Interior Ministero del lavoro e della previdenza sociale Ministero della solidarietà sociale Ministero Ministero della salute dell'interno Employment Invalidity Guaranteeing Guaranteeing Sickness injuries Old Age Unemployment Family benefits sufficient Health sufficient Maternity Occupational Survivors resources resources diseases National Institute for Social Security Istituto nazionale National della previdenza sociale (INPS) Institute for in-National Institute surance against for Social Security employment Istituto nazionale injuries della previdenza İstituto nazionale sociale (INPS) National Institute contro gli infortuni sul lavoro (INAIL) for Social Security of Employees of Public Authorities (INPDAP) National Institute National Institute National Institute Regions and Regions and for Social Security for Social Security for Social Security municipal municipal Istituto nazionale Istituto nazionale Istituto nazionale della previdenza sociale (INPS) della previdenza sociale (INPS) della previdenza sociale (INPS) authorities authorities National Institute for Social Security of the Italian Journalists (INPGI) Institute for Institute for Social Security Social Security of Seamen of Seamen Istituto di previ-Istituto di previdenza per il settore denza per il settore marittimo (IPSEMA) marittimo (IPSEMA) National Institute for Social Security of Show Business Workers (ENPALS)

ITALY

With the exception of health care the Italian system of social protection is not organised according to one universal criterion. For each branch, in particular for pensions, there is one special administration which is responsible for the collection of contributions and the provision of benefits. The implementation of legislation and supervisory activities are assumed by two Ministries, the Ministry of Labour and Social Protection (Ministero del Lavoro e della Previdenza Sociale) and the Ministry of Social Solidarity (Ministero della Solidarietà Sociale).

Health care

The Ministry of Health (Ministero della Salute) is the competent institution for this field. It administers the financial means, distributing them between the regions and municipal authorities that are in charge of benefit provision via "the local health units".

Sickness and maternity - benefits in kind

The Ministry of Labour and Social Protection is in charge of the matter as regards the employees of the private sector. The administration of contributions and benefits has been transferred to the National Institute for Social Security (Istituto nazionale della previdenza sociale, INPS) by means of an ad hoc administration. Civil servants do not receive cash benefits in the form of sick pay or maternity allowances; however, the State continues to pay their salaries.

Pensions

Private sector - employees

Competent institution: Ministry of Labour and Social Protection. The implementation is carried out by: the National Institute for Social Security (Istituto nazionale della previdenza sociale, INPS) for the general and certain special schemes: for each scheme an ad hoc administration has been intended; the National Institute for Social Security of the Italian Journalists (Istituto nazionale di previdenza dei giornalisti italiani, INPGI) for journalists. The system has been private since 1 January 1995; the National Institute for Social Security of Show Business Workers (Ente nazionale previdenza ed assistenza lavoratori spettacolo, ENPALS) for artists and soccer players.

Public sector

The administration of the pensions for civil servants and of the benefits for employees of the local authorities falls within the responsibility of the National Institute for Social Security of Employees of Public Authorities (Istituto nazionale di previdenza per i dipendenti dell'amministrazione pubblica, INPDAP).

Self-employed persons

For farmers, craftsmen and persons engaged in a business or trade there are special schemes within the National Institute for Social Security (Istituto nazionale della previdenza sociale, INPS). For the professions there are ad hoc schemes which are being privatised.

Employment injuries and occupational diseases

Competent institution: Ministry of Labour and Social Protection. The collection of contributions and provision of benefits are carried out by the National Institute for Insurance against Employment Injuries (Istituto nazionale contro gli infortuni sul lavoro, INAIL) and for the maritime sector by the Institute for Social Security of Seamen (Istituto di previdenza per il settore marittimo, IPSEMA).

Family benefits

Competent institution: Ministry of Labour and Social Protection. The collection of contributions and provision of benefits has been transferred to an ad hoc body within the National Institute for Social Security (Istituto nazionale della previdenza sociale, INPS). The State is directly in charge of one part of the financing of benefits.

Unemployment

Competent institution: Ministry of Labour and Social Protection. The collection of contributions and provision of benefits has been transferred to an ad hoc body within the National Institute for Social Security (Istituto nazionale della previdenza sociale, INPS). This body also includes all non-contributory benefits granted by the INPS: early retirement pensions, social pensions, minimum pensions.

Guaranteeing sufficient resources

Competent institution: Ministry of the Interior (Ministero dell'Interno). Benefits are granted at the local level and administered by the regional and/ or the local authorities and the National Institute for Social Security (Istituto nazionale della previdenza sociale, INPS).

IMPORTANT ADDRESSES

Ministero del Lavoro e della Previdenza Sociale

Via Flavia, n. 6 00187 Roma www. lavoro.gov.it

Ministero della Solidarietà Sociale

Via Fornovo, n. 8 00192 Roma www. solidarietasociale.gov.it

Ministero della Salute

P. le Dell'Industria, n. 20 00144 Roma www.ministerosalute.it

Ministero dell'Interno

Palazzo del Viminale 00184 Roma www.interno.it

Istituto Nazionale della Previdenza Sociale (inps)

Via Ciro il Grande, n. 21 00144 Roma www.inps.it

Istituto Nazionale contro gli Infortuni sul Lavoro (inail)

Via IV Novembre, n. 144 00187 Roma www.inail.it

Istituto Nazionale di Previdenza dei Giornalisti Italiani (inpgi)

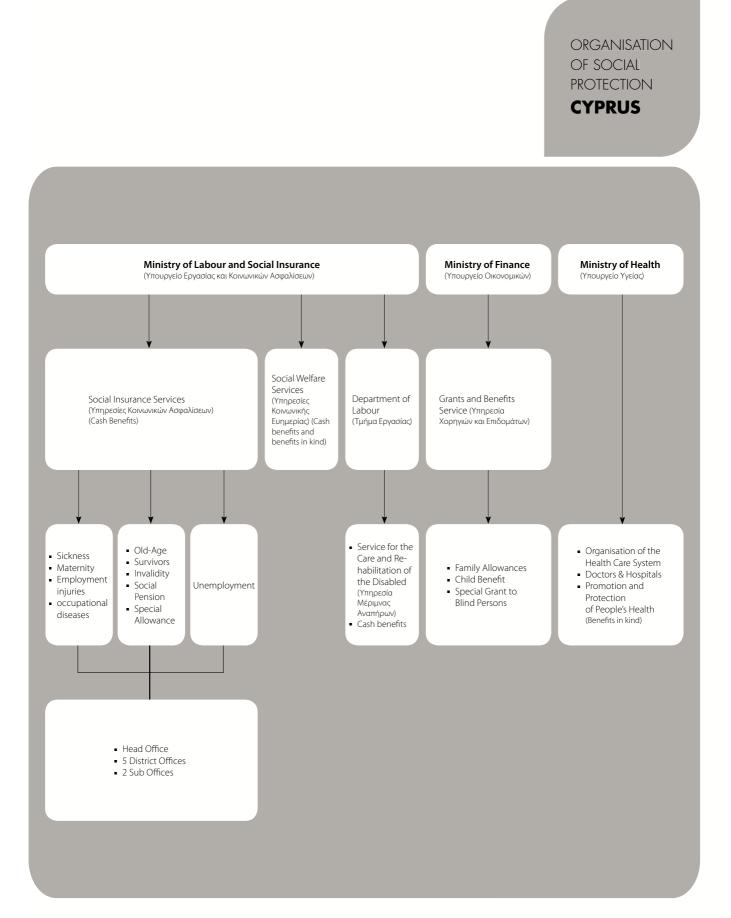
Via Nizza, 35 00198 ROMA www.inpgi.it

Ente Nazionale Previdenza ed Assistenza Lavoratori Spettacolo (en-

pals) Viale Regina Margherita, 206 00198 ROMA www.enpals.it

Istituto Nazionale di Previdenza per i Dipendenti dell'Amministrazione Pubblica (inpdap)

Via S. Croce in Gerusalemme, 55 00100 ROMA www.inpdap.it



CYPRUS

Social Insurance Services (Υπηρεσίες Κοινωνικών Ασφαλίσεων) is a governmental body under the control and supervision of the Ministry of Labour and Social Insurance (Υπουργείο Εργασίας και Κοινωνικών Ασφαλίσεων) that is in charge of the administration of all social risks.

The scheme covers every person gainfully occupied in Cyprus, either as an employed person or as a self-employed person, persons called for military service and every other person who is considered as a voluntarily-insured person.

For any period of incapacity or unemployment earnings are credited based on the insurable earnings of the person. Also insurable earnings are credited for any period between the dates of death/incapacity up to the pensionable age for the purpose of increasing the rate of widow's pension/invalidity pension.

Credits up to 156 weeks are granted for the purpose of payment of pensions to women in respect of each child within the period of their first 12 years of age.

Social risks cover sickness, maternity, marriage, unemployment, invalidity, oldage, death and survivors' risks as well as all risks related to industrial accidents.

A special allowance is provided to all pensioners for the purpose of increasing the amount of their pensions.

Moreover, Social Pension is provided to persons residing in Cyprus, on reaching the age of 65 if they are not entitled to a pension from any other source and satisfy prescribed residence conditions.

The protection of social risks is better provided with the help of the district offices, which are mainly responsible for the receipt of applications, the collection of contributions and for inspections.

The Head Office of the Department of Social Insurance acts as a coordinator of the various district offices and its responsibilities are mainly concentrated on the application of social policy as well as decision making and payments of benefits and pensions.

Social Welfare Services ($Y\pi\eta\rho\epsilon\sigma$ iες Κοινωνικής Ευημερίας) are also a governmental body under the control and supervision of the Ministry of Labour and Social Insurance ($Y\pi$ ουργείο Εργασίας και Κοινωνικών Ασφαλίσεων) that provide and promote social welfare services. Social Welfare Services aim to address social risks and to advance social cohesion within the general framework of the state policies for social and economic development. Services focus on individuals, families, social groups as well as communities.

The Service for the Care and Rehabilitation of the Disabled Persons (Ympeoía Mépiµvaç Avamípωv) has been established in 1989 and operates at the Department of Labour (Tµήµa Εργασίας) under the Ministry of Labour and Social Insurance (Ymoupγείο Εργασίας και Κοινωνικών Ασφαλίσεων). The main reason for the establishment of the Service was to confront all the problems regarding persons with disabilities, either on an executing or a coordinating basis. The Service's main objective is to achieve equal rights and opportunities for the persons with disabilities, as well as their inclusion in the social and economic life of the country, through the implementation of all the necessary measures and programmes.

The Grants and Benefits Service (Υπηρεσία Χορηγιών και Επιδομάτων) comes under the Ministry of Finance (Υπουργείο Οικονομικών). It was reorganised and expanded during 2003, with the purpose of gathering together under the same roof, various related social schemes and to undertake the huge task of implementing the new legislation concerning child benefit and mother's allowance. The foremost task of this service is to offer accurate and prompt service to all citizens.

The Ministry of Health ($Y\pi$ oup γ είο $Y\gamma$ είας) is mainly responsible for the organisation of the health care system in Cyprus and the provision of state-financed health care services. The ultimate objective of the organisation is to promote

and protect people's health. The Ministry of Health formulates national health policies, coordinates the activities of both the private and the public sector, regulates health care standards and promotes the enactment of relevant legislation.

In April 2001 a new law was enacted for the Introduction of a National Health Care System (NHS) which will provide health care to all citizens and will be financed by contributions from the state, the employers, employees, self employed and pensioners. The new scheme is not expected to be introduced before 2008.

IMPORTANT ADDRESSES

Social Insurance Services

(Υπηρεσίες Κοινωνικών Ασφαλίσεων) Head Office Lord Byron Avenue 7 1465 Nicosia www.mlsi.gov.cy/sid e-mail: stats@sid.mlsi.gov.cy

Social Welfare Services

(Υπηρεσίες Κοινωνικής Ευημερίας) 63 Prodromou 1468 Nicosia www.mlsi.gov.cy/sws e-mail: htapanidou@sws.mlsi.gov.cy

Department of Labour

(Τμήμα Εργασίας)
 Service for the Care and Rehabilitation of the Disabled
 (Υπηρεσία Μέριμνας Αναπήρων)
 1480 NICOSIA
 www.mlsi.gov.cy/dl
 e-mail: scrd@dl.mlsi.gov.cy

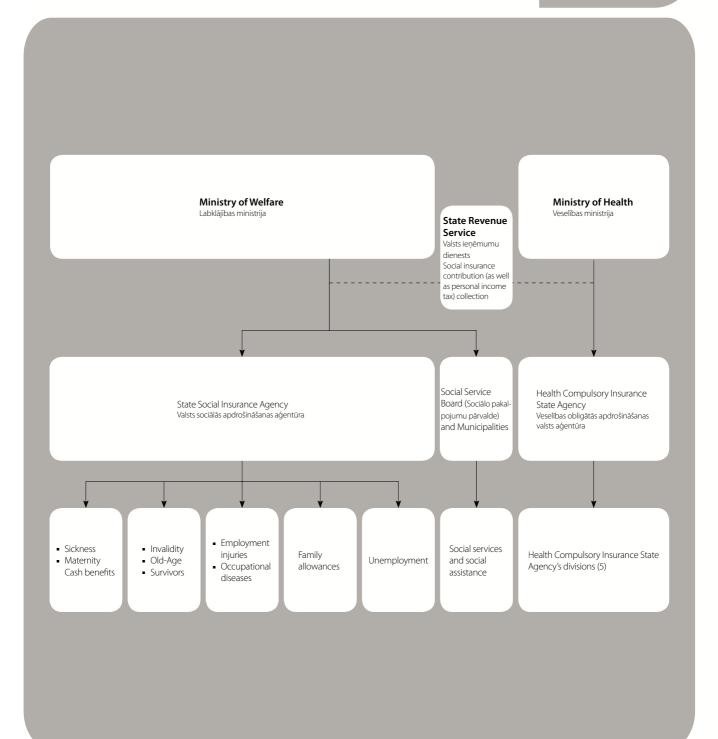
Grants and Benefits Service

(Υπηρεσία Χορηγιών και Επιδομάτων) 1489 Nicosia www.mof.gov.cy e-mail: aiakovou@mof.gov.cy

Ministry of Health

10 Markou Drakou 1040 NICOSIA www.moh.gov.cy e-mail: emakrigiorgi@moh.gov.cy

ORGANISATION OF SOCIAL PROTECTION LATVIA



LATVIA

The social security system in Latvia is organised by the Ministry of Welfare (Labklājības ministrija) whose main task in the field of social security is to develop and to implement state policy in the field of social insurance and state social benefits.

The central organ of the state health care administration from February 2003 is the Ministry of Health (Veselības ministrija), which is responsible for policy development and the drafting of legislation in this field (it was the responsibility of Ministry of Welfare before February 2003).

The State Revenue Service (Valsts ieņēmumu dienests) is responsible for collection of the social insurance contributions (as well as personal income tax collection).

The State Social Insurance Agency (Valsts sociālās apdrošināšanas aģentūra) and its local offices administer the family benefits and social insurance services: sickness, maternity, old-age, survivors, invalidity, employment injuries and occupational diseases.

The State Employment Agency (Nodarbinātības valsts aģentūra) manages the registration for labour mediation, work placements and retraining programmes, whereas the State Social Insurance Agency manages payment of the unemployment benefit.

Social services are administered by the Social Service Board (Sociālo pakalpojumu pārvalde) and the municipalities and social assistance is administrated by municipalities. Municipalities are not under control of any ministry.

The administration of the health care budget is fulfilled by the Health Compulsory Insurance State Agency (Veselības obligātās apdrošināšanas valsts aģentūra). The Agency makes annual contracts with the providers of medical services, and covers expenses for medical care of the insured persons to the service providers under these contracts. The mandatory health insurance also includes compensation of certain pharmaceuticals.

IMPORTANT ADDRESSES

Ministry of Welfare: - Labklājības Ministrija 28 Skolas Str. - Riga, LV-1331 - www.lm.gov.lv

State Social Insurance Agency: Valsts Sociālās Apdrošināšanas Aģentūra 70a Lacplesa Str. - Riga, LV-1011 - www.vsaa.lv

Social Service Board: - Sociālo Pakalpojumu pārvalde 2 Kurbada Str. - Riga, LV-1009 - www.socpp.gov.lv

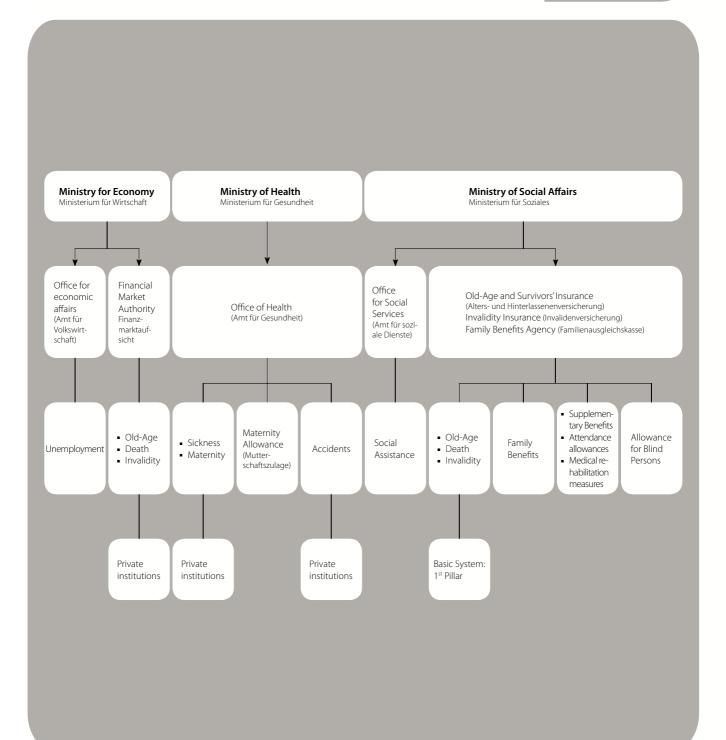
State Revenue Service: - Valsts leņēmumu Dienests 1 Smilsu Str. - Riga, LV-1978 - www.vid.gov.lv

State Employment Agency: - Nodarbinātības Valsts Aģentūra 38 Kr.Valdemara Str. - Riga, LV-1010 - www.nva.lv

Ministry of Health: - Veselības Ministrija 72 Brivibas Str. - Riga, LV-1011 - www.vm.gov.lv

Health Compulsory Insurance State Agency: Veselības Obligātās Apdrošināšanas Valsts Aģentūra 31 Cesu Str. - Riga, LV-1012 - www.voava.gov.lv

ORGANISATION OF SOCIAL PROTECTION **LIECHTENSTEIN**



LIECHTENSTEIN

In Liechtenstein different ministries are responsible for the various social security branches.

Ministry of Economy

In addition to domestic and foreign economic affairs, the Office of Economic Affairs (Amt für Volkswirtschaft) is responsible for unemployment insurance.

The Financial Market Authority's (Finanzmarktaufsicht, FMA) department 'Control of Insurance Undertakings and Pension Funds' is responsible for the occupational scheme with regard to death, invalidity and old-age. At the same time the FMA supervises the pension funds. The Financial Market Authority is an autonomous institution under public law.

Ministry of Health

The Office of Health (Amt für Gesundheit) supervises the private insurance providers that provide health and accident insurance in accordance with the Sickness and Accident Insurance Acts. The Office is responsible for granting means-tested government subsidies to health insurance premiums of individual insured persons. The health insurance providers (4 at present) are members of the Liechtenstein Health Insurance Association. The Office of Health is also responsible for granting of the means-tested maternity allowance for mothers without entitlement to sickness cash benefits (Taggeld) from health insurance.

The Office of Health was established pursuant to the Public Health Act (Gesetz über das Gesundheitswesen - Sanitätsgesetz). The Office is responsible for public health tasks, legal aspects of health, health promotion and health prevention tasks; it also cooperates with other offices and institutions responsible for tasks relevant to public health.

Ministry of Social Affairs

The Old-age and survivors' insurance, disability insurance and the families' compensation fund are three independent public institutions (AHV-IV-FAK-Anstalten) that have combined technically to form a joint directorate under the management of a single director, management board, or board of directors. They are subject to governmental and parliamentary supervision. The AHV-IV-FAK-Anstalten manage the so-called first pillar in the field of social risks: old age, death, and disability (general national insurance scheme for the entire resident population and all employees). This first pillar is supplemented by the aforementioned compulsory occupational scheme for employees (second pillar) and by voluntary insurance (third pillar). The FAK-Anstalt awards one-time childbirth allowances, monthly children's benefits, differential benefits (to supplement any lower foreign benefits) such as benefits for single parents. AHV-IV-FAK-Anstalten also award further supplementary benefits that are transferred to them: supplementary benefits dependent on income or resources for pensioners, helplessness allowances, benefits for blind persons, and rehabilitation measures.

Office for Social Services

The Office for Social Services (Amt für Soziale Dienste) assumes ministerial and administrative tasks and ensures the psycho-social care of the population in line with the Social Assistance Act (Sozialhilfegesetz) and the Young Persons Act (Jugendgesetz). The Office is a multivalent body generally accessible to children, young persons and adults having personal or economic difficulties. The Office provides individual assistance in the form of counselling, care and treatment, financial support and other benefits in kind. The Office monitors and analyses developments in the psycho-social domain, submits recommendations to the government and informs and instructs the population about important issues in the psycho-social domain. The Office develops prevention programmes to avoid the need for help and programmes for persons in need. The Office is responsible for the central coordination of the social assistance bodies and the psycho-social services for children. The Office is responsible for social services for children. The Office is responsible for social assistance and the psycho-social agendas and executes regional and international tasks as commissioned by the government.

IMPORTANT ADDRESSES

Government Regierung des Fürstentums Liechtenstein Regierungsgebäude 9490 Vaduz

www.llv.li

Office of Economic Affairs Amt für Volkswirtschaft Arbeitslosenversicherung

Gerberweg 5 9490 Vaduz www.avw.llv.li

Institutions for Old-age and survivors' pensions, invalidity pension and families' compensation AHV-IV-FAK-Anstalten

Gerberweg 2 9490 Vaduz www.ahv.li

Office for social services

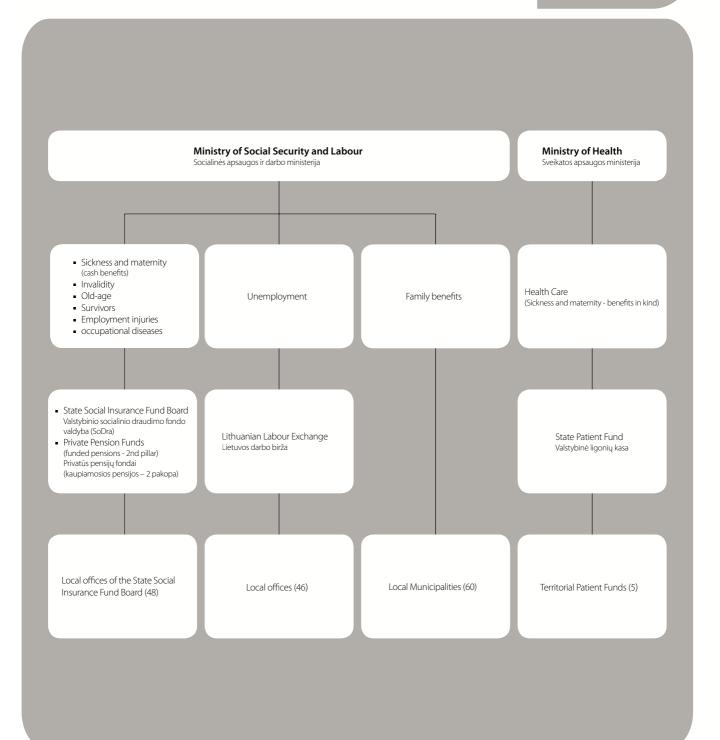
Amt für Soziale Dienste Post- und Verwaltungsgebäude 9494 Schaan www.asd.llv.li

Office of Health

Amt für Gesundheit Kranken- und Unfallversicherung Aeulestrasse 51 Postfach 684 9490 VADUZ www.aq.llv.li

Financial Market Authority Finanzmarktaufsicht Versicherungs- und Vorsorgeaufsicht Heiligkreuz 8 9490 VADUZ www.fma-li.li

ORGANISATION OF SOCIAL PROTECTION **LITHUANIA**



LITHUANIA

Social security in Lithuania is administered by the following main institutions:

- The Ministry of Social Security and Labour (Socialine's apsaugos ir darbo ministerija). The mission of the Ministry of Social Security and Labour is to develop and implement an effective system of social assistance, social insurance and labour, harmonised with the EU standards, in order to enhance social security of Lithuanian residents. The Ministry develops policy and drafts legislation for the whole sphere of social security (except health care).
- The State Social Insurance Fund Board (Valstybinio socialinio draudimo fondo valdyba, SoDra) with its local offices (responsible for the insurance schemes for pensions, sickness and maternity (cash benefits), employment injuries and professional diseases as well as for the collection of contributions for all schemes and transferring of contributions to the State Patient Fund (Valstybinė ligonių kasa), Lithuanian Labour Exchange (Lietuvos darbo birža), and to private pension funds).
- Lithuanian Labour Exchange (Lietuvos darbo birža) with its local offices (responsible for active and passive measures against unemployment).
- Municipal social assistance units (responsible for most of the non-insurance benefits (family benefits) and social services).
- Health system is administered by Ministry of Health (Sveikatos apsaugos ministerija) and State Patient Fund (Valstybinė ligonių kasa). The Ministry of Health carries out the functions of state administration in the sphere of health care commissioned to it by laws and other legal acts, as well as implements the state policy in that sphere. The State Patient Fund implements the compulsory health insurance fund budget, pays the contracted health insurance institutions through Territorial Patient funds for the services provided to the insured persons (sickness and maternity (benefits in kind), exercises control over the quality of health care services.

IMPORTANT ADDRESSES

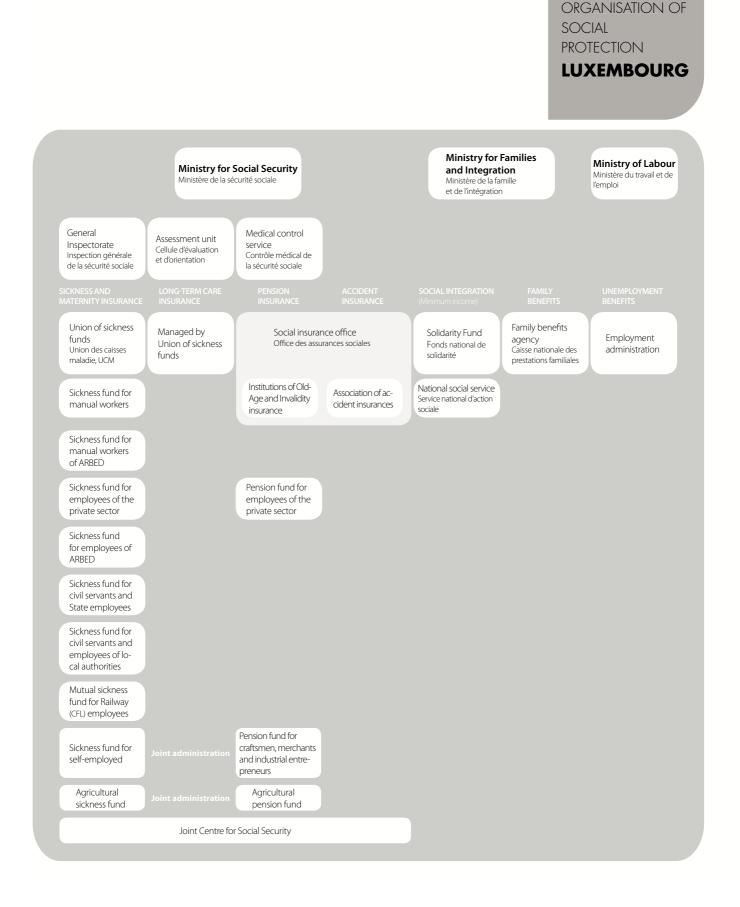
Ministry of Social Security and Labour: Socialinės Apsaugos Ir Darbo Ministerija A. Vivulskio st. 11 - 03610 Vilnius - www.socmin.lt

The State Social Insurance Fund Board: Valstybinio Socialinio Draudimo Fondo Valdyba (SoDra) Konstitucijos av. 12 - 09308 Vilnius - www.sodra.lt

Lithuanian Labour Exchange: Lietuvos Darbo Birža Gelezinio Vilko st. 3a - 03131 Vilnius - www.ldb.lt

Ministry of Health: Sveikatos Apsaugos Ministerija Vilniaus st. 33 - 01119 Vilnius - www.sam.lt

State Patient Fund: Valstybinė Ligonių Kasa Kalvariju st. 147 - 03147 Vilnius - www.vlk.lt



LUXEMBOURG

The system of social protection in Luxembourg has been divided into seven different branches. The administrative organisation reflects the gradual creation of the system and takes account of the different socio-professional categories.

At present there are approx. 20 institutions in the field of social protection, which are public institutions. They are financially autonomous and are managed by the social partners. In the sickness funds for employees, employers and employees are equally represented. In the sickness funds for self-employed the insured of the different occupational groups are represented. The institutions are subject to statutory supervision, which is implemented by the General Inspectorate for Social Security as well as by a hierarchic control carried out by the minister in charge.

In the case of sickness insurance, the Union of Sickness Funds is in charge of all matters that are not expressly delegated to a specific sickness insurance fund: as a result, the Union of Sickness Funds is, among other things, in charge of the implementation of the system of co-payments with regard to health care provision. In addition, the Union deals with relations with health care providers, notably the negotiation and conclusion of collective agreements.

The eight sickness funds enumerated below are responsible for reimbursing health care expenses advanced by the insured, for the flat-rate maternity benefit, the funeral allowance, and, if necessary, the granting of a cash benefit for sickness and maternity. One can distinguish

for the private sector:

- the sickness fund for manual workers;
- the sickness fund for white-collar workers of the private sector;
- the sickness fund for self-employed;
- the sickness fund for the agricultural sector;

for the public sector:

- the sickness fund for civil servants and state employees;
- the sickness fund for civil servants and employees of local authorities;

and for the enterprise funds:

- the sickness fund for ARBED manual workers;
- the sickness fund for ARBED white-collar workers;
- the mutual medical aid fund of the Luxembourg railways.

The Union of Sickness Funds is also in charge of the benefits of the long-term care insurance. A special multidisciplinary agency, Cellule d'évaluation et d'orientation, states the need and decides on the extent (expressed in time) of the necessary measures.

The unique contribution-related pension system is run by four institutions: insurance establishment for old-age and invalidity, pension fund for white-collar workers of the private sector, pension fund for craftsmen, merchants, and industrial entrepreneurs and the agricultural pension fund.

The (Occupational) Accident Insurance Association comprises two departments, the Industrial Section, having general responsibilities, and the Agricultural and Forestry Section, responsible for benefits in the field of agriculture and forestry.

For family benefits there is only one institution responsible - the National Family Benefits Fund.

Unemployment benefits and employment policy is managed by the Labour Administration.

The National Solidarity Fund (and the social offices at the local level) are responsible for social assistance benefits. Within the administration the following restructuring is to be emphasised:

- The Social Security Centre manages the membership and the receipt of contributions for all branches of social security.
- The Medical Control of Social Security is an administration, which has to make decisions and produce assessments for other institutions in the medical field only.
- The Social Insurance Office is an administrative entity including different bodies.

Finally it has to be remarked that in the case of disputes in the field of social protection specific jurisdiction will apply: the Council of Arbitration and the High Council of Social Insurance.

IMPORTANT ADDRESSES

Ministère de la Sécurité Sociale

26, rue Ste Zithe - 2763 Luxembourg - www.etat.lu/MSS

Ministère de la Famille et de la Solidarité 12-14, avenue Emile Reuter - 2420 Luxembourg

Ministère du Travail et de l'Emploi 26, rue Ste Zithe - 2763 Luxembourg - www.etat.lu/MSS

Inspection Générale de la Sécurité Sociale 26, rue Ste Zithe - 2763 Luxembourg

Contrôle Médical de la Sécurité Sociale 125, route d'Esch - 1471 Luxembourg - www.ccss.lu

Centre Commun de la Sécurité Sociale 125, route d'Esch - 1471 Luxembourg - www.ccss.lu

Administration de l'Emploi 10, rue Bender - 1229 Luxembourg - www.etat.lu/ADEM

Union des Caisses de Maladie 125, route d'Esch - 1471 Luxembourg

Etablissement d'Assurance contre la Vieillesse et l'Invalidité 125, route d'Esch - 1471 Luxembourg - www.avi.lu

Caisse de Pension des Employés Privés 1a, bd Prince Henri - 1724 Luxembourg - www.cmep.lu

Caisse de Pension des Artisans, des Commercants et Industriels 39, rue Glesener - 1631 Luxembourg

Caisse de Pension Agricole 2, rue du Fort Wallis - 2714 Luxembourg

Association d'Assurance contre les Accidents 125, route d'Esch - 1471 Luxembourg - www.aaa.lu

Caisse Nationale des Prestations Familiales 1a, bd Prince Henri - 1724 Luxembourg - www.cmpf.lu

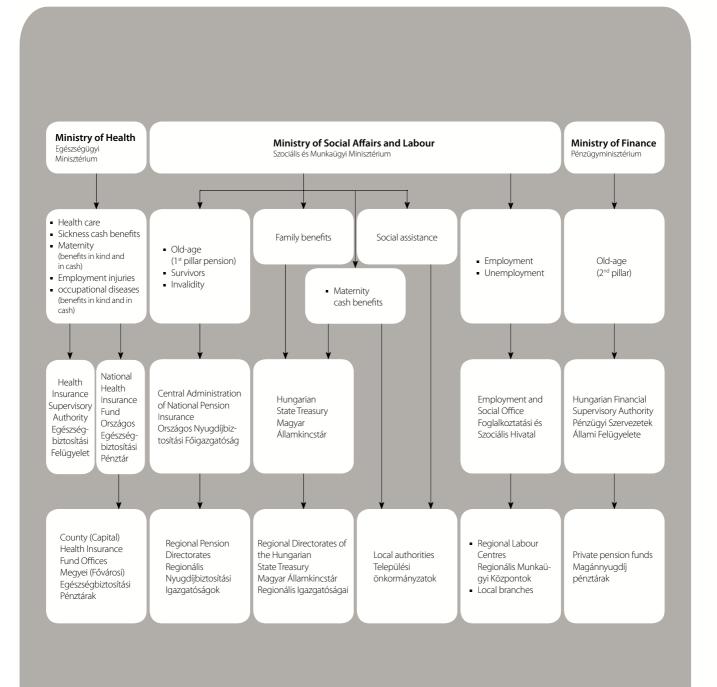
Fonds National de Solidarité 8-10 rue de la Fonderie - 1531 LUXEMBOURG

Conseil Arbitral des Assurances Sociales 16, boulevard de la Foire - 1528 Luxembourg

Conseil Supérieur des Assurances Sociales 2 - 4, rue Bech - 1212 Luxembourg

Cellule d'évaluation et d'orientation 125, route d'Esch - 2974 Luxembourg

ORGANISATION OF SOCIAL PROTECTION **HUNGARY**



HUNGARY

Five Branches of Social Security

There are five main branches of social security in Hungary. Pensions and health services (including the statutory work accident system) are classified as social insurance. The other three branches are the unemployment insurance, the family support system and the social assistance system.

Field of application

Gainfully employed and assimilated persons are insured against all risks: employees (including the public sector), the self-employed (including member of co-operatives), several assimilated groups, and beneficiaries of income subsidy, job-seeker benefit and job-seeker aid or job-seeker aid paid prior to retirement. Various groups of the not gainfully employed population are entitled to health care benefits: Minors permanently resident in Hungary, persons who have fulfilled the minimum retirement age and whose monthly income does not exceed 30% of the minimum wage, homeless people, prisoners, full-time students, pensioners, beneficiaries of various benefits, allowances, or income supports, persons placed in residential institutions providing personal care, restrained persons, persons whose need has been recognised by the local government (including income supports of the unemployed), social supports, persons whose ability to work is reduced at least by 50%. Self-employed persons who perform activities in a complementary way or their joint ventures, and otherwise not insured or entitled native persons are obliged to pay a health care contribution (HUF 4,350 (€ 17) per month). Dependant close family members or their spouses are also obliged to pay health care contribution unless they are socially entitled, which must be justified by the local government (and their obligation can also be undertaken).

Statutory Pension Insurance

The system was comprehensively reformed in 1997. The new system consists of two pillars. The reformed first pillar (which is a downsized version of the former PAYG scheme) remains a mandatory state pension, which is publicly-managed and financed on a PAYG basis. The first pillar pension insurance scheme is supervised by the Ministry of Social Affairs and Labour (Szociális és Munkaügyi Minisztérium) and is managed by the Central Administration of National Pension Insurance (Országos Nyugdíjbiztosítási Főigazgatóság, ONYF) and its regional and local branches. The Pension Payment Directorate, a special body affiliated to the Central Administration of National Pension Insurance, is basically responsible for paying every form of pension benefit to the pensioners (excluding the new 2nd pillar). The new second pillar is mandatory, fully funded and run by several authorised and independent private pension funds which are supervised by the Hungarian Financial Supervisory Authority (Pénzügyi Szervezetek Állami Felügyelete). The new system began operating on January 1, 1998. Various transitional rules gave the chance to join the 2nd pillar until the end of 2003 to all those who entered the labour market between 1998 and 2003 and to those who were born in 1973 or later. Since 1 January 2003, all new entrants into the labour market are obliged to become members of the second pillar.

Statutory Health Insurance

The Ministry of Health (Egészségügyi Minisztérium) is responsible for the health insurance system. Health care services can be received from specified health care providers, including private providers contracted by the National Health Insurance Fund (Országos Egészségbiztosítási Pénztár, OEP). The administration of the mandatory health insurance is fulfilled by the National Health Insurance Fund, the county (capital) health insurance bodies and by the workplace-based social insurance offices. As of January 2007, a newly established governmental office, the Health Insurance Supervisory Authority is tasked with enforcement powers and implementing functions for both in the fields of mandatory and voluntary health insurance sector. It is tasked to ensure legal, smooth and high guality operation of the Hungarian health insurance system, to protect the interests of the insured as well as to enhance careful and effective usage of health insurance contribution payments. Major tasks of the Authority are, inter alia, to control the access to and quality of services as well as service providers' capacities, to check waiting lists, to approve financing contracts, to ensure patients' rights, consumer protection, to investigate complaints, to keep guard over fair competition, to set and adopt price schemes and tariffs.

Unemployment insurance

The unemployment scheme is a typical social insurance type, pay-as-you-go system; it is however managed separately from the National Social Insurance Scheme. There are both active and passive labour market measures to promote employment and to provide for the unemployed. The Ministry of Social Affairs and Labour (Szociális és Munkaügyi Minisztérium) is responsible for the unemployment insurance system. The institutional structure of the Hungarian employment policy system can be divided into two main types: self-governing bodies on the one hand and administrative bodies on the other. The State Employment Service is the administrative body of the employment system. It consists of the National Employment and Social Office (Foglalkoztatási és Szociális Hivatal), Regional Labour Centres, Local Offices of the Regional Labour Centres and Regional Labour Force Development and Training Centres. The self-governing bodies are the National Conciliation Council, the Governing Body of the Labour Market Fund, and Regional Labour Councils.

Family support system

The Ministry of Social Affairs and Labour is responsible for the family benefits. The family support system is a universal system, meaning that every citizen who meets the requirements is entitled. Every citizen who has a child up to a certain age may be entitled to various family support benefits. The family support benefits are paid from the central budget, but practically operated and administered by the Hungarian State Treasury and the National Health Insurance Fund.

Social Assistance

The public social assistance is a non-contributory, means-tested system, which is partly financed by the central budget (90%) and partly from the local governments' own budgets (10%). The social assistance system is managed by the local governments. Various social assistance benefits are granted by the local governments. The Ministry of Social Affairs and Labour is responsible for the supervision.

IMPORTANT ADDRESSES

Ministry of Health: - Egészségügyi Minisztérium Arany János utca 6-8 - 1051 Budapest - www.eum.hu

Ministry of Social Affairs and Labour: Szociális és Munkaügyi Minisztérium Alkotmány u. 3 - 1054 Budapest - 1373 Budapest, Pf. 609. www.szmm.gov.hu

Ministry of Finance: - Pénzügyminisztérium József nádor tér 2/4 - 1051 Budapest - www.p-m.hu

National Health Insurance Fund: Országos Egészségbiztosítási Pénztár, OEP Váci út 73/a - 1139 Budapest - www.oep.hu

Central Administration of National Pension Insurance: Országos Nyugdíjbiztosítási Főigazgatóság, ONYF Visegrádi u. 49 - 1132 Budapest - www.onyf.hu

National Employment and Social Office: Foglalkoztatási és Szociális Hivatal Kálvária tér 7 - 1089 Budapest - www.afsz.hu

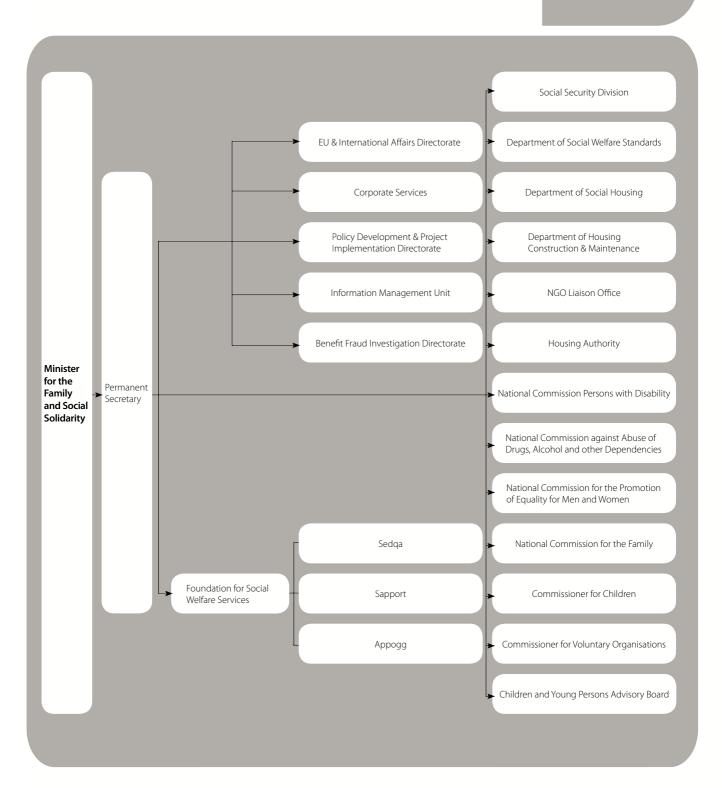
Hungarian Central Statistical Office: Központi Statisztikai Hivatal, KSH Keleti Károly u. 5-7 - 1024 Budapest - www.ksh.hu

Hungarian State Treasury: - Magyar Államkincstár Hold u. 4. - 1054 Budapest - www.allamkincstar.gov.hu

Hungarian Financial Supervisory Authority: Pénzügyi Szervezetek Állami Felügyelete Krisztina krt. 39 - 1013 Budapest - www.pszaf.hu

Health Insurance Supervisory Authority: Egészségbiztosítási Felügyelet (EBF) Teve utca 1/a-c - 1139 Budapest - info@ebf.hu - ugyfelszolgalat@ebf.hu

ORGANISATION OF SOCIAL PROTECTION MALTA



MALTA

Statutory Contribution

The compulsory contribution covers the risks of old age, death, invalidity, industrial injury and occupational disease, and for pensions and supplementary benefits. It also covers children's allowance, social assistance and the services under the Health Scheme. Every person who has passed his sixteenth birthday, but has not yet reached his retirement, shall become insured under this Act either as an employed person or as a self-employed person, or as a self-occupied person if not exempted as stipulated in the provisions of Article 6, and Article 12 (1) of the Social Security Act (Cap 318).

All cash benefits are administered by the Social Security Department (Dipartiment tas-sigurta'socjali) through the 24 district offices (22 in Malta and 2 in the sister island of Gozo).

Supervision

The Ministry for the Family and Social Solidarity (Ministeru ghall-Familja u Solidarjeta' Socjali) is responsible for the supervision of the benefits paid by the Social Security Department; to actively promote, facilitate and contribute to the ongoing development of an inclusive society through the provisions of quality-personalised services and by actively encouraging and assisting individuals, families and community associations to participate in fighting social exclusions, ensuring equal opportunities for all, with specific emphasis on the most vulnerable members of society.

The Ministry of Health, the Elderly and Community Care (Ministeru tas-Sahha, I-Anzjani u I-Kura tal-Komunita') is responsible to provide health care services and the necessary monitoring and control mechanism, to actively promote and contribute to the well-being of the elderly people and the community care.

Ministry for the Family and Social Solidarity

Ministeru ghall-Familja u Solidarjeta' Socjali Palazzo Ferreria - Republic Street - Valletta - www.welfare.gov.mt

Ministry of Health, the Elderly and Community Care Ministeru tas-Sahha, I-Anzjani u I-Kura tal-Komunita' Palazzo Castellania - 15, Merchants Street - VALLETTA - www.health.gov.mt

Social Security Division - Divizjoni tas-sigurta' socjali 38, Ordnance Street - Valletta - www.mfss.gov.mt

Department of Social Housing Dipartiment ghall-Akkomodazzjoni Socjali Block C - Beltissebh - Floriana - www.mfss.gov.mt

Housing Authority - Awtorita' tad-djar 12, Pietro Floriani Street - Floriana - www.mfss.gov.mt

Department for the Elderly & Community Services Dipartiment ghall-anzjani u s-servizzi fil-komunita' 469, St. Joseph High Road -Sta. Venera - www.mfss.gov.mt

National Commission for the Promotion of Equality Kummissjoni nazzjonali ghall-promozzjoni u I-ugwaljanza 2, Cavalier Street - VALLETTA - www.mfss.gov.mt

National Commission Persons with Disability Kummissjoni persuni b'dizabilita 469, St Joseph High Road - Sta. Venera - www.mfss.gov.mt Foundation for Social Welfare Services

Fondazzjoni ghas-servizzi ghall-harsien socjali 2, Braille street - STA. VENERA - www.mfss.gov.mt

Department of Corporate Services -Dipartiment ghas-servizzi korporattivi Ministry for the Family and Social Solidarity Palazzo Ferreria - Republic Street - Valletta - www.mfss.gov.mt

EU & International Affairs Directorate Direttorat (Affarijiet dwar I-Unjoni Ewropeja u Internazzjonali) Ministry for the Family and Social Solidarity Palazzo Ferreria - Republic Street - Valletta - www.mfss.gov.mt

Policy Development & Project Implementation Directorate Ministry for the Family and Social Solidarity Palazzo Ferreria - Republic Street - Valletta - www.mfss.gov.mt

Information Management Unit Ministry for the Family and Social Solidarity Palazzo Ferreria - Republic Street - Valletta - www.mfss.gov.mt

Benefit Fraud Investigation Directorate Direttorat dwar I-investigazzjoni ta' frodi ta' beneficcji 310, Republic Street - VALLETTA - www.mfss.gov.mt

Department of Social Welfare Standards Dipartiment ta' l-istandards fil-harsien socjali

469, St Joseph High Road - Sta. Venera - www.mfss.gov.mt

Department of Housing Construction & Maintenance Dipartiment ghall-kura u I-kostruzzjoni tad-djar Chaplain John Azzopardi Street - Sta. Venera - www.mfss.gov.mt

National Commission for the Family Kummissjoni nazzjonali ghall-familja Ministry for the Family and Social Solidarity Palazzo Ferreria - Republic Street - Valletta - www.mfss.gov.mt

National Commission against Abuse of Drugs, Alcohol and other Dependencies - Kummissjoni nazzjonali dwar l-abbuz tad-droga, lalkohol u dipendenzi ohra - Ministry for the Family and Social Solidarity

Palazzo Ferreria - Republic Street - Valletta - www.mfss.gov.mt

Children & Young Persons Advisory Board Bord konsultattiv dwar it-tfal u z-zghazagh 469, St. Joseph High Road - Sta. Venera- www.mfss.gov.mt

Commissioner for Children Kummissarju ghat-tfal Ministry for the Family and Social Solidarity Palazzo Ferreria - Republic Street - VALLETTA - www.mfss.gov.mt

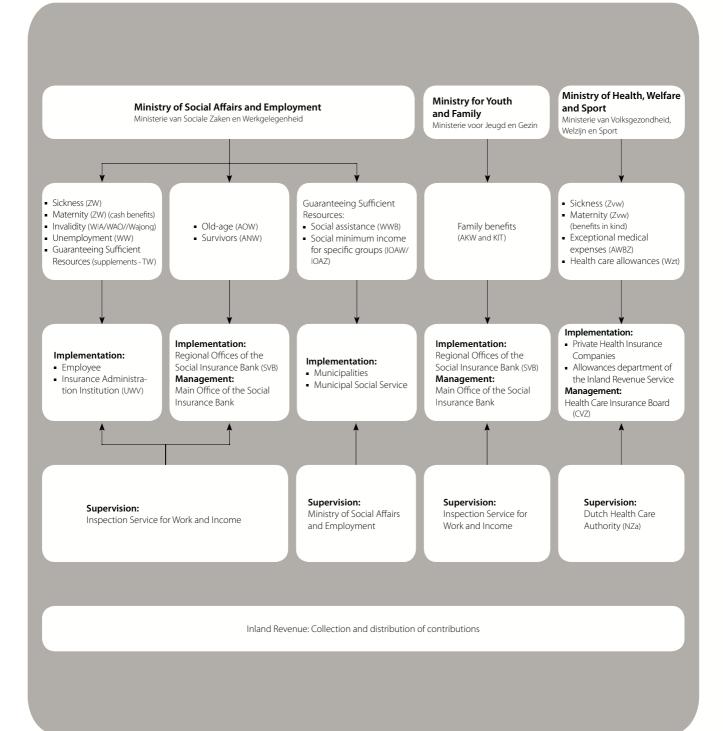
Commissioner for Voluntary Organisations Kummissarju ghall-ghagdiet volontarji Ministry for the Family and Social Solidarity Palazzo Ferreria - Republic Street - VALLETTA - www.mfss.gov.mt

ORGANISATION OF SOCIAL PROTECTION

NETHERLANDS

THE

AKW: General Child Benefits Act. ANW: General Surviving Relatives Act. AOW: General Old Age Pensions Act. AWBZ: Exceptional Medical Expenses Act. IOAW: Act on Income Provisions for Older, Partially Disabled Unemployed Persons. IOAZ: Act on Income Provisions for Older, Partially Disabled Formerly Self-employed Persons. KIT: Act on Child Supplement. TW: Supplementary Benefits Act. Wajong: Disablement Assistance Act for Handicapped Young Persons. WAO: Disablement Insurance Act. WIA: Work and Income According to Labour Capacity Act. WW: Unemployment Benefits Act. WWB: Act on Work and Assistance. Wzt: Health Care Allowances Act. Zvw: Health Insurance Act. ZW: Sickness Benefits Act.



THE NETHERLANDS

Social insurance in the Netherlands is organised jointly by the Ministry of Social Affairs and Employment (Ministerie van Sociale Zaken en Werkgelegenheid) and the Ministry of Health, Welfare and Sport (Ministerie van Volksgezondheid, Welzijn en Sport). Since 2007 the Ministry for Youth and Family (Ministerie voor Jeugd en Gezin) is responsible for the children allowance. A distinction is drawn between national insurance on the one hand, which covers the whole of the population and employees' insurance, on the other, only covering employees. The national insurance schemes provide for:

- insurance for old age,
- maintenance for survivors,
- medical care,
- insurance for exceptional medical costs, and
- children allowance.

The employee's insurance schemes provide for:

- insurance for sick pay,
- insurance for invalidity, and
- insurance for unemployment.

There is an invalidity insurance scheme for young handicapped people. No special insurance for employment injuries or occupational diseases exists; these risks are covered by the other insurance schemes. In addition to this, the State runs a social assistance scheme that is managed by the municipal authorities. This scheme is characterised as a safety-net since its objective is to guarantee minimum income to people who do not or no longer have sufficient resources to cover the necessary costs of living.

With the exception of the insurance for exceptional medical costs and costs for medical care, the national insurance schemes are implemented by the Social Insurance Bank (Sociale Verzekeringsbank).

The Employee Insurance Administration Institution (UWV) is responsible for administering the employees' insurance schemes. The Regional Centres for Work and Income (CWI) are the public employment service. The Inspection Service for Work and Income (IWI) is responsible for monitoring the UWV, SVB and CWI. In order to guarantee sufficient participation of employees, employers and municipalities, the Council of Work and Income (RWI) has been created. The Board of Work and Income advises the Minister for Social Affairs and Employment in the field of work and income. The RWI also subsidises branches and individual companies which stimulate the reintegration of unemployed persons and social security beneficiaries.

Health insurance (medical care) is implemented by private health insurance companies, which are supervised by the Dutch Health Care Authority (Nederlandse Zorgautoriteit).

The general insurance for exceptional medical costs is implemented by private health insurance companies. Supervision is also carried out by the Dutch Health Care Authority (Nederlandse Zorgautoriteit).

IMPORTANT ADDRESSES

Ministry of Social Affairs and Employment: Ministerie van Sociale Zaken en Werkgelegenheid Postbus 90801 - 2509 LV Den Haag - Anna van Hannoverstraat 4

www.minszw.nl

Ministry of Health, Welfare and Sport: Ministerie van Volksgezondheid, Welzijn en Sport

Postbus 20350 - 2500 EJ Den Haag - Parnassusplein 5 www.minvws.nl

Ministry for Youth and Family:

Ministerie voor Jeugd en Gezin Postbus 16166 - 2500 BD Den Haag - Parnassusplein 5 www.jeugdengezin.nl

Social Insurance Bank:

Sociale Verzekeringsbank Hoofdkantoor Postbus 1100 - 1180 BH Amstelveen - Van Heuven Goedhartlaan 1 www.svb.nl

Employee Insurance Administration Institution: UWV

Postbus 58285 - 1040 HG Amsterdam - La Guardiaweg 94-114 www.uwv.nl

Health Care Insurance Board:

College voor Zorgverzekeringen (cvz) Postbus 320 - 1110 AH Diemen - Eekholt 4 www.cvz.nl

Bureau voor Belgische Zaken

Rat Verleghstraat 2 - Postbus 90151 - 4800 RC Breda www.svb.nl

Bureau voor Duitse Zaken

Postbus 10505 - 6500 MB Nijmegen - Takenhofplein 4 www.svb.nl

Council for Work and Income:

Raad voor Werk en Inkomen Postbus 16101 - 2500 BC Den Haag - Oraniestraat 4 www.rwi.nl

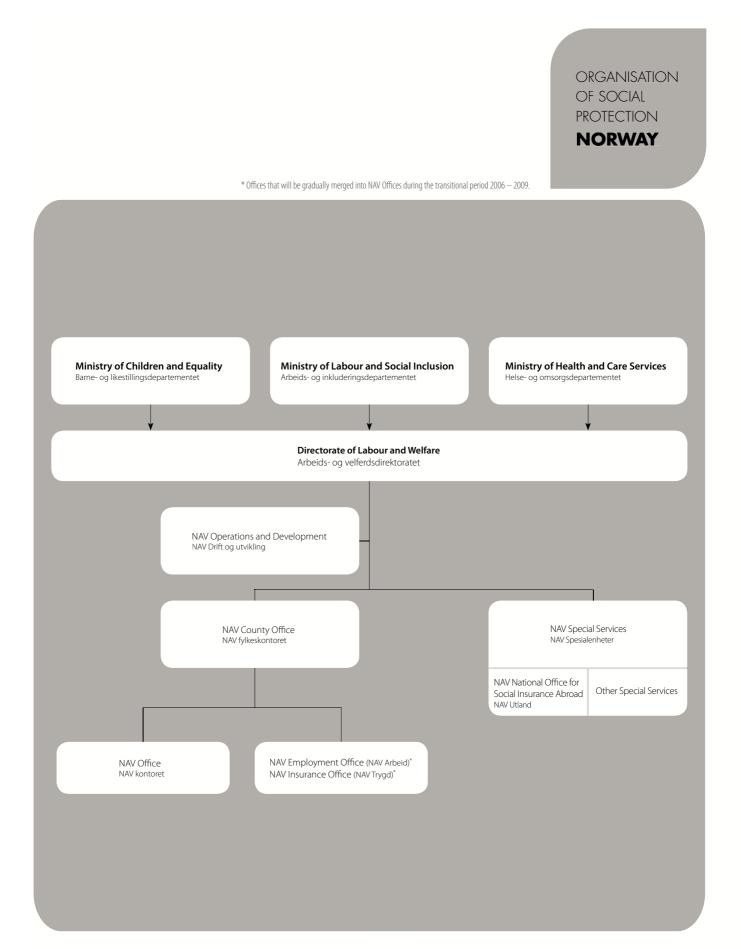
Organisation of sickness insurance companies:

Zorgverzekeraars Nederland Postbus 520 - 3700 AM Zeist www.zn.nl

Dutch Health Care Authority:

Nederlandse Zorgautoriteit

Postbus 3017 - 3502 GA UTRECHT - Moeder Teresalaan 100 www.nza.nl



NORWAY

The National Insurance Scheme (folketrygden) provides compulsory coverage for the whole population, and comprises all branches of social security with the exception of family allowances (barnetrygd) that have a separate statutory basis. As of 1 July 2006, the delivery of benefits of all branches, family allowances included, is administered by the Labour and Welfare Administration (Arbeids- og velferdsetaten), a State run public administration, headed by the Labour and Welfare Directorate (Arbeids- og velferdsdirektoratet), established on the basis of the two former directorates, the National Insurance Administration (Rikstrygdeverket) and the Directorate of Labour (Arbeidsdirektoratet). The Labour and Welfare Administration also handles the area of child support payments, recovery included.

At regional level, there are 19 NAV County Offices (NAV fylkeskontorer) including Workplace Centres (NAV Arbeidslivssentre) set up to help reduce sick leave absence and promote the working life inclusion of older workers and the disabled.

At local level, the Local National Insurance Offices (470 units) (trygdekontor) and the Employment Offices (Aetat) will be gradually merged into a joint front-line service, the NAV Office (NAV-kontoret), during the transitional period 2006-2009. Also social assistance will be incorporated in the joint front-line service (see below).

Units with special functions set up within the former two organisations continue to exist as NAV Special Services (NAV Spesialenheter). Among these units are the Collection Agency (Arbeids- og velferdsetatens innkrevingssentral), the Assistive Technology Centres (NAV Hjelpemiddelsentraler), and the former National Office for Social Insurance Abroad (Folketrygdkontoret for utenlandssaker). The latter, NAV National Office for Social Insurance Abroad (NAV Utland), handles individual cases concerning insured persons and beneficiaries abroad. Details about the organisation including official names of institutions may be subject to changes in the forthcoming process.

The Ministry of Labour and Social Inclusion (Arbeids- og inkluderingsdepartementet) is responsible for the overall functioning of the Labour and Welfare Administration and for most of the branches of social security, the Ministry of Health and Care Services (Helse- og omsorgsdepartementet) is responsible for health services, and the Ministry of Children and Equality (Barne- og likestillingsdepartementet) is responsible for family allowances, cash benefits for small children care, cash maternity benefits and the area of child support payments, with the exception of recovery.

The provision of health care outside of hospitals is a municipal responsibility, whereas hospital treatment generally is the responsibility of the State through 4 Regional Health Enterprises. Both are for their main part financed by taxes.

The National Insurance Scheme is in part financed by social security contributions, both from the employers and the insured, in part by taxes. Some benefits are exclusively financed by taxes, such as family allowances, cash benefit for care of small children, single parent benefits and a few others. With minor exceptions the tax authorities, under the general responsibility of the Ministry of Finance (Finansdepartementet), and headed by the Directorate of Taxes (Skattedirektoratet), are responsible for the collection of social security contributions. The contributions from the insured are deducted from their salary by their employers, as are taxes. The self-employed normally make tax-in-advance payments, contributions included, four times a year.

Social assistance does not fall within the scope of National Insurance. Centrally, it is within the responsibility of the Ministry of Labour and Social Inclusion, but its financial burden falls on the municipalities. At present, social assistance is mainly distributed by municipal Welfare Offices (sosialkontor), but gradually, social financial assistance will be an integrated part of the whole range of services provided by the NAV Offices, in line with the objectives of the abovementioned administrative reform, i.e. making the provision of services more user-oriented and efficient by creating integrated front-line services. Cooperation agreements regarding the provision of subsistence allowance (stønad til livsopphold), as a minimum, and co-location of front-line services are made compulsorily.

IMPORTANT ADDRESSES

Ministry of Labour and Social Inclusion: Arbeids- og Inkluderingsdepartementet PB 8019 Dep. 0030 Oslo www.aid.dep.no

Ministry of Health and Care Services: Helse- og Omsorgsdepartementet PB 8011 Dep.

0030 Oslo www.hod.dep.no

Ministry of Children and Equality:

Barne- og Likestillingsdepartmentet PB 8036 Dep. 0030 Oslo www.bld.dep.no

Directorate of Labour and Welfare: Arbeids- og Velferdsdirektoratet PB 5 St. Olavs plass 0130 OSLO

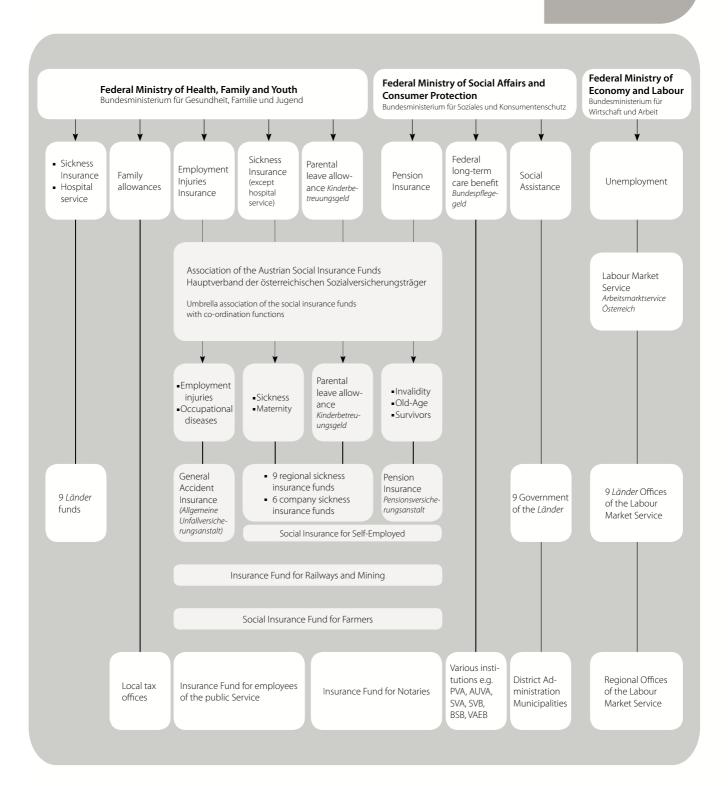
www.nav.no

NAV National Office for Social Insurance Abroad:

NAV Utland PB 8138 Dep. 0033 OSLO www.nav.no

ORGANISATION OF SOCIAL PROTECTION

AUSTRIA



206

AUSTRIA

Sickness, Accident and Pension Insurance

Austrian social insurance includes sickness, accident, and pension insurance. The implementation of social insurance is carried out by 22 insurance funds which are self-governed bodies under public law. Some insurance funds have to administer 2 or all 3 insurance branches. There are 19 sickness insurance funds, 5 pension insurance funds and 4 accident insurance funds. Statutory insurance depends on the occupation performed; there is no choice between the insurance funds for the insured person. Because of historical reasons a territory- and guild-related division can be found in social insurance (with regard to pension insurance see below); there are special insurance funds for railway employees, miners and employees of the public service as well as for farmers, persons engaged in a business or trade and for notaries. Apart from their health-care-related tasks the sickness insurance funds also carry out the contribution collection for accident and pension insurance as well as for unemployment insurance. The sickness insurance funds are also responsible for the payment of child-raising allowance. The provision of health care is primarily provided by contract partners.

All insurance funds are included in the Main Association of Austrian Security Institutions (Hauptverband der Österreichischen Sozialversicherungsträger) which represents the general interests of social insurance - also externally. The association has comprehensive competences in order to be able to better coordinate the activities of Austrian social insurance as a strategy holding. The schemes of sickness insurance and accident insurance are under the supervision of the Federal Ministry of Health, Family and Youth (Bundesministerium für Gesundheit, Familie und Jugend); the pension scheme is supervised by the Federal Ministry of Social Affairs and Consumer Protection (Bundesministerium für Soziales und Konsumentenschutz).

For hospital care, 9 Länder health funds were established to take over the function of the sickness insurance funds.

Unemployment Insurance

Unemployment insurance is run by the Labour Market Service (Arbeitsmarktservice) under the supervision of the Federal Ministry for Economic Affairs and Labour (Bundesministerium für Wirtschaft und Arbeit) (competence in particular for unemployment benefit). The Labour Market Service's Federal Office supervises 9 Länder offices and approx. 100 regional offices.

Family benefits

The Federal Ministry of Health, Family and Youth (Bundesministerium für Gesundheit, Familie und Jugend) and the tax offices directly supervised by this Ministry are the competent authorities to administer family benefits.

Parental Leave Allowance

The Federal Ministry of Health, Family and Youth (Bundesministerium für Gesundheit, Familie und Jugend) and the sickness insurance institutions are the competent authorities.

Long-term Care Allowance

Long-term Care Benefit is granted according to the need for help and care in 7 categories in the form of a partial compensation for care-related additional expenses. Moreover, the Federal State and the Länder have agreed to create a comprehensive system of care in the form of cash benefits and benefits in kind. The payment of care benefit to the pension recipients is assumed by the respectively responsible pension insurance or accident insurance fund. The Länder will grant care benefit to those residents who are not entitled to federal care allowance.

Social assistance

Apart from the above-mentioned branches of social insurance and the care allowance there is social assistance provided by the Länder.

IMPORTANT ADDRESSES

Bundesministerium für Soziales und Konsumentenschutz

Section II (Pension Insurance) Stubenring 1 1010 Wien www.bmsk.gv.at

Bundesministerium für Soziales und Konsumentenschutz

Section IV (Social assistance and long-term care benefit) Stubenring 1 1010 Wien

Bundesministerium für Gesundheit, Familie und Jugend

Section II (Family and youth) Franz-Josefs-Kai 51 1010 Wien www.bmgfj.gv.at

Bundesministerium für Gesundheit, Familie und Jugend

Section I (Central co-ordination, health and sickness insurance legislation, health policies) Radetzkystraße 2 1030 Wien

Bundesministerium für Gesundheit, Familie und Jugend

Section III (Public health care) Radetzkystraße 2 1030 Wien

Bundesministerium für Gesundheit, Familie und Jugend

Section IV (Consumers' health and prevention) Radetzkystraße 2 1030 Wien

Hauptverband der österreichischen Sozialversicherungsträger

Kundmanngasse 21 1031 Wien www.sozialversicherung.at

Bundesministerium für Wirtschaft und Arbeit

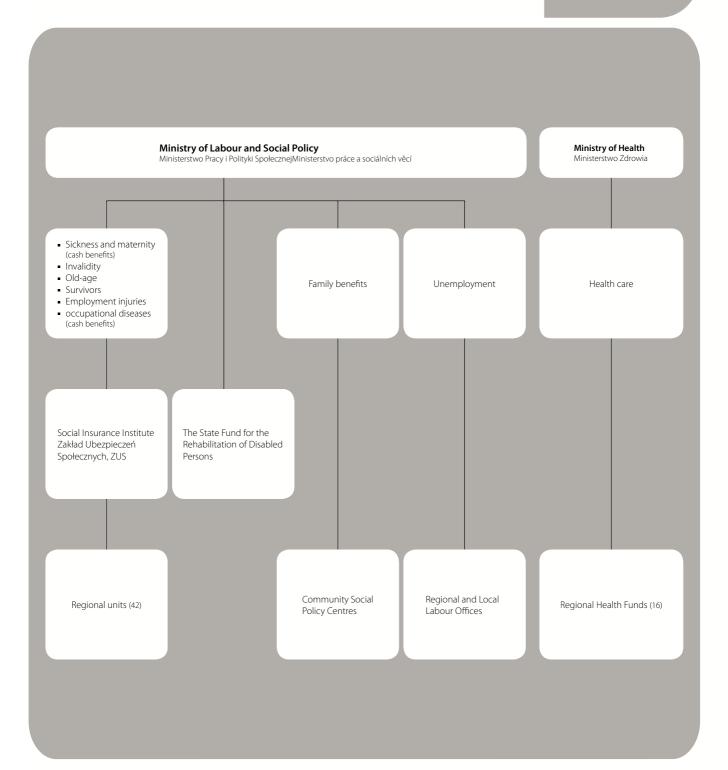
Section II (Labour Market Policy) Stubenring 1 1010 Wien www.bmwa.gv.at

Arbeitsmarktservice Österreich

Treustr. 35 - 43 1200 Wien www.ams.at

ORGANISATION OF SOCIAL PROTECTION

POLAND



POLAND

The social security system is contained within the general framework of the Ministry of Labour and Social Policy (Ministerstwo Pracy i Polityki Społecznej) and the Ministry of Health (Ministerstwo Zdrowia) but the system's legal, administrative and financial organisation is independent from that of these Ministries.

Employees and self-employed persons are covered under the basic scheme.

The following institutions administer the social security schemes:

- Social Insurance Institute (Zakład Ubezpieczeń Społecznych, ZUS) is divided into regional services, which are responsible for sickness and maternity cash benefits and pensions for retirement, invalidity, survivors, employment injuries and occupational diseases. The Social Insurance Institute collects all social security contributions and transfers them to the appropriate organisations. The general mandatory pension system in Poland comprises also open pension funds managed by private financial institutions; these are however subject to a strict monitoring and supervision of the State. The insured do not pay the contributions directly to pension funds but pay them to ZUS together with other social insurance contributions. ZUS is responsible for the transfer of the part of a pension insurance contribution to the pension fund chosen by the given insured.
- Regional health funds are responsible for providing sickness and maternity health care benefits.
- Community Social Policy Centres provide family benefits.
- Local and Regional Labour offices provide unemployment benefits.
- The State Fund for the Rehabilitation of Disabled Persons (Państwowy Fundusz Rehabilitacji Osób Niepełnosprawnych, PFRON) controls disabled person's access to employment and rehabilitation. All rehabilitation and employment programmes, including sheltered work, are financed from levies on employers not meeting the disability quota (funds, which are collected by PFRON).

IMPORTANT ADDRESSES

Ministry of Labour and Social Policy: Ministerstwo Pracy i Polityki Społecznej ul. Nowogrodzka 1/3/5 00-513 Warszawa www.mpips.gov.pl

Ministry of Health:

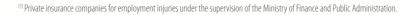
Ministerstwo Zdrowia ul. Miodowa 15 00-952 Warszawa www.mz.gov.pl

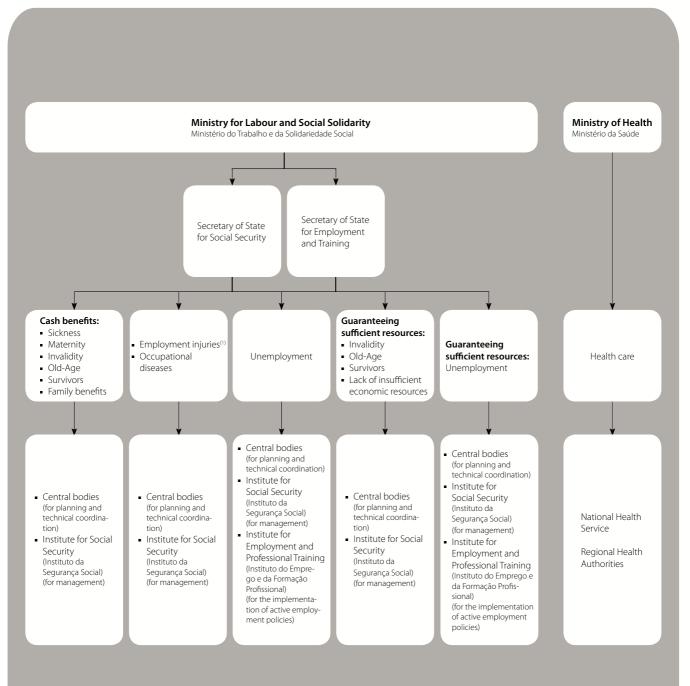
Social Insurance Institute:

Zakład Ubezpieczeń Społecznych (ZUS) ul. Czerniakowska 16 00-501 Warszawa www.zus.pl

The State Fund for the Rehabilitation of Disabled Persons: Państwowy Fundusz Rehabilitacji Osób Niepełnosprawnych (PFRON) ul. J. Pawła II 13 00-828 Warszawa www.pfron.org.pl

ORGANISATION OF SOCIAL PROTECTION **PORTUGAL**





PORTUGAL

The Portuguese system of social protection is an autonomous organisation with respect to legal, administrative and financial duties. It is generally supervised by the Ministry of Labour and Social Solidarity (Ministério do Trabalho e da Solidariedade Social, MTSS).

The structure of this Ministry includes central services integrated in the direct administration of the State, central bodies of the indirect administration, consulting bodies and other structures.

According to the framework law on social protection no. 4/2007 of 16 January 2007, which came into force on 17 January 2007, the social protection system is made up by three different systems:

(1) **The public system of social protection** aims at compensating a loss or reduction of earnings in case of sickness, maternity, paternity, adoption, invalidity, old-age, survivorship, employment injuries and occupational diseases and unemployment. This system includes: the general social security system that covers compulsorily the employees and the self-employed; and the voluntary social insurance system that covers persons qualified for work who are not covered by a compulsory social protection system.

Civil servants and lawyers are covered by special schemes and have their own specific organisations.

(2) The citizenship social protection system aims at guaranteeing basic rights to citizens, equal opportunities and promoting wellness and social cohesion. This system includes: the subsystem of social action to prevent and combat situations of socio-economic poverty, marginalisation and social exclusion; the subsystem of solidarity aiming at protecting persons and families in situations of shortage or with insufficient economic resources or benefits from other social protection schemes; and the subsystem of family protection guaranteeing the compensation of family charges and protection in case of handicap or long-term care.

(3) **The complementary system** consists of: a public funded scheme with voluntary and individual affiliation that aims at delivering benefits complementary to those delivered by the general social protection system; the complementary schemes based on a collective initiative, which are optional and intended for specific groups of people (it includes the professional complementary schemes); and the complementary schemes based on an individual initiative, which are optional, like the retirement savings plans, the life-insurances or other types of insurances.

The financing of the social security system obeys to the principle of diversification of sources, mainly with a view to reduce labour non-wage costs and to the principle of selective suitability that consists in determining the financing sources and allocating the financial resources following the nature and the objectives of the protection schemes.

The social protection system is financed by the employers' and the employees' contributions; the citizenship system is financed by budget transfers from the State and the deposit of revenue.

The management of social security schemes and benefits (contributory or not) and of benefits delivered in the area of social action is guaranteed by the Institute of Social Security (Instituto da Segurança Social).

The institute includes the National Centre for Pensions, which is responsible at national level for the long term benefits management; the National Centre for the Protection against Professional Risks, which is responsible at national level for managing questions related to treatment and rehabilitation from professional diseases or incapacities; the Local Centres of Social Security, which are responsible for implementing and managing measures related to the social security benefits.

The Institute for financial management of the social security is responsible for the financial management of all resources of the system.

Insurance for employment injuries is compulsory for companies; however, insurance is provided by insurance companies supervised by the Ministry of Finance and Public Administration (Ministério das Finanças e da Administração Pública).

Health care is implemented by the National Health Service which is integrated in the Ministry of Health.

The National Health Service exercises its competences on a decentralised basis via regional health authorities in line with the administrative division of the Portuguese territory.

IMPORTANT ADDRESSES

Ministry of Labour and Social Solidarity: Ministério do Trabalho e da Solidariedade Social Praça de Londres, 2/16° 1049-056 Lisboa www.mtss.gov.pt

General Directorate for Social Security:

Direcção-Geral da Segurança Social Largo do Rato, nº 1 1296-144 Lisboa www.seg-social.pt

Institute for Social Security:

Instituto da Segurança Social, I.P. Rua Rosa Araújo, 43 1250-194 Lisboa www.seg-social.pt

General Directorate for Health: Direcção-Geral da Saúde

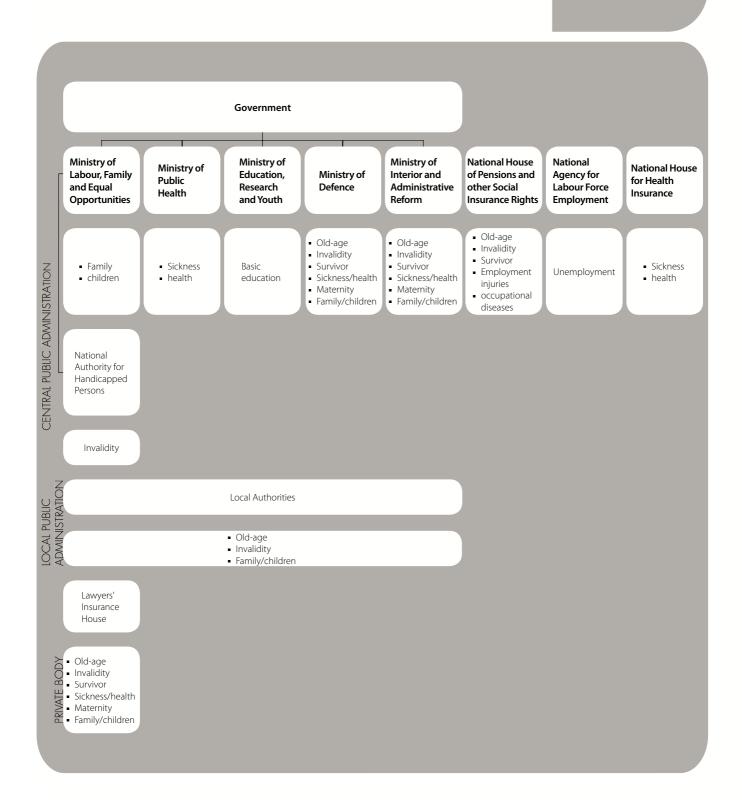
Alameda Afonso Henriques, 45 1000-123 Lisboa www.dgs.pt

Ministry of Finance and Public Administration: Ministério das Finanças e da Administração Pública Av^a, Infante D. Henrique, 1

1149-009 Lisboa www.min-financas.pt

ORGANISATION OF SOCIAL PROTECTION

ROMANIA



ROMANIA

Central public administration

- Ministry of Labour, Family and Equal Opportunities (Ministerul Muncii, Familiei si Egalitatii de Sanse): Implements the Government's policies and strategies in the field of labour, family, equal opportunities, and social protection.
- National Authority for Handicapped Persons (Autoritatea Nationala pentru Persoanele cu Handicap): Public institution under the subordination of the Ministry of Labour, Family and Equal Opportunities. Drafts the policies, strategies and standards in the field of furtherance of persons with disabilities' rights.
- Ministry of Public Health (Ministerul Sanatatii Publice): Coordinates the public health assistance, ensures and coordinates policies, strategies and action programmes in the field of population's health, evaluates and monitors the health population state and takes measures in order to improve it, according to the Government Programme.
- Ministry of Defence (Ministerul Apararii) and Ministry of Interior and Administrative Reform (Ministerul Internelor si Reformei Administrative): Ensure the implementation of the regulations regarding the military pensions and other military's social insurance rights.
- National House of Pensions and other Social Insurance Rights (Casa Nationala de Pensii si alte Drepturi de Asigurari Sociale): Autonomous public institution. Administers and operates the public system of pensions and other social insurance rights, as well as the insurance system for employment injuries and occupational diseases.
- National Agency for Labour Force Employment (Agentia Nationala pentru Ocuparea Fortei de Munca): Autonomous public institution. Applies the policies and strategies on labour force employment and vocational training of persons in job searching.
- National House of Health Insurance (Casa Națională de Asigurări de Sănătate): Autonomous public institution. It manages and administers the health social insurance system with a view to applying the policies and programmes in the sanitary field of the Government.

Local public administration

There are many local authorities responsible for social protection (County Councils, Local Councils).

Private body

 Lawyers' Insurance House (Casa de Asigurari a Avocatilor): Operates the unique, specific and autonomous system of pensions and other social insurance benefits for lawyers.

IMPORTANT ADDRESSES

Ministry of Labour, Family and Equal Opportunities Ministerul Muncii, Familiei si Egalitatii de Sanse 2-4 Dem. I Dobrescu St BUCURESTI www.mmssf.ro

Ministry of Public Health

Ministerul Sanatatii Publice 1-3 Cristian Popisteanu St BUCURESTI www.ms.ro

Ministry of Education, Research and Youth

Ministerul Educatiei, Cercetarii si Tineretului 28-30 Gen. Berthelot St BUCURESTI www.edu.ro

Ministry of Defence

Ministerul Apararii 3-5 Izvor St BUCURESTI www. mapn.ro

Ministry of Interior and Administrative Reform

Ministerul Internelor si Reformei Administrative 1A Piata Revolutiei St BUCURESTI www.mira.gov.ro

National House of Pension and Other Social Insurance Rights Casa Nationala de Pensii si alte Drepturi de Asigurari Sociale

8 Latina St BUCURESTI www.cnpas.org

National Agency for Labour Force Employment

Agentia Nationala pentru Ocuparea Fortei de Munca 3 Sf. Dumitru St BUCURESTI www.anofm.ro

National House for Health Insurance

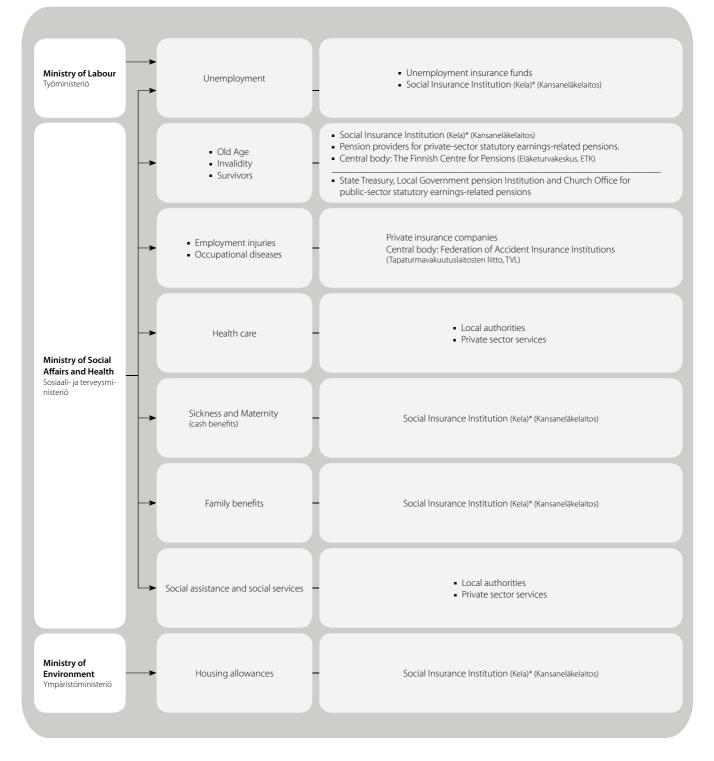
Casa Nationala de Asigurari de Sanatate 248 Calea Calarasi St BUCURESTI www.casan.ro

Lawyers' Insurance House Casa de Asigurari a Avocatilor

3-5 Dr. Dumitru Raureanu St BUCURESTI www.caav.ro

ORGANISATION OF SOCIAL PROTECTION **FINLAND**

* An independent body under the Parliament responsible for the basic benefits.



FINLAND

In Finland all residents are covered by social security schemes which govern basic pensions (national pensions), sickness and maternity benefits and family benefits. In addition, all employed persons are entitled to benefits based on employment, such as statutory earnings-related pensions and benefits for employment injuries and occupational diseases. All residents of municipalities have access to health care and social services.

The Ministry of Social Affairs and Health (Sosiaali-ja terveysministeriö) is responsible for social security in Finland.

Pensions

Finland has two pension systems: The Statutory Earnings-Related Pension Scheme and the National Pension Scheme. The Earnings-Related Pension Scheme provides earnings-related and insurance-based pensions and the National Pension Scheme a complementary minimum pension on the basis of residence. These two pensions together form the total statutory pension. The earnings-related pensions in the private sector are managed by 50 pension providers. If the person has been covered by several different pension acts (has had different pension providers), the last pension provider awards and pays the pension. From 1.1.2004 this principle also concerns the public-sector pension providers. The Finnish Centre for Pensions (Eläketurvakeskus, ETK) is the central body of the scheme. The public sector has its own pension providers. National pensions are administered by the Social Insurance Institution (Kansaneläkelaitos, Kela).

Health care and sickness insurance

The basic responsibility for providing health services lies with the municipalities. All residents of municipalities are eligible for health care. Public health care services are supplemented by private health care. The sickness insurance provides partial compensation for doctor's fees, examination, and treatment given by private sector. Sickness insurance refunds part of the costs of medicines and travelling expenses in connection with both public and private medical care. The sickness insurance also covers sickness, maternity, paternity, and parents' allowances. Sickness insurance is administered by the Social Insurance Institution (Kansaneläkelaitos, Kela).

Unemployment

Unemployment benefits consist of earnings-related allowance, basic allowance, and labour market support. Most employees are covered by their own sector's unemployment fund, in which case they are entitled to an earningsrelated allowance. The allowance is paid by the unemployment fund. The basic allowance and labour market support is paid by the Social Insurance Institution (Kansaneläkelaitos, Kela).

Employment injuries and occupational diseases

All employed persons and farmers are insured compulsory. Other self-employed persons than farmers can take a voluntary insurance. The Employment Accident Insurance Scheme is administered by private insurance companies.

Family benefits

All children (aged 10 months - 6 years) have a subjective right to day care arranged by municipalities.

Child allowance is paid for each child under the age of 17 residing in Finland. The amount of the allowance is linked to the number of eligible children in the family. The allowance is paid by the Social Insurance Institution (Kansaneläkelaitos, Kela).

IMPORTANT ADDRESSES

Ministry of Social Affairs and Health: Sosiaali-ja Terveysministeriö

PL 33 00023 Valtioneuvosto

Ministry of Labour:

Työministeriö PL 34 00023 Valtioneuvosto www.mol.fi

Ministry of Environment:

Ympäristöministeriö PL 34 00023 Valtioneuvosto www.ymparisto.fi www.environment.fi

Finnish Centre for Pensions:

Eläketurvakeskus (ETK) 00065 Eläketurvakeskus www.etk.fi

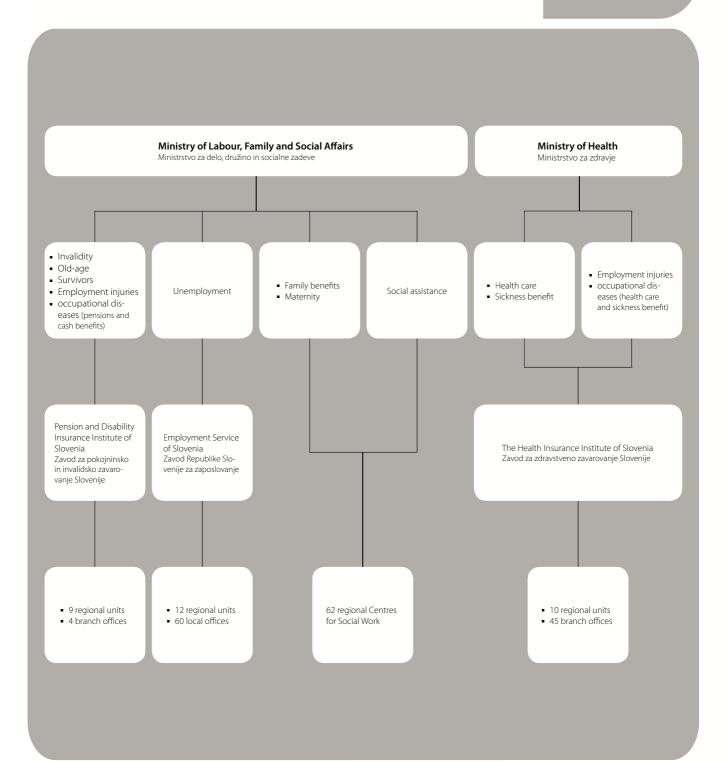
Social Insurance Institution of Finland: Kansaneläkelaitos (KELA)

PL 450 00101 Helsinki www.kela.fi

Federation of accident insurance institutions:

Tapaturmavakuutuslaitosten Liitto (TVL) PL 275 00121 Helsinki www.tvl.fi www.vakes.fi

ORGANISATION OF SOCIAL PROTECTION **SLOVENIA**



SLOVENIA

The Social Security Scheme in Slovenia comprises Pension and Invalidity Insurance, Health Insurance, Unemployment Insurance and Parental Protection Insurance. Insurance is compulsory for all employed and self-employed persons, with the exception of Unemployment Insurance which is voluntary for the self-employed. Insurance is financed through social security contributions paid by the employees and employers.

Compulsory Pension and Invalidity Insurance

Compulsory Pension and Invalidity Insurance covers the risks of old age, death, invalidity, employment injury and occupational disease, insurance for pensions and supplementary benefits. Employees, self-employed persons, farmers and some other categories are compulsorily insured under the standard, uniform scheme. The Pension and Disability Insurance Institute (Zavod za pokojninsko in invalidsko zavarovanje Slovenije) operates through regional units and branch offices, and is self-governed by representatives of trade unions, employers' association, pensioners and the government.

Compulsory Health Insurance

Compulsory Health Insurance covers health services, health care and sickness benefits for diseases and injuries that are unrelated to work as well as employment injuries and occupational diseases. The scheme covers employees, self-employed persons, farmers, recipients of cash benefits (including pensioners) and citizens residing in Slovenia. The Health Insurance Institute (Zavod za zdravstveno zavarovanje Slovenije) operates through regional units and branch offices, and is self-governed by representatives of insured persons and employers.

Unemployment Insurance

Unemployment Insurance provides unemployment benefits for compulsory insured employees. The Employment Service of Slovenia (Zavod Republike Slovenije za zaposlovanje) operates through regional units and branch offices, and is self-governed by representatives of employers' organisations, trade unions, employees of the Employment Service and the government.

Supervision

The Ministry of Labour, Family and Social Affairs (Ministrstvo za delo, družino in socialne zadeve) is responsible for the supervision of the Pension and Disability Insurance Institute and the Employment Service. The Ministry of Health (Ministrstvo za zdravje) defines the programme of health services and care for insured persons with the Health Insurance Institute and representatives of medical institutions and professions.

Other Benefits

Family and social assistance benefits as well as services are granted by local Centres for Social Work (Center za socialno delo). The Ministry of Labour, Family and Social Affairs is responsible for supervision.

IMPORTANT ADDRESSES

Ministry of Labour, Family and Social Affairs: Ministrstvo za Delo, Družino in Socialne Zadeve Kotnikova ulica 5 1000 Ljubljana www.mddsz.gov.si

Ministry of Health:

Ministrstvo za Zdravje

Stefanova 5 1000 Ljubljana www.mz.gov.si

Pension and Disability Insurance Institute

of Slovenia: Zavod za Pokojninsko in Invalidsko Zavarovanje Slovenije Kolodvorska ulica 15 1000 Ljubljana www.zpiz.si

Health Insurance Institute of Slovenia:

Zavod za Zdravstveno Zavarovanje Slovenije Miklošičeva cesta 24 1000 Ljubljana

www.zzzs.si

Employment Service of Slovenia:

Zavod Republike Slovenije za Zaposlovanje Rožna dolina, Cesta IX 6 1000 Ljubljana www.ess.gov.si

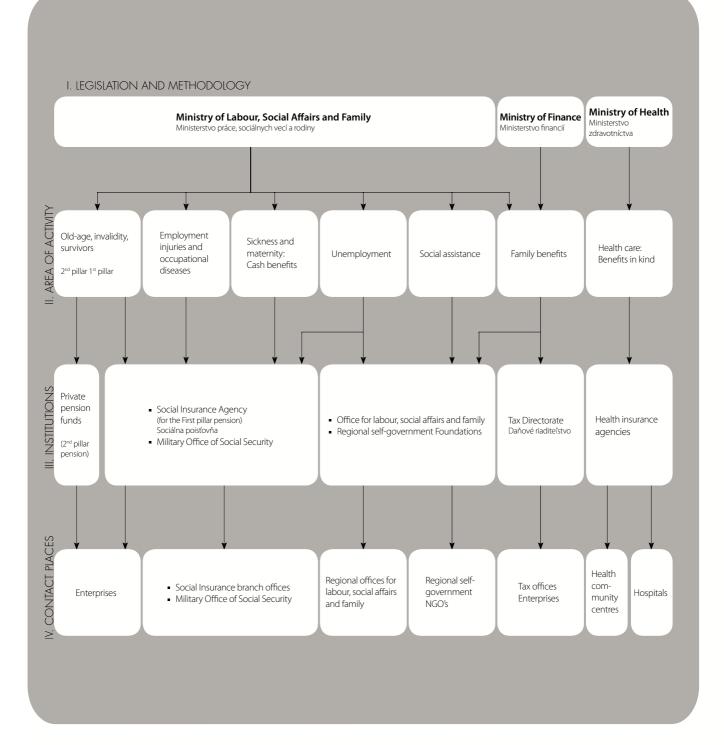
Statistical Office of the Republic of Slovenia: Statistični Urad Republike Slovenije

Vožarski pot 12 1000 Ljubljana www.stat.si

Association of Social Work Centres of Slovenia: Skupnost Centrov Za Socialno Delo Samova 9 1000 Ljubljana

www.gov.si/csd

ORGANISATION OF SOCIAL PROTECTION **SLOVAKIA**



SLOVAKIA

The system of social protection in the Slovak Republic is divided into four branches: the two main branches are health care and social security insurance, the others are state social support for families and social assistance.

Health care

Benefits in-kind are provided under the competence of the Ministry of Health (Ministerstvo zdravotníctva). The compulsory health insurance system covers treatment in health care institutions and certain medicines. It is provided by 6 health insurance agencies, the largest proportion of citizens is insured by the General Health Insurance Agency (Všeobecná zdravotná poisťovňa). The actual provision of health care is entrusted to community health centres, hospitals, policlinics, sanatoria and spas. The social system uses health facilities that are both state and privately owned.

Social security insurance

Cash benefits are financed by contributions and provided under the competence of the Ministry of Labour, Social Affairs and Family (Ministerstvo práce, sociálnych vecí a rodiny) mainly through the Social Insurance Agency (Sociálna poisťovňa), a public body. There is competence of insurance for old-age, invalidity, survivors, sick pay, maternity, unemployment and insurance against damage caused by employment injuries or occupational diseases, financed by current income ("pay as you go"). The Social Insurance Agency has regional branch offices.

A second funded pillar of old-age pension insurance, "Old-age pension saving", has started from January 2005, now provided by 6 private pension funds.

Complementary pension insurance (as a third pillar) is administered by private complementary pension insurance agencies.

The state social support for families

Cash benefits are provided under the competence of the Ministry of Labour, Social Affairs and Family. These benefits are paid through the Office of Labour, Social Affairs and Family (Úrad práce, sociálnych vecí a rodiny). The tax reduction is provided under the competence of the Ministry of Finance (Ministerstvo financií) and administered through tax offices and enterprises.

Social assistance

Cash benefits and benefits in-kind are provided under the competence of the Ministry of Labour, Social Affairs and Family, Ministry of Health and the self-governing municipalities. They are paid to handicapped persons and those in material need. Social assistance is organised through the regional governments, regional offices of the Office of Labour, Social Affairs and Family, municipal offices and non-governmental organisations.

IMPORTANT ADDRESSES

Ministry of Health:

Ministerstvo Zdravotníctva Slovenskej Republiky Limbová 2 Bratislava www.health.gov.sk

General Health Insurance Agency:

Všeobecná Zdravotná Poisťovňa – Riaditeľstvo Mamateyova 17 Bratislava

www.vszp.sk

Ministry of Labour, Social Affairs and Family:

Ministerstvo Práce, Sociálnych Vecí a Rodiny SR Špitálska 6 - 8 Bratislava www.employment.gov.sk

Social Insurance Agency:

Sociálna Poisťovňa – Ústredie Ulica 29. augusta 8-10 Bratislava www.socpoist.sk

Office of Labour, Social Affairs and Family - Headquarters: Ústredie Práce, Sociálnych Vecí a Rodiny

Špitálska ul. 8 Bratislava www.upsvar.sk

Ministry of Finance:

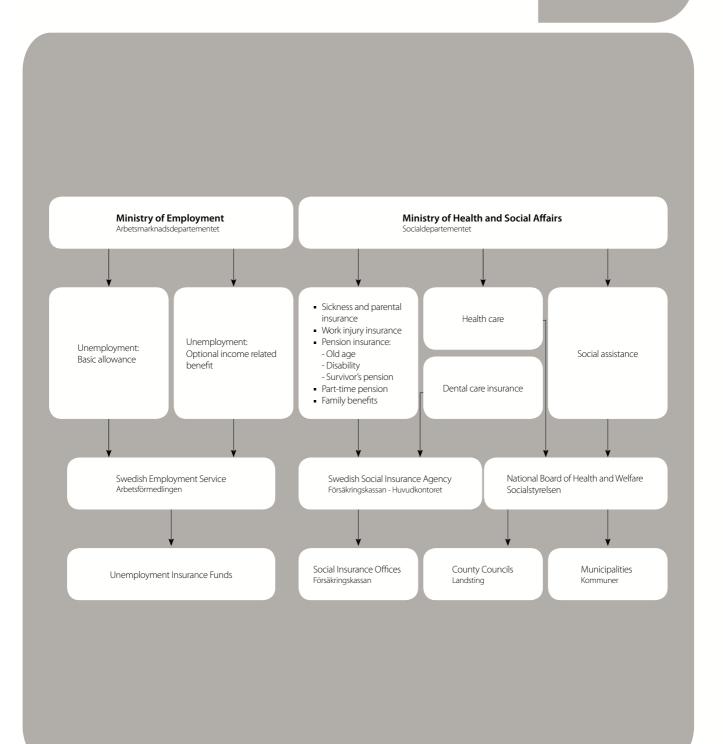
Ministerstvo Financií Štefanovičova 5 Bratislava www.finance.gov.sk

Tax Directorate: Daňové Riaditeľstvo

Nová ulica č. 13 Banská Bystrica www.drsr.sk

ORGANISATION OF SOCIAL PROTECTION

SWEDEN



SWEDEN

The Swedish social security system, except for unemployment insurance, comes under the jurisdiction of the Ministry of Health and Social Affairs (Socialdepartementet). The basic parts of the insurance cover sickness and parental insurance (sjuk- och föräldraförsäkring), old-age pension (ålderspension), survivors' pension (efterlevandepension), sickness/activity compensation (sjuk- och aktivitetsersättning), part-time pension (delpension) and work injury insurance (arbetsskadeförsäkring).

Under the Social Insurance Act, social insurance is divided into a domicilebased insurance providing guaranteed amounts and benefits and a workrelated insurance against loss of income. Both categories apply equally to everyone who is habitually resident or works in Sweden. Swedish citizenship is no longer one of the conditions of the insurance.

The Swedish Social Insurance Agency (Försäkringskassan) is responsible for the administration of social security. The administration is undergoing a reorganization. In the end of 2008 it will be organised in 20 national insurance centres, 60 local insurance centres and 300 local offices.

Swedish social insurance is financed mainly by employers' contributions. Insured persons' contributions have recently been introduced to finance part of the old-age pension scheme. Contributions cover three-quarters of all insurance expenditure. The rest is financed by yield from funds and by taxes via the State Budget.

Health care is a responsibility for the county councils in Sweden with a taxation right of their own.

The unemployment insurance comes under the jurisdiction of the Ministry of Employment (Arbetsmarknadsdepartementet). It consists of two parts: a basic allowance and optional income-related benefit. The basic allowance covers persons over 20 years of age who are not optionally insured. Both parts are mainly financed by contributions from the employer. The optional income-related benefit is voluntary but members of different trade unions collectively join the insurance.

Social assistance which is not considered a part of social insurance in Sweden, comes under the jurisdiction of the Ministry of Health and Social Affairs. It is supervised by the National Board of Health and Welfare (Socialstyrelsen). The local administration of social assistance, including care and service for children and families, care for elderly and handicapped, is a responsibility for the municipalities. It is financed mainly through local taxation.

IMPORTANT ADDRESSES

Ministry of Health and Social Affairs: - Socialdepartementet 103 33 Stockholm - www.social.regeringen.se

Ministry of Employment: - Arbetsmarknadsdepartementet 103 33 Stockholm - www.arbetsmarknad.regeringen.se

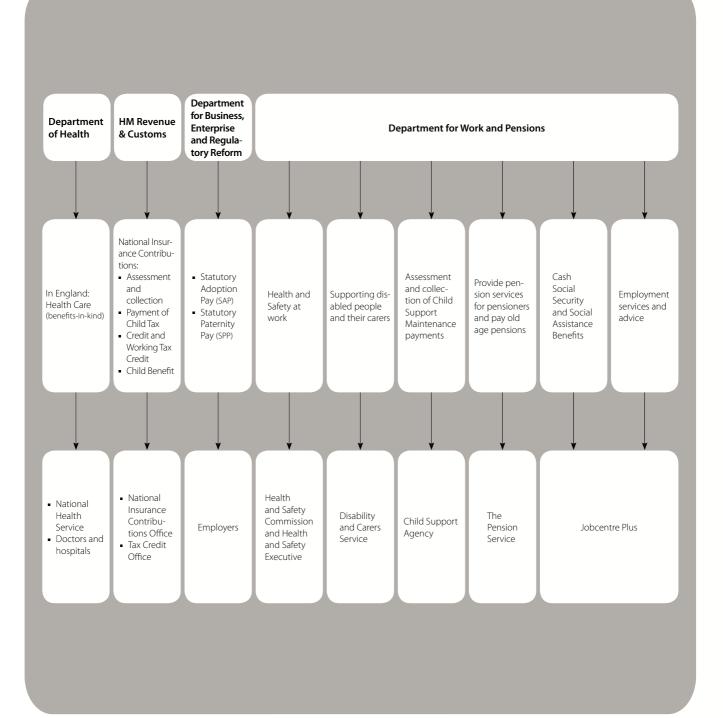
Swedish Social Insurance Agency: - Försäkringskassan 103 51 Stockholm - www.forsakringskassan.se

Swedish Employment Service: - Arbetsförmedlingen 113 99 Stockholm - www.ams.se

National Board of Health and Welfare: - Socialstyrelsen 106 30 Stockholm - www.sos.se

ORGANISATION OF SOCIAL PROTECTION

UNITED KINGDOM



UNITED KINGDOM

A comprehensive state administered social security scheme covers the entire population. It consists of contributory, non-contributory and income-related benefits 1. Contributory benefits and their administration are funded by the National Insurance (NI) Fund, which is financed by compulsory contributions based on current income and paid by most workers and employers. The benefits cover old age, survivors, sickness, maternity, and unemployment and are predominantly flat rate. An earnings related component can be paid with some, notably Retirement Pension. Non-contributory benefits are financed from general taxation and are dependent on individual circumstances (e.g. disability, children). Income-related benefits such as Housing Benefit, Income Support (for people who are not working) and Pension Credit are also funded from general taxation and act as a safety net. The National Health Service (NHS) provides universal health care, which is financed from taxation and the NI Fund and is not dependent on a contribution record.

The Department for Work and Pensions (DWP) and its business units are responsible for delivering the Government's welfare reform agenda. Its aim is to promote opportunity and independence for all. In pursuing this aim the Departments objectives are to reduce child poverty, help customers become financially independent, promote security and independence in retirement, improve rights and opportunities for disabled people and modernise welfare delivery. The work of the main business units is shown below:

- Jobcentre Plus provides an integrated service to people of working age, helping them move into work and supporting those who cannot. It helps employers fill job vacancies.
- The Pension Service provides a service for current and future pensioners. It provides state financial support to pensioners. It also helps people plan and provide for retirement.
- The Disability and Carers Service supports disabled people and their carers. It is responsible for the administration of disability benefits and the disability rights agenda.
- The Child Support Agency administers the child maintenance system and ensures that parents who live apart meet their financial responsibilities to their children.
- The Rent Service provides a rental valuation service for housing benefit purposes, fair rent valuation for landlords and tenants and advice to customers within the public and private sectors.
- The Health and Safety Executive protects people's health and safety by ensuring risks at work are properly controlled.
- Debt Management provides a debt management service to DWP, from overpayment calculation through to recovery of debt.

The HM Revenue and Customs is responsible for the collection and recording of contributions and the assessment and payment of tax credits for families with dependent children and working people on low incomes. It also administers Child Benefit and Guardian's Allowance. Local authorities administer Housing Benefit and Council Tax Benefit. The Department for Business, Enterprise and Regulatory Reform is responsible for developing policy and legislation on parental leave and pay. Employers are responsible for paying Statutory Sick Pay, Statutory Maternity Pay, Statutory Paternity Pay and Statutory Adoption Pay.

National Health Service authorities are funded to secure health services for their local population through contracts with NHS Trusts and other service providers and professionals. Social care services are provided or purchased by local authorities within a financial and legislative framework determined by the Health Ministry.

Employed earners currently paying National Insurance contributions have to contribute towards help for those who cannot provide for their own needs. However, the Government is keen that they should be able to make additional provision for themselves privately. A key area of private provision is retirement

pensions. Supplementary pensions may be provided through an employer's occupational scheme or a personal arrangement with a financial institution. Providing certain conditions are met, this additional pension can supplant the earnings-related component of an individual's state pension, with a corresponding partial reduction or refund of NI liability to the benefit of the chosen scheme. Occupational and personal pension schemes operate within a regulatory framework determined by Parliament. Individuals may choose to subscribe to private medical insurance, or employers may offer to meet the cost of private treatment.

IMPORTANT ADDRESSES

Department For Work And Pensions

The Adelphi 1-11 John Adam Street London WC2N 6HT

and

Caxton House Tothill Street London SW1H 9NA www.dwp.gov.uk

Department for Children, Schools and Families

Sanctuary Buildings Great Smith Street London SW1P 3BT www.dcsf.gov.uk

Department for Innovation, Universities and Skills

Kingsgate House 66/67 Victoria Street LONDON SW1E 6SW www.dius.gov.uk

Department of Health

Richmond House 79 Whitehall London SW1A 2NS www.doh.gov.uk

Department for Business, Enterprise and Regulatory Reform

1 Victoria Street London SW1H OET www.berr.gov.uk

HM Revenue & Customs

Somerset House Strand London WC2R 1LB www.hmrc.gov.uk

¹The position in Great Britain is described; similar arrangements apply in Northern Ireland.

ANNEX 3 Social protection of the self-employed



In Belgium a special system covers all self-employed persons against all classical risks, with the exception of employment injuries, occupational diseases and unemployment, and also provides for national insurance in case of bankruptcy.

+ Financing

This system, subject to global management, is financed at 63% by contributions, at 36% by taxes and at 1% by other sources.

A global national insurance contribution, with a progressive amount is paid for all branches of social welfare. A minimum and maximum contribution is stipulated.

+ Sickness and maternity: Benefits in kind

As of 1 January 2008, self-employed persons and their family members are compulsorily insured against both "minor" and "major risks". The selfemployed and their dependants thus enjoy the same entitlements and reimbursement in health care as employed persons and civil servants.

+ Sickness and maternity: Cash benefits

Insurance is compulsory for the self-employed person as well as for the assisting spouse. The right to benefits is applied after a qualifying period of 6 months. In addition, for sickness benefits, a 1-month waiting period exists. Financial compensation is then granted for 11 months maximum (primary incapacity), the amount depending on whether or not there are dependants. Self-employed women and women assisting a self-employed person are entitled to maternity leave for an uninterrupted period of 8 weeks (9 in case of multiple births). There is no obligation to use up all weeks of maternity leave. However, 6 weeks (7 in case of multiple births) constitute a minimum. During the period of maternity leave, the beneficiaries are entitled to a flat-rate amount of \in 354.06 per week. Maternity benefit takes the form of a single payment and is granted by the sickness fund in the month following the end of the maternity rest.

+ Long-term care

No specific legislation exists on dependence, but certain benefits are stipulated notably in legislation relating to health-disability insurance and to a guarantee to resources.

+ Invalidity

Insurance is compulsory for the self-employed person as well as for the assisting spouse. Benefits are paid from the end of the primary incapacity benefits until retirement age. The amount varies depending on the family situation: whether or not there are dependants, single person or cohabitant.

+ Old-age

The retirement pension system of self-employed persons is compulsory for self-employed persons and for assisting spouses born at earliest on 1 January 1956 (otherwise contributing to this system is voluntary). Theoretically, retirement age is 65. Early retirement is possible, provided that the worker can prove a career of 35 years (any system). Moreover, in the case of men, the amount of the pension is reduced by 5% per year when the retirement starts before the age of 61, by 4.5% per year when the retirement starts af-

ter the age of 61 and before 62, by 4% per year when the retirement starts after the age of 62 and before 63, by 3.5% per year when the retirement starts at the age of 63 and before 64, and by 3% when the retirement starts at the age of 64 and before 65. For women, the amount of the pension is reduced by 4.5% when the retirement starts before the age of 61, by 4% when the retirement starts after the age of 61 and before 62, by 3.5% when the retirement starts after the age of 62 and before 63, and by 3% when the retirement starts after the age of 61 and before 62, by 3.5% when the retirement starts after the age of 62 and before 63, and by 3% when it starts after the age of 63. As from 1 January 2009, the reduction for early retirement will be the same both for women and men. However, the amount of the pension is not reduced if the worker can prove a career of 44 calendar years. The amount of the retirement pension depends on the professional career and the incomes due throughout this career.

+ Survivors

Compulsory insurance also includes benefits for survivors. The rule is that the spouse married to a self-employed person for at least one year may receive a survivorship pension from the age of 45. It amounts to 80% of the retirement pension of the deceased when it has been calculated according to the professional income. If the deceased did not yet receive a retirement pension, the amount of the survivorship pension is calculated according to the career of the insured. The benefits are paid for life, except in case of remarriage.

+ Employment injuries and occupational diseases

No protection system exists for the self-employed.

+ Family benefits

The special system for all self-employed persons is compulsory for self-employed persons and for assisting spouses born at earliest on 1 January 1956 (otherwise it is voluntary), and also includes family benefits. The benefits consist of regular flat-rate benefits (adjusted according to age) and single flat-rate benefits at birth and adoption. Special amounts are stipulated for orphans, disabled children and children of disabled persons. The benefits are granted starting from birth or at the time of adoption until 31 August of the calendar year in which the child reaches the age of 18. Other age limits apply for the disabled (21 years old) and children following training or doing studies (until the age of 25). As of 1 January 2007, a supplement is provided, under certain conditions, to former unemployed persons who engage in self-employed activities. Likewise, as of 1 May 2007, a supplement is also provided, subject to certain conditions, to single parent families.

+ Unemployment

No protection system exists for the self-employed.

+ Social insurance in case of bankruptcy

Social insurance in case of bankruptcy allows the self-employed retailer (in case of bankruptcy) or the self-employed non-retailer (in case of receipt of a debt settlement plan), to receive financial aid for a period of 12 months in case of bankruptcies declared as of 1 July 2007. The aid equals the monthly amount of the minimum pension, i.e. \in 1,081.91 for entitled persons with at least one dependant or \in 814.91 for single beneficiaries.

BULGARIA

+ Basic principles

As self-employed persons according to the Bulgarian legislation can be defined:

- Persons, registered as free-lance professionals and/ or craftsmen;
- sole entrepreneurs, proprietors and co-proprietors of companies;
- registered farmers and tobacco planters.

They are compulsory insured against invalidity due to general disease, against old-age and death. The insurance against these risks guarantees accumulation of periods of insurance for the purposes of granting old-age pension, invalidity pension, survivor's pension or death grant. Pensioners who are self-insured as well are exempted from compulsory insurance.

On optional basis the self-insured persons may insure themselves against general disease and maternity as well.

The self-employed persons are obliged to make social insurance contributions entirely on their own account on a monthly contributory income, within the minimum and the maximum monthly amount of the insurable income determined by the Public Social Insurance Budget Act for the respective year. The contributions amount is to the same portion of gross monthly individual income as in the general schemes.

For 2008 the minimum monthly amount of the insurable income for selfemployed is BGN 240 (\in 123); minimum for farmers and tobacco producers – BGN 120 (\in 61) and maximum for all categories of insured persons – BGN 2,000 (\in 1,023). The final insurable income is equalised according the individual tax return during the following year. Contributions are paid as long as the lucrative activity lasts.

No difference to the standard schemes exists in relation to benefits, including the non-contributory provisions.

SWITZERLAND

+ Basic principles

In Switzerland, there is no special scheme for the self-employed. They are insured for all risks either on a compulsory basis (due to their domicile or gainful employment in Switzerland) or may be insured on a voluntary basis. Only unemployment insurance excludes them.

+ Financing

Concerning family allowances, there is a federal scheme for self-employed farmers financed by the public authorities (Confederation: 2/3 and cantons: 1/3). For the other self-employed, the cantonal schemes are applicable. Some of these provide benefits for the self-employed, partially financed by the self-employed themselves.

The ordinary rules are applicable for the other branches of social security, except for employers' contributions, of course.

+ Sickness and maternity: Benefits in kind

Insurance is compulsory for all persons domiciled in Switzerland.

+ Sickness and maternity: Cash benefits

Sickness:

Insurance is optional: any person domiciled or gainfully employed in Switzerland, aged between 15 and 65, may take out insurance.

Maternity:

Women engaged in paid employment (employees and self-employed) are insured for the maternity allowance of the income compensation allowance scheme (APG scheme).

+ Long-term care

No special scheme. Benefits are provided by several branches of social security.

+ Invalidity, old-age and survivors

1st pillar (basic scheme):

Insurance is compulsory for all persons domiciled or gainfully employed in Switzerland.

2nd pillar (statutory minimum):

Insurance is compulsory only for employees and only above a certain salary threshold. The self-employed may take out insurance on a voluntary basis. The provisions for compulsory insurance apply by analogy to optional insurance.

+ Employment injuries and occupational diseases

Insurance is compulsory only for employees. The self-employed domiciled in Switzerland may take out insurance on a voluntary basis. The provisions for compulsory insurance apply by analogy to optional insurance.

+ Family benefits

Federal scheme:

Self-employed farmers are entitled to child allowances on the same conditions as agricultural workers. The monthly child allowance amounts to:

- CHF 190 (€ 114.95) per child, in lowland regions;
- CHF 210 (€ 127.05) per child, in mountain regions.

Cantonal schemes:

Eleven cantons pay family allowances to the self-employed not involved in agriculture. In principle, the types and amounts of the benefits are governed by the same rules as those applied to agricultural workers. In principle, payment of these allowances is subject to means testing.

In seven cantons, self-employed farmers receive family allowances supplementary to those provided under the federal scheme.

+ Unemployment

The self-employed have no possibility of insurance.

CZECH REPUBLIC

+ Basic principles

The Czech social security system is in principle uniform for employees and the self-employed. The foundations of the current insurance system applicable to the self-employed were laid in 1990 by adopting the definition of the self-employed (until then, a special category incorporated farmers, people providing services under a special licence issued by local governments, and artists) and the payment of the premium (for social security and the state employment policy) by the self-employed (until then, only farmers paid premiums).

Like all residents, self-employed persons are compulsorily covered for health care (benefits in kind in case of sickness and maternity). The selfemployed persons without permanent residence from states outside the EU are not compulsorily covered under public health insurance system. The sickness insurance (cash benefits) is not compulsory for the self-employed, but they may join on a voluntary basis. The Basic Pension Insurance (Důchodové pojištění) for old-age, survivor's and invalidity pensions are compulsory. The self-employed are also protected in case of unemployment. As all residents, self-employed persons are entitled to non-contributory tax-financed benefits like family allowances.

Special rules are applicable for the self-employed concerning the assessment base for the social security premium and the state employment policy contribution.

The self-employed are divided into two groups: "full time" self-employed and "part time" self-employed (since 1 January 2004). "Part time" selfemployed parallel works as self-employed and employees (earning at least minimum wage) at the same time or those self-employed who received invalidity or old-age pension. The other self-employed are " full time" self-employed.

+ Financing

Health care, sickness and maternity cash benefits, pensions and unemployment benefits are financed by contributions. The contribution rates of the self-employed amount to 13.5% for health care, 4.4% for sickness cash benefits (optional insurance), 28% for pensions (invalidity, old-age and survivors), and 1.6% for unemployment (State Employment Policy), of the applicable assessment base.

For the health care insurance premium, the assessment base is 50% of their income from business and from other independent gainful activity minus costs incurred in order to achieve, secure and maintain such income. The minimum premium base is 12 multiplied by 50% of the monthly average salary (per annum).

The maximum premium base is 48 multiplied by monthly average wage (CZK 1,034,880 (${\rm \leqslant}$ 39,254)) per annum.

For pension and the State employment policy contributions, the assessment base is established by the self-employed within the brackets between the minimum and the maximum amounts applicable. The minimum assessment base is 50% of the difference between their income and their expenses. If such established minimum assessment base for "full time" self-employed is less than 50% of half of average wage, the minimum assessment base is in 2008 CZK 5,390 (€ 204) monthly. The minimum assessment base for "part time" self-employed is 10% of the average wage (in 2007 CZK 2,156 (\in 82) monthly). The maximum premium base is 48 multiplied by monthly average wage (CZK 1,034,880 (\in 39,254)) per annum.

Family benefits are tax financed.

+ Health care

Self-employed persons are entitled to the same benefits as all permanent residents. The self-employed persons without permanent residence from states outside the EU are not compulsorily covered under public health insurance system.

+ Sickness and maternity - cash benefits

Voluntary insured self-employed persons are entitled to the same earningsrelated (depending on the assessment base) benefits as all other insured.

+ Invalidity, Old-age, survivors

Pensions are calculated according the general rules.

+ Employment injuries

No social insurance scheme for the self-employed.

+ Family benefits

Universal non-contributory scheme. Self-employed persons are entitled to the same benefits as all permanent residents.

+ Unemployment

For the job seeker whose last activity before his inclusion in the job seekers list was independent gainful activity and who participated in the old-age pension insurance as a person performing independent gainful activity, the amount of his unemployment benefits shall be calculated from his last base for the assessment of the premium for age-old pension and the state employment policy contribution. For the first 3 months of the period of support, the percentage rate for unemployment benefit shall be set at 50% and for the remaining period of support 45% of the assessment base. The percentage rate of retraining allowance shall be set at 60% of the assessment base. If the base for assessment cannot be established, the unemployment benefit shall be a fixed multiple (0.12 times during the first three months, 0.11 times during the remaining time of receipt of benefits and 0.14 times during the time of retraining) of the national average earning in the period from 1st quarter to 3rd quarter of the calendar year preceding the calendar year in which the unemployment benefit was claimed or in which the job-seeker started retraining.

+ Social services

Social services are financed from multiple sources - by the State budget (care allowance to persons and grants to providers), by regions' budget (grants) and by private funding (pocket money, sponsorship).



In Denmark the social protection system is based on the principle of national insurance. Persons covered are not defined according to their social situation and the general system does not operate on the principle of distinction between the employed and the self-employed. Consequently, selfemployed persons receive the social protection of the general system.

+ Financing

Financing is carried out according to the regulations of the general system.

+ Sickness and maternity: Benefits in kind

Granting benefits is based only on residence in Denmark. The self-employed thus receive the same benefits as the employed.

+ Sickness and maternity: Cash benefits

The self-employed and their assisting spouses are also integrated into the general system for sickness benefits. However, they must meet certain conditions applied only to their category. For example, they must have exercised a self-employed activity of a certain importance and for a period of 6 months during the last 12 months. Furthermore, contrary to the employed (who receive benefits from the first day of sickness), a deferred period of 2 weeks is stipulated (they nonetheless have the chance to subscribe to voluntary insurance for this period).

The self-employed receive the same maternity benefits as the employed.

+ Long-term care

Self-employed workers are entitled to the same benefits as employees since this scheme is universal and benefits are granted according to the only condition of residence in a Danish municipality.

+ Invalidity

Residence in Denmark and Danish nationality are the only conditions to receive invalidity benefits. As a rule, the same regulations apply for the self-employed and the employed.

+ Old-age

Old-age protection includes two systems: social pension and supplementary pension (ATP). As the place of residence and nationality also determine the granting of social pension in this case, this pension therefore does not make a difference between the employed and the self-employed. These workers thus receive the same protection, which is also valid for certain special regulations of partial pension. On the other hand, supplementary pension (ATP) is a special insurance system for the employed. The selfemployed have access only if, after exercising a salaried activity with a minimum of three years of contributions, they have voluntarily opted to continue the insurance.

+ Survivors

Due to the fact that each Danish citizen residing in Denmark is part of the national insurance system, no specific protection is stipulated in the form of survivor's pension. A specific protection exists only in the system of supplementary pension (ATP) which concerns only the employed. Protection

for the self-employed exists only for previous employed activity followed by voluntary insurance.

+ Employment injuries and occupational diseases

As regards employment injuries and occupational diseases, self-employed workers are optionally protected as per 1 January 2004.

+ Family benefits

Family benefits are granted to the self-employed as well as to the employed.

+ Unemployment

Unemployment insurance is voluntary. The self-employed have their own unemployment funds. Thus, they have the same right to benefits as the employed, but with a waiting period of 4 weeks.





In Germany there are special provisions for self-employed craftsmen and retailers within the scope of the general system, and there are independent social security systems for farmers (including assisting family members), self-employed artists and publicists and the special schemes for the members of the professions, which have the right to form associations.

AGRICULTURE

+ Financing

Health insurance of working farmers is almost totally financed from contributions, with contributions assessed on the basis of surface values and laid down in 20 contribution categories. The benefits granted to non-active members that are not covered by their own contributions are funded from tax revenues. The share of tax revenues amounts to approx. 55% for the system as a whole. As of 2005 the working farmers will increasingly contribute to financing the benefits granted to non-active members.

Such risks as invalidity, old age and survivors are financed through a special system (old-age insurance for farmers) with 75% from tax revenues and 25% from flat-rate contributions. Unlike the general pension insurance scheme, the old-age insurance for farmers offers only a partial coverage: average contributions and benefits amount to less than half of those from the general scheme.

67.4% of the expenses under the schemes for employment injuries and occupational diseases are financed by contributions, 21.1% from taxes and 11.5% from other sources. Contributions are generally calculated in relation to surface and risk-oriented criteria.

Family benefits are financed from tax revenues.

+ Sickness and maternity: Benefits in kind

In case of membership in the general statutory health insurance system: benefits in kind are granted according to the provisions of the general scheme.

+ Sickness and maternity: Cash benefits

For farmers, no statutory protection system has been set up.

+ Long-term care

Long-term care insurance is compulsory for any person who subscribed to compulsory health insurance for farmers, but also for those persons who subscribed to sickness insurance from a private body.

Benefits in cash and in kind are paid according to the regulations of the general system (like for the employees). Long-term care social insurance is financed by contributions. There is no specific autonomous protection scheme for farmers.

+ Invalidity

Membership is compulsory. It is only possible to receive benefits once the agricultural undertaking has been given up and if a qualifying period of 5 years has been fulfilled. The monthly benefit amounts to one twelfth of the general pension value (contribution months + credited months). The general pension value in the old Federal Länder amounts to \in 12.13 and in the new Länder \in 10.66.

+ Old-age

Membership is compulsory. Before the beneficiary is able to receive the benefits, the agricultural undertaking must also be given up. The qualifying period is 15 years. The monthly amount of benefits is one twelfth of the general pension value. The general pension value amounts to \in 12.13 in the old Federal Länder and \in 10.66 in the new Länder.

+ Survivors

Membership is compulsory. Before the beneficiary is able to receive the benefits, the agricultural undertaking must also be given up. The qualifying period is 5 years. The amount of benefits for widows/widowers is calculated on the term of insurance, and credited periods have to be taken into account if death occurred before attaining the age of 60. As far as half-orphans and full orphans are concerned, 1/5 of the invalidity pension which the deceased parent or the deceased persons would have received will be allotted to them.

+ Employment injuries and occupational diseases

In the event of employment injuries and occupational diseases farmers are as a rule covered under the provisions of the general system. Special provisions apply when pensions and injury benefits are calculated and when farm helps and household helps are provided.

+ Family benefits

Farmers are granted family benefits under the provisions of the general system.

+ Unemployment

There is no compulsory unemployment insurance for self-employed farmers. If there is no sufficient income and no disposable assets, the self-employed farmers are in principle entitled to the standard allowance granted to jobseekers (Arbeitslosengeld II), a universal allowance granted to the gainfully employed to secure their subsistence.

CRAFTS AND COMMERCE

+ Financing

The risks invalidity, old age and survivors are financed from contributions and from tax revenues (federal level). The protection scheme employment injuries and occupational diseases is financed by means of contributions, and the amount of contributions is determined in relation to the risk. Family benefits are covered by tax revenues.

+ Sickness and maternity: Benefits in kind

There is no independent statutory protection system for craftsmen and retailers.

+ Sickness and maternity: Cash benefits

There is no independent statutory protection system for craftsmen and retailers.

+ Long-term care

Long term care insurance is compulsory for any person who subscribed to

compulsory sickness insurance but also for those persons who subscribed to sickness insurance from a private body.

Benefits in cash and in kind are paid according to the regulations of the general system (like for the employees). Long-term care social insurance is financed by contributions. There is no specific autonomous protection scheme for farmers.

+ Invalidity

Craftsmen are subject to compulsory membership of the system; retailers have the possibility of joining the statutory system. Inasmuch as during the past 5 years preceding a reduction in earning capacity, the beneficiary has paid compulsory contributions for 3 years, he is granted benefits according to the regulations of the general system.

+ Old-age

Craftsmen are subject to compulsory membership of the system; retailers have the possibility of joining the statutory system. The qualifying period is 5 years, and benefits are granted in accordance with the regulations of the general system.

+ Survivors

Craftsmen are subject to compulsory membership of the system; retailers have the possibility of joining the statutory system. Benefits are granted in accordance with the regulations of the general system.

+ Employment injuries and occupational diseases

There is no compulsory accident insurance for craftsmen and retailers in the statutory system. Eight occupational accident insurance funds (Berufsgenossenschaften) offer compulsory insurance to entrepreneurs and their collaborating spouses or partners under certain conditions and in accordance with the statutes (i. e. the Accident Insurance Fund for Occupations in Health Service and Welfare Work (Berufsgenossenschaft für Gesundheitsdienst und Wohlfahrtspflege) to hairdressers, or the Accident Insurance Fund for Aviation, Inland Waterways Transport, Road Transport and Similar Enterprises (Berufsgenossenschaft für Fahrzeughaltungen) to taxi drivers). Moreover, under certain conditions entrepreneurs have the possibility to insure themselves on a voluntary basis with the competent occupational accident insurance fund of their branch of industry.

+ Family benefits

The general system applies.

+ Unemployment

There is no compulsory unemployment insurance for self-employed craftsmen and retailers. If there is no sufficient income and no disposable assets, the self-employed farmers are in principle entitled to the standard allowance granted to jobseekers (Arbeitslosengeld II), a universal allowance granted to the gainfully employed to secure their subsistence.

Since 1 February 2006, possibility to opt for the continuation of insurance for persons who have been compulsorily insured against unemployment as employees for at least 12 months during the 24 months preceding the independent activity or have received unemployment benefits.

+ Liberal professions

The traditional professions having the right to form associations (such as surgeons, pharmacists, notaries, lawyers, accountants, tax agents, veterinaries, auditors and sworn auditors, dentists, psychological therapists, civil engineers) have their own self-financed schemes assuring compulsory coverage. Delegates are elected from among the members/ the insured and decide upon contributions and benefits. The relationship to be established with regard to the provision of services comes into existence by operation of law.

SELF-EMPLOYED ARTISTS AND PUBLICISTS

Through the Artists' Social Insurance (Künstlersozialversicherung) selfemployed artists and publicists are covered by the statutory schemes for pension, sickness and long-term care insurance. Compulsory insurance requires the artist or publicist to conduct his or her activities on a commercial basis, to attain a minimum annual income more than \in 3,900 from such activities and to employ not more than one person in the context of said activities.

+ Financing

The scheme is financed from the following sources: 50% come from the contributions paid by the insured, 20% are a federal subsidy and 30% are the social security charges for artists (Künstlersozialabgabe) paid by the entrepreneurs that commercialize art and journalism. The social security charges for artists are levied on all fees paid to self-employed artists and publicists, irrespective of the artist's membership of the Artists' Social Insurance. The Artists' Social Insurance Fund (Künstlersozialkasse) collects 50% of the income-related insurance contribution from the insured person and transfers a total contribution to the pension insurance and to the insured person's sickness and long-term care insurance funds.

+ Sickness and maternity: Benefits in kind and cash benefits

Membership of statutory sickness insurance is compulsory.

+ Long-term care

Membership of statutory long-term care insurance is compulsory.

+ Invalidity, old-age and survivors

Membership of statutory pension insurance is compulsory.

+ Employment injuries and occupational diseases

There is no independent regime for self-employed artists and publicists.

+ Family benefits

There is no independent regime for self-employed artists and publicists.

+ Unemployment

There is no compulsory unemployment insurance for self-employed artists and publicists. If there is no sufficient income and no disposable assets, the self-employed artists and publicists are in principle entitled to the standard allowance granted to jobseekers (Arbeitslosengeld II), a universal allowance granted to those capable of work to secure their subsistence.



The social security system of Estonia comprises 3 contributory insurance schemes:

- health insurance,
- pension insurance,
- unemployment insurance,

and four non-contributory universal schemes:

- state unemployment allowances,
- family benefits,
- social benefits for disabled,
- funeral grants.

Self-employed persons are covered by the general schemes of health insurance (benefits in kind and in cash in case of sickness and maternity) and pension insurance (invalidity, old-age, and survivors) on compulsory base, but they are not covered by the unemployment insurance scheme (neither on compulsory base nor may they join the scheme voluntarily). In respect of unemployment, the self-employed are however covered by the non-contributory State unemployment allowance scheme. The other noncontributory schemes are also universal and cover all residents.

+ Financing

The pension insurance and health insurance are financed from social tax, which is paid by employers on behalf of their employees and by the self-employed at the rate of 33% of the tax base (20 percentage points allocated for the pension insurance and 13 percentage points for the health insurance). There are special provisions regulating the payment of social tax by the self-employed.

According to the Social Tax Act, the social tax base for the self-employed is defined as income from the entrepreneurship subject to deduction of documented proved expenditures which are made directly to obtain this income. These expenditures may also include social tax on sums paid by the self-employed to other persons and training costs deductible from the income taxable with the personal income tax. The Social Tax Act stipulates a minimum amount of social tax and a ceiling on the social tax, which is to be paid by the self-employed (the same minimum applies also to social tax paid by employers on behalf of their employees, but there is no ceiling on the social tax paid by employers).

The amount of social tax to be paid by the self-employed per each working-able insured person cannot be smaller than the amount of tax calculated from the rate established by the state in the annual state budget, and shall not be higher than the amount of tax calculated from the amount of 15 times the minimum wage. In 2008, the monthly rate established in the state budget is EEK 2,700 (\in 173) and the minimum wage is EEK 4,350 (\in 278). Accordingly, the minimum amount of social tax to be paid by the self-employed is EEK 891 (\in 57) (0.33 x 2,700) per month, while the ceiling is EEK 21,532 (\in 1,376) (0.33 x 15 x 4,350) per month. In the case of being simultaneously employed and self-employed, the minimum amount is applied on the total of wage income and income from the self-employment.

For the payment of social tax, the taxation period for self-employed persons is a calendar year (for other tax-payers it is a calendar month), but the self-employed are required to pay advance payments once a quarter.

+ Health care and cash benefits

For benefits under the health insurance, the general conditions apply both to employees and the self-employed. However, there are some special rules for self-employed for taking into account the reference earnings: sickness and maternity cash benefits for self-employed persons are calculated on the bases of actually paid tax over the previous calendar year (in case of employees, average earnings over the calendar year preceding sickness or maternity are taken into account).

+ Invalidity, old-age, and survivors' pensions

Also for benefits under the pension insurance, the general conditions apply both to employees and the self-employed. However, there are some special rules for self-employed for taking into account the reference earnings. In case of self-employed persons only the amount of social tax actually paid is taken into account for calculation of the pension coefficients. In case of employees, the due amount of social tax to be paid by the employer is taken into account as the employee is not a tax-payer for social tax and therefore cannot be held responsible if the employer has violated his legal obligations.

+ Family benefits

As the non-contributory schemes cover all residents, the self-employed are just as any other group both in terms of financing and benefit sides and there are no special provisions in their respect.

+ Unemployment

Self-employed persons are not covered by the unemployment insurance scheme, but they may be entitled to the State unemployment allowance scheme. In this scheme, self-employment is considered equal to employment in respect of the qualification period for entitlement to the allowance (the qualification period is 180 days of employment or equalised activity within the 12 months preceding unemployment). As a part of active labour market policy measures, the unemployed are entitled to labour market grant up to EEK 20,000 (\in 1,278) to start their own business, including self-employment, upon a presentation of a business plan.





In Greece there exists a strictly contributory basic system for farmers (OGA) since 1 January 1998. The already existing Insurance Funds for the independent employed, namely the Insurance Fund for craftsmen and other professionals (TEBE), the Insurance Fund for retailers (TAE) and the Retirement Fund for motorists (TSA), were merged into one single unit named "Insurance Organisation of Independent Professions" (OAEE), as from 1 January 2007.

AGRICULTURE

Beneficiaries of the basic system for farmers (OGA) are self-employed farmers, employed persons in agriculture, stock breeders, beekeepers and fishermen. Members of the religious community working in agriculture are insured optionally. Depending on the individual's average income during the last three years, independent professionals in cities, villages or settlements of less than 2,000 inhabitants, are insured either in OGA or OAEE. The system is based on compulsory membership, family members are co-insured and are exempt from contributions. The system covers the following fields: health care, maternity (benefits in cash and in kind), long-term care, invalidity, old-age, survivors, and employment injuries.

+ Financing

Financing of the system is based on the insured persons' contributions and, for those affiliated to the system after 1 January 1993, on participation of the state as well.

+ Sickness and maternity: Benefits in kind

In the field of health care, the system covers all benefits (ambulatory care, dental care, hospitalisation, pharmaceutical products, prostheses, psychotherapy) insofar as these benefits are carried out in public hospitals or in government-regulated clinics. The same is true for maternity care.

+ Sickness and maternity: Cash benefits

Sickness benefits are not part of the system for farmers. However, two maternity benefits are stipulated: a maternity allowance (flat-rate amount of \in 207.97) and a birth allowance (flat-rate amount of \in 415.93). A death allowance is also stipulated (flat-rate amount of \in 833.25).

+ Long-term care

- Invalidity pension surcharge of 50%, in case of total invalidity.
- Retirement pension surcharge in case of blindness.
- Special allowance in case of quadriplegia-paraplegia of € 587.80.

+ Invalidity

Conditions:

- Incapacity to work for at least six months for those first insured before 31 December 1992, while for those insured after 1 January 1993 a minimum period of one year is required. In both cases an invalidity degree of at least 67% is required.
- 5 years of work subject to contributions (two of them during the five years preceding the invalidity) or 15 years of work subject to contributions.

+ Old-age

Conditions:

- 65 years of age.
- 15 years of work subject to contributions.

+ Survivors

Surviving spouse and orphans are entitled to a survivors' pension under the following conditions:

- The deceased was retired.
- The surviving spouse receives no pension.
- The surviving spouse works exclusively in agriculture.
- Orphans until the age of 18 and unmarried.

+ Employment injuries and occupational diseases

In case of employment injuries at the workplace, one day of insurance is enough for the insured to be able to receive an invalidity pension. In case of employment injuries outside of the workplace, half of the insurance time stipulated in case of invalidity is enough for the insured to be able to receive an invalidity pension.

+ Family benefits

In case of invalidity and retirement pension, the amount of the pension is incremented by 10% if there is a spouse and respectively by 8%, 10% and 12% if there are one, two or three children.

+ Unemployment

Unemployment risk is not covered in the farmers' system.

CRAFTS AND COMMERCE

Craftsmen, retailers, motorists are required to be members of the new Fund (OAEE), "Insurance Organisation of Independent Professions". The following fields are covered: health care, maternity (benefits in cash and in kind), long-term care, invalidity, old-age, survivors, and employment injuries.

+ Financing

The system is financed by the insured persons' contributions, state participation, social welfare and property income. Family members are also co-insured and exempt from contributions. Contributions are progressive according to the insurance classes. Persons insured until 31 December 1992 paid unilateral contributions. Since 1 January 1993 contributions are bilateral (insured persons 2/3, State 1/3).

+ Sickness and maternity: Benefits in kind

Insured persons have the right to different benefits four months after registering with the Fund. The following benefits are offered: medical care, pharmaceutical products, dental care, hospitalisation, laboratory examinations, prostheses, birth allowance of \in 800, and in certain cases participation in maternity fees.

+ Sickness and maternity: Cash benefits

Cash benefits in case of sickness are not stipulated. Only in case of employment injury, in addition to health care, a monthly allowance for a duration of four months maximum is stipulated. This allowance represents three times the monthly contributions paid by the insured when the accident took place.

For insured persons required to be on an artificial kidney, suffering from chronic diseases and in case of serious incidents, ambulatory fees are also covered. In case of death, an allowance of \in 1,200 is stipulated.

Retired persons have the right to benefits in kind and cash exclusively under IKA-ETAM (Fund for the employed).

+ Long-term care

- An invalidity pension surcharge of 50%, in case of total invalidity.
- An old-age pension surcharge in case of blindness.
- A special allowance in case of quadriplegia-paraplegia, of € 587.80 per month.

+ Invalidity

Conditions (for those insured after 1 January 1993):

According to the degree of invalidity which varies from 50%, 67% and 80% and according to the insurance period:

- 1 year for persons under 21,
- = 5 years, 2 of them during the 5 years preceding invalidity,
- = 15 years of insurance regardless of the period carried out,
- no limited period in case of employment injury.

Calculation of the pension: The pension depends on the number of years of insurance. Each year equals 2% of income giving the right to pension. The amount of the pension also depends on the degree of invalidity.

+ Old age

Conditions (for those insured after 1 January 1993):

- Minimum period of insurance 15 years starting from the age of 65,
- 15 years of insurance, 2.5 of them during the 5 years preceding the date of the request for retirement and starting from the age of 60,
- for women from the age of 55 with minors or disabled children and with 20 years of insurance,
- = 37 years insurance without age conditions,
- 11½ years of insurance at the age of 65 (transitory provision until 31 December 2007).

Calculation of the pension: The pension depends on the number of years of insurance. Each year equals 2% of the income giving the right to the pension.

+ Survivors

Conditions (for those insured after 1 January 1993): The deceased must have been a member as long as stipulated in the invalidity pension.

Entitled: The surviving spouse receives 50% of the corresponding pension of the deceased. Each child receives 25% of the pension of the deceased parent. The total of the pensions may not be more than 100%, or less than 80% of the amount that the deceased parent received.

+ Employment injuries and occupational diseases

See Sickness and maternity: Cash benefits.

+ Family benefits

In case of invalidity and old-age pension, the amount of the pension is respectively increased by 8%, 10% and 12% if there are one, two or three children.

+ Unemployment

Unemployment risk is not covered.



Spain has a special scheme (R.E.T.A.) for the self-employed in crafts and commerce and for certain self-employed agricultural workers when they have been allocated a determined taxable income. The special scheme for maritime workers comprises also self-employed workers.

From 1.1.2008, the special scheme (R.E.A.) for self-employed agricultural workers has been incorporated into the R.E.T.A., in a Special System.

SPECIAL SCHEME FOR SELF-EMPLOYED WORKERS (R.E.T.A.)

I- AGRICULTURE (SPECIAL SYSTEM)

+ Financing

Benefits in the event of sickness (only benefits in kind) and maternity, invalidity, old-age, survivorship and family benefits are funded from contributions, with an overall rate of 18.75% of a certain contribution basis. Coverage for incapacity and survivors' pensions as a result of occupational contingencies is compulsory. For 2008, the contribution basis varies between a minimum of \in 817.20 and a maximum of \in 3,074.10 (per month), with certain exceptions.

For employment injuries and occupational diseases 1% of the same contribution basis has to be paid per month. For cash benefits in the event of sickness a voluntary insurance can be concluded. The contribution amounts to 4.35% of the basis.

+ Sickness and maternity: Benefits in kind

Membership is compulsory. The variety of benefits available from the system administered by the National Institute for Health Management (INGESA) and the respective bodies of the Autonomous Communities to cover the benefits in kind in the event of sickness and maternity includes out-patient treatment, dental treatment (only extractions, other treatments only in the event of employment injuries or occupational diseases), pharmaceutical products (co-payment of 40%), remedies appliances, prosthesis and, in the event of employment injuries or occupational diseases, plastic surgery.

+ Sickness and maternity: Cash benefits

As a general rule, the Special System provides for cash benefits in the event of sickness, based on voluntary insurance. Entitlement to a benefit in case of common illness requires a minimum insurance period of 180 days. In case of common illness or non-employment injury, the benefit amounts to 60% of the contribution basis from the 4th to the 20th day and to 75% from the 21st day.

When the incapacity for work is due to an employment injury or an occupational disease, and if voluntarily insured, the percentage is 75% as of the day following sickness leave. The duration of the benefit is limited to a maximum of 12 months, but can be extended by a further 6 months.

The Special System also includes cash benefits in the event of maternity and paternity, and non-contributory maternity allowance which are granted under the same conditions as in the General Scheme. Membership is compulsory. The Special System covers the benefit for risk during pregnancy and risk while breastfeeding, which are granted under the same conditions as in the General Scheme. Membership is compulsory.

+ Long-term care

Same regulations and conditions as the General Scheme.

+ Invalidity

Membership is compulsory. After a minimum contribution period, which depends on the age of the beneficiary when invalidity occurred, the beneficiary is entitled to an invalidity pension under the same conditions as in the General Scheme.

+ Old-age

The compulsory old-age insurance of the Special System corresponds essentially to that of the General Scheme. The pension can be drawn as of the age of 65 (except in certain cases). Partial retirement is not covered.

+ Survivors

The compulsory survivors insurance of the Special System provides for pensions under the same conditions as the General Scheme.

+ Employment injuries and occupational diseases

Membership is not compulsory except for permanent incapacity and survivors' pensions. No minimum insurance periods are required.

+ Family benefits

Agricultural workers receive the same family benefits as under the General Scheme except for the period credited for the first year of parental leave (excedencia por cuidado de hijo) to bring up a child under three years of age.

+ Unemployment

No provision under the Special System.

II- CRAFTS, COMMERCE AND OTHERS

+ Financing

An overall rate of 26.5% of a certain contribution basis is paid for benefits in kind in the event of sickness, for maternity, for invalidity insurance, old-age provision, provision of the survivors and family benefits.

The risk of employment injuries and occupational diseases is also covered in the special scheme for the self-employed.

For 2008, the contribution basis varies between a minimum of \in 817.20 and a maximum of \in 3,074.10 (per month), chosen by the beneficiary within certain limits.

+ Sickness and maternity: Benefits in kind

Membership is compulsory. The benefits in kind in the event of sickness, to which the insured and registered self-employed including pensioners, family members or persons assimilated thereto without certain minimum

insurance periods are entitled, comprise out-patient and in-patient treatment, pharmaceutical products (co-payment of 40%), remedies and therapeutic appliances, prosthesis, and dental treatment (only extractions, other treatment only in the event of employment injuries or occupational diseases). Benefits in kind in the event of maternity include the provision of all medical services and pharmaceutical products (co-payment of 40%).

+ Sickness and maternity (paternity): Cash benefits

Membership is compulsory. Insured persons are entitled to cash benefits in the event of sickness after a minimum insurance period of 180 days, during the last five years, after a waiting period of 3 days if they have opted to cover this risk on a voluntary basis. From the 4th to the 15th day the cash benefit amounts to 60% of the contribution basis, from the 21st day the cash benefit increases to 75% of the contribution basis. When the incapacity for work is due to an employment injury or an occupational disease, the percentage is 75% as of the day following sickness leave. The cash benefits are granted for a maximum of 12 months; however, it is possible to extend this period by 6 more months if a recovery seems to be possible from a medical point of view within this period. Self-employed workers in situation of temporary disability must submit to the corresponding body within 15 days the doctor's certificate testifying the sick leave as well as a certificate stating the name of the person in charge of the commercial and industrial management or, if appropriate, a certificate stating the temporary or definitive suspension of the activity.

This special scheme also includes cash benefits in the event of maternity and paternity, and non-contributory maternity allowance which are granted under the same conditions as in the General Scheme. Membership is compulsory.

This scheme covers the benefit for risk during pregnancy and risk while breastfeeding, which are granted under the same conditions as in the General Scheme. Membership is compulsory.

+ Long-term care

Same regulations and conditions as the General Scheme.

+ Invalidity

For the granting of benefits within the compulsory scheme (with the exception of accidents) a minimum insurance period is necessary which depends on the age of the insured person at the time when the contingency occurred. Benefits for permanent partial invalidity are only granted in case of employment injury or occupational disease.

+ Old-age

Compulsory old-age insurance grants benefits after a minimum insurance period of 15 years from the age of 65 years to the same amount and under the same conditions as in the General Scheme. It is not possible to retire before 65 years of age in this scheme (except in certain cases). Partial retirement is not covered.

+ Survivors

The compulsory survivors insurance of the special scheme provides for pensions under the same conditions as the General Scheme.

+ Employment injuries and occupational diseases

The self-employed worker can opt to take out voluntary insurance against employment injuries and occupational diseases.

+ Family benefits

Self-employed workers receive the same family benefits as under the General Scheme except for the period credited for the first year of parental leave (excedencia por cuidado de hijo) to bring up a child under three years of age.

+ Unemployment

No provision under this scheme.



Social protection for the self-employed is subject to separate regulations. Farmers come under the agricultural system (MSA). The National Fund for the Self-employed Social Scheme (Caisse nationale du régime social des indépendants, RSI) manages the sickness insurance for the self-employed who are not related to agriculture as well as the old age insurance for craftsmen, traders and manufacturers. The old age insurance for liberal professions is managed separately (CNAVPL). Compulsory supplementary systems are available for all these professions.

AGRICULTURE

Coming imperatively under the system are the head farmer, farm associates and members of the family who take part in the farm, provided the farm or the agricultural holding have a value at least equal to the liability threshold.

+ Financing

The farmer's contributions are calculated according to professional income. Contributions include a technical part for benefits and a supplementary part for expenses related to the implementation and the social action of the Funds. The rate for contributions is fixed to the national level. The rate corresponding to the supplementary part can vary from +5% and -5% according to the Department. Rates applied:

- AMEXA (sickness, invalidity, maternity):
 - technical part: 8.13%,
 - supplementary part: 2.71%;
- capped old-age insurance¹:
 - technical part: 8.64%,
 - supplementary part: 2.53%;
- old-age insurance on the total income:
 - technical part: 1.39%,
 - supplementary part: 0.25%,
 - AVI: 3.20% of the professional income within the limit of the ceiling,
 - compulsory supplementary retirement: 2.97% on professional income;
- family benefits:
 - technical part: 4.36% on professional income
 - supplementary part: 1.04% on professional income;
- insurance for employment injuries: yearly lump-sum contributions between € 311.19 and € 338.25 according to the risk (5 groups).

Farmers are also liable to the CSG (generalised social contribution) (7.5%) and the CRDS (contribution for the repayment of the social debt) (0.5%) like employed persons.

+ Sickness and maternity: Benefits in kind

As regards settlement of health care, benefits in kind mean those paid to employed persons under the general system.

+ Sickness and maternity: Cash benefits

No daily allowances exist within the framework of health insurance. For maternity, a benefit for replacement (minimum 2 weeks, maximum 16 weeks) may be paid to compensate the fees paid to insure the replacement of the woman farmer in farm work. The father who leads the farm can also claim a benefit for replacement of 11 days (or 18 in case of multiple birth) provided that he stops his activity and that he is replaced by salaried staff.

+ Long-term care

No specific insurance.

+ Invalidity

To be able to claim invalidity pension the insured must be at least 60 years old, be acknowledged as completely unfit to practice the agricultural profession, or present an invalidity reducing by two-thirds his ability to exercise the profession. Furthermore, he must, at the time the risk occurred, be subject to AMEXA for at least twelve months. The amount of invalidity pension is a flat-rate contribution: \in 3,992.06 per year for total invalidity or \in 3,097.31 per year for partial invalidity. A supplementary allowance for the constant aid of a third party for an amount of \in 12,129.94 per year may be paid with the invalidity pension when the person concerned needs the assistance of a third person to carry out ordinary everyday activities.

+ Old-age

Old-age pensions may be granted from the age of 60 with one year of insurance. For the fund to be fully paid at the age of 60, the insured person born before 1943 must have completed at least 150 quarters of insurance. Insurance length grows progressively from 152 to 160 quarters for generations from 1944 to 1948. The farmer's old-age pension is composed of a basic pension divided into two parts: a flat-rate maximum pension of \in 3,097.31 per year for the maximum length requested depending on the birth year of the insured person, a proportional pension calculated by points and a compulsory supplementary pension also calculated by points (one retirement point equals to \in 0.3023). Minimum guaranteed for a complete career \in 9,982.80 per year (basic and proportional retirement).

+ Survivors

Conditions for entitlement, calculation of benefits and accumulation rules are the same as those applying for the salaried persons within the general scheme. When the basic pension is granted after 1st January 2003, the survivor is entitled to a supplementary pension corresponding to 54% of the acquired pension points. This last advantage is not subject to a means test.

+ Employment injuries and occupational diseases

An insurance covers the employment injuries and those occurring during the journey between home and work as well as the occupational diseases linked to some activities detailed in a list or defined by a committee for occupational diseases as being directly caused by work, after an individual assessment.

Care costs are covered at 100%. Daily cash benefits since the 8th day of interruption (€ 19.54 and € 26.06 since the 29th day). A pension is paid for work incapacity of at least 30%.

+ Family benefits

Family benefits for farmers are identical to those of the general system and are managed by the Mutual Insurance Fund for Farmers.

+ Unemployment

No unemployment insurance system exists for farmers.

CRAFTS, COMMERCE AND MANUFACTURING, LIBERAL PROFESSIONS

Workers practising a self-employed activity must be registered with social insurance organisations and pay their contributions themselves. Compulsory affiliation:

- managers of firms on the trades register as well as assisting family members who take part in the small-scale enterprise;
- persons practising an industrial and commercial activity involving signing up on the Commercial Register or liability to professional tax as a retailer;
- persons practising a liberal profession.

These schemes also cover partners who collaborate with these workers.

+ Financing

Maternity-health insurance (benefits in kind and benefits in cash): 7.2%, 0.6% of which is within the limit of the social security ceiling (\in 33,276) and 6.6% within the limit of five times the social security ceiling (\in 166,680).

+ Old-age insurance:

Basic system for crafts, commerce and manufactory: 16.65% of the professional income within the limit of the social security ceiling. Compulsory supplementary scheme: 7% of the professional income up to 4 times the ceiling for the craftsmen scheme and 6.5% of the professional income within the limit of three ceilings for traders and manufacturers.

+ Invalidity-death insurance:

For craftsmen: 1.8% of professional income within the limit of the social security ceiling. For traders and manufacturers: 1.3% of the professional income within the limit of the social security ceiling.

+ Family allowance:

5.4% of the total professional income for retailers and craftsmen. Craftsmen, retailers and manufacturers are also subject to the CSG (7.5%) and the CRDS (0.5%) on their professional income in the same conditions as employed persons.

+ Sickness and maternity: Benefits in kind

Craftsmen, traders, manufacturers and liberal professions are covered by the same system of maternity-health insurance. Benefits in kind for health insurance are in line with those of the general system for the salaried.

+ Sickness and maternity: Cash benefits

For sick leave, daily allowances may be paid to craftsmen, traders and manufacturers from the 4th day of hospitalisation or from the 8th day of absence in case of sickness or accident. To be able to receive daily allowances the insured must be signed up for health insurance for self-employed professions at the time of establishing incapacity to work, and must be up-to-date in the payment of his contributions. The benefits are paid during a maximum period of 360 days in three years or during three years for persons with a long-lasting sickness. The amount of the benefit is equal to 1/720 of the average annual professional income of the last three years taking account of the calculation of contributions. Maximum: 1/720 of the social security ceiling = \in 46.21. Minimum: 1/720 of 40% of the social security ceiling = \in 18.48. There is no sickness insurance cash benefits scheme for liberal professions.

Within the framework of maternity insurance, women managers of firms have the right to a flat-rate contribution allowance for maternity leave, for the amount of \in 2,773 for birth or \in 1,386.50 for adoption, which may be deposited with no condition of ceasing activity, and to daily flat-rate benefits on condition that she stops all professional activity for at least 30 consecutive days. These can be extended up to 60 days taken by periods of 15 consecutive days. The amount of the daily flat-rate benefits comes to 1/60 of the monthly ceiling (ϵ 2,773 for 60 days of leave). A flat-rate benefit can also be paid to the father during 11 consecutive days (or 18 days in case of multiple births), provided that he stops all activity.

Maternity and paternity insurance cash benefits are paid to craftsmen, traders, manufacturers and liberal professions.

+ Long-term care

No specific insurance.

+ Invalidity

Invalidity Pension for craftsmen, traders and manufacturers: The potential recipient must be less than 60 years old, be invalid, be affiliated to the scheme and up to date in the payment of contributions. The amount of invalidity pension is calculated as a percentage of the previous average annual income: 50% or 30%, according to the invalidity degree.

If the holder of the invalidity pension needs the assistance of a third party to carry out ordinary everyday activities, a third-party surcharge for the amount of \in 12,129.94 may be paid with the invalidity pension of craftsmen as with that of retailers and manufacturers.

For liberal professions the invalidity and death insurance varies according to the practised profession.

+ Old-age

Except for the liberal professions which are under a specific scheme, the rules applied in the systems of craftsmen, traders and manufacturers are identical to those of the general system. Supplementary compulsory pensions paid out in points exist in schemes for these professions.

+ Survivors

Except for the liberal professions which are under a specific scheme, the rules applied in the systems of craftsmen, traders and manufacturers are identical to those of the general system.

+ Employment injuries and occupational diseases

Employment injuries and occupational diseases are refunded in the framework of the sickness insurance under the same conditions of common right. Possibility to contribute voluntarily to the general system.

+ Family benefits

Craftsmen, like retailers, manufacturers and liberal professions receive family allowances from the general system paid by the general system's funds.

+ Unemployment

No unemployment insurance system exists for craftsmen, neither self-employed in commercial or industrial branches nor liberal professions.

¹ Amount of the social security ceiling of 1st January 2008: € 2,773 per month, € 33,276 per year.



In Iceland the system of social protection is founded fundamentally upon the principle of national insurance. The general system therefore does not make any distinction between employees and self-employed. Self-employed persons are thus covered by the social protection of the general system. They are also covered by the supplementary pension scheme.

+ Financing

The provisions of the general system and the supplementary pension scheme apply for the financing.

+ Sickness and maternity: Benefits in kind

The granting of benefits-in-kind for sickness and maternity is solely based on residency in Iceland. There is a requirement of six months residence in Iceland. For the self-employed persons the same provisions apply as for employees.

+ Sickness and maternity: Cash benefits

Cash benefits for sickness and maternity are based on periods of residency and employment in Iceland. Self-employed persons receive the same benefits as do employees, with no distinction made between the two groups.

+ Long-term care

There is no special scheme for long-term care but there are universal security schemes for all residents if there is continuous need for long-term care or need for nursing or other care in the home. There is no distinction made between self-employed persons and employees.

+ Invalidity

The risk of invalidity can be covered by two systems, i.e. through the national pension scheme for all residents and through the supplementary pension scheme for persons on the labour market. In the national pension scheme persons who have resided in Iceland for three years prior to application and are aged 16 to 67 are covered. This applies to both employed and self-employed persons. In the supplementary pension scheme the pension fund member must have contributed to a pension fund for at least two years. The same applies to employed and self-employed persons.

+ Old-age

Old-age is covered by two systems, i.e. the national pension scheme based on residency and the supplementary pension scheme based on employment. In the national pension scheme persons who have resided in Iceland for at least three years are covered. Full pension is paid if residency has been in Iceland for 40 years in the age 16 to 67. This applies to both employed and self-employed persons. In the supplementary pension scheme there is no minimum period but a full pension can be drawn after 40 years of contributions. The same applies to employed and self-employed persons.

+ Survivors

In principle the same applies to survivors insurance as to old-age insurance. The survivors of self-employed persons are covered by the national scheme and the supplementary pension scheme as survivors of employed persons.

+ Employment injuries and occupational diseases

There is a national insurance system for employment injuries and occupational diseases which provides minimum protection for all actively employed. The self-employed are covered.

+ Family benefits

Family benefits are available in the general system to all families, thus to the self-employed just as to employees.

+ Unemployment

Social protection does exist for the self-employed just as for employees. Both groups are compulsorily insured.

IRELAND

+ Basic principles

The protection of all groups of the self-employed in the areas of benefitsin-kind for sickness and maternity, as well as benefits-in-cash for maternity, old age, survivors and family benefits is achieved within the general system.

+ Financing

There are no specific contributions for benefits-in-kind for sickness and maternity. However, the self employed, along with employees, are liable to pay 2% of all income where income is in excess of \in 26,000 per annum. A further 0.5% is payable where income is in excess of \in 100,100. For the risks of old age, maternity and survivors, the self-employed pay contributions at the rate of 3% of all income, subject to a minimum payment of \in 253 per annum. There is no annual income ceiling. Family benefits are tax financed.

Self-employed share-fishermen, who are already insured as self-employed contributors, may make optional contributions for additional cover for the risks of sickness cash benefits and unemployment. The rate of contribution is 4% of annual income in excess of $\leq 2,500$ and up to $\leq 50,700$, subject to a minimum contribution of ≤ 200 .

+ Sickness and maternity: Benefits in kind

The benefits are granted according to the regulations of the general system.

+ Sickness and maternity: Cash benefits

There is no protection system for the cash benefits for sickness. Sharefishermen who pay optional contributions are covered for cash benefits for sickness (payable for a limited duration of one year). The benefits-incash for maternity are granted according to the regulations of the general system.

+ Long-term care

The benefits are granted according to the regulations of the general system. The self-employed are not covered for Carer's Benefit.

+ Invalidity

There is no protection system for the self-employed.

+ Old-age

The self-employed have access to State Pension (Contributory) which is granted according to the regulations of the general system. It is payable from the age of 66 and is based on the number of contributions paid or credited over a working lifetime. The self-employed are not covered for State Pension (Transition) which is payable from the age of 65.

+ Survivors

The benefits are granted according to the regulations of the general system.

+ Employment injuries and occupational diseases

There is no protection system for the self-employed.

+ Family benefits

The benefits are granted according to the regulations of the general system.

+ Unemployment

There is no protection system for the self-employed. Share-fishermen who pay optional contributions are covered for cash benefits for unemployment (payable for a limited duration of 13 weeks in any one year).



The self-employed receive health and maternity care, as well as benefits for employment injuries and occupational diseases, according to the regulations of the general system. This system is also in force, but with special regulations, in relation to cash benefits for maternity.

For the disability, old-age, survivors and family benefits branch, a special system exists comparable to the general system. Concerning the conditions of granting benefits and the granting itself, no distinction is made between the self-employed. They must be insured against disability, old-age and survivors' risk. This insurance, which includes the three risks, was reformed in 1995, in such a way that two systems currently coexist. The changes made are presented under the term "new system".

AGRICULTURE, CRAFTS AND COMMERCE

+ Financing

Farmers pay a percentage structured around four values which varies according to the type of land cultivated, the age, the number of workdays and the income of conventional activity.

- Standard plots of land: >21 years 20.30%; <21 years 17.80%
- Mountain or difficult plots of land: >21 years 17.30%; <21 years 12.80%
- 156 workdays € 7,238.40 (income from taxable activity)
- = 208 workdays € 9,651.20 (income from taxable activity)
- = 260 workdays € 12,064.00 (income from taxable activity)
- = 312 workdays € 14,476.80 (income from taxable activity).

Moreover, they pay set contributions for employment injuries and occupational diseases: \in 768.50 annual flat-rate for standard plots of land and \in 532.18 for mountain or difficult plots of land and a supplementary tax of \in 0.57 per workday, to adapt the pension fund. For the risk of maternity, a fix contribution of \in 7.49 per year has to be paid.

A distinction must be made between:

- farm workers who do not own the land (tenant farmers and share farmers ("Coloni e Mezzadri" CM);
- 2) direct farm workers (owner farmers, Direct Farmers, CD) who practise their activity exclusively or predominantly, and
- entrepreneurs (persons with farming as the main occupation) who practice their activity for at least two-thirds (standard plots of land) or 50% (mountain or difficult plots of land) of their working time. The latter pay only contributions for the pension.

Tenant farmers and farmers pay 50% of the contributions, the remaining 50% is paid by the granter.

Craftsmen pay 19.5% on company income up to \in 40,083 or 20.5% on company income between \in 40,083 and \in 66,805 (if aged less than 21: 16.5% and 17.5%). Moreover, they pay set contributions for maternity of \in 0.62 per month.

Retailers pay 19.59% on company income up to \notin 40,083 or 20.59% on company income between \notin 40,083 and \notin 66,805 (if aged less than 21: 16.59% and 17.59%). Moreover, they pay set contributions for maternity of \notin 0.62 per month.

Craftsmen as well as retailers also pay contributions on a minimum taxable income of \in 13,598 and both, if registered before 1 January 1996, pay on a maximum taxable income of \in 66,805. If registered after 1 January 1996, they pay on a maximum of \in 87,187.

Self-employed farmers, craftsmen and retailers already retired may, on request, pay the contributions reduced by 50%, but only as regards contributions for retirement.

Family benefits are financed at 100% by taxes.

+ Sickness and maternity: Benefits in kind

Benefits are granted according to the regulations of the general system.

+ Sickness and maternity: Cash benefits

Generally speaking, no protection system exists for sickness benefits. In case of maternity, two months before the expected date of birth and until up to three months after delivery, insured persons receive maternity benefits of 80% of the minimum daily pay of farm workers hired on, an openended basis. The benefits are financed at 100% by contributions.

Law no. 53 of 8 March 2000 stipulates the possibility of receiving compensation/allowances one month before delivery (always 5 months compulsory) and furthermore, three optional months in the child's first year.

+ Long-term care

Benefits are granted according to the regulations of the general system.

+ Invalidity

Disability benefits are subject to income limits. The minimum period of membership is 5 years with at least three of them in the last 5 years. The amount of disability allowance and disability pension corresponds to the benefits indicated in the general system.

+ Old-age

The amount of retirement pension, after a membership of 20 years, amounts to 2% of the number of years of contributions (max. 40) multiplied by the reference salary. For persons who on 31 December 1992 had 15 or more years of seniority, the reference salary is the average of the activity income with a ceiling of the last 10 years. For persons who on 31 December 1992 had seniority of less than 15 years, the reference salary corresponds to the average of the activity incomes with a ceiling over a variable period between the last 10 years and the whole period of work. Reference salaries are conventional incomes structured around 4 values and adjusted according to the Consumer Price Index increased by 1% for each year of service.

According to the new system, the minimum period of membership for old-age pension is 5 years. For disability pension as well as for old-age pension, a contribution of 20% of annual income is entered on the accounts for each year of contributions. The annual amount of contributions is reassessed at the end of the year according to the GDP five-year variation.

+ Survivors

The income and training ceilings are subject to the same conditions as for invalidity. The widower or widow receives 60% of the disability/retirement

pension of the insured/retired if they do not remarry (in case of remarriage, a flat-rate benefit of two years of pension is granted). For the percentages, see below:

	Spouse	60%
=	Spouse + 1 orphan	80%
•	Spouse + 2 or more orphans	100%
=	1 orphan	70%
•	2 orphans	80%
•	3 or more orphans	100%
=	1 parent	15%
=	2 parents	30%
•	1 brother or sister	15%
	2 brothers or sisters	30%

Orphans receive the pension until the age of 18, 21 if they are students, 26 if they study at university and all their lives if they are disabled.

Parents and brothers and sisters receive the pension of the insured/retired only if the latter has no other survivors.

+ Employment injuries and occupational diseases

Benefits are granted according to the regulations of the general system.

+ Family benefits

Benefits per month amount to \in 10.21 (for pensioners) and to \in 8.18 (for farmers) for each member of the household dependent on the insured/ pensioner. In the case of craftsmen and retailers family benefits are only delivered to pensioners.

The standard period for children is up to the age of 18 years, 21 years if they do studies, 26 years if they study at university and unlimited if they are disabled. In addition, surcharges, which vary according to family income and the number of family members, are paid to retired persons.

+ Unemployment

Generally speaking, no protection system exists for unemployment.

SCHEMES FOR OTHER GROUPS OF SELF-EMPLOYED

Self-employed with a specific treatment (separate management):

- Coordinated and continuing collaborators (collaboratori coordinati e continuativi, co.co.co.)
- Coordinated collaborators for projects (co.co.pro.)
- Dccasional workers whose income is above € 5.000 (co.co.co.)
- Door-to-door sellers whose income is above € 5.000 (co.co.co.).

The contribution rates effective from 1 January 2008 are:

17.00% for self-employed who are already insured under another compulsory management scheme or who are already retired;

24.72% for self-employed insured only under the separate management scheme.



In Cyprus there is a General Social Insurance Scheme which covers every person gainfully occupied either as an employed or a self-employed person. Persons who are working in their own business or are working in any occupation for their own account e.g. agriculturist, stock farmer, industrialist, shopkeeper etc. are compulsorily insured under the Social Insurance Scheme as self-employed persons.

+ Financing

Financing is carried out according to Social Insurance Legislation. The rate of contribution of self-employed is 15.6% of the insurable income of the person concerned from which 11.6% is paid by the self-employed and 4% by the state. For the determination of the insurable income, each self-employed is classified in the respective occupational category according to his/her occupation and for each category of self-employed persons a compulsory minimum insurable income is prescribed but the individual self-employed person has the right to opt for a higher income up to the maximum insurable earnings of \in 885 per week. If a self-employed person proves that his actual income is lower than the minimum insurable income of his occupational category, he is allowed to claim in order to be able to pay contributions on his actual income.

+ Benefits in kind: Sickness and Maternity

Medical care is provided by the Ministry of Health for self-employed as well as for all Cypriot citizens under certain conditions.

+ Cash benefits: Sickness and Maternity

As regards Sickness benefit in the case of self-employed persons there is a waiting period of 9 days. If the incapacity is due to an accident or if the self-employed person is hospitalised for at least one day, s/he is treated in the same way as the employed persons. In the case of Maternity allowance the same provisions apply for the self-employed as for the employed persons.

+ Invalidity, Old-age, Survivors

The same provisions apply for the self-employed as for the employed persons.

+ Social Pension

The same provisions apply for the self-employed as for the employed persons.

+ Family benefits

Family benefits are granted under no conditions.

+ Unemployment benefit, Employment Injuries and Occupational Diseases

The self-employed are not covered for Unemployment benefit or for Employment Injuries and Occupational Diseases.

LATVIA

+ Basic principles

All socially insured self-employed persons are subject to a single social security system. In contrast to employees, self-employed persons are only considered as socially insured if their contributions have actually been made.

Self-employed persons are subject to compulsory social insurance as provided by the law "On State Social Insurance" (Likums "Par valsts sociālo apdrošināšanu"). There are distinguished categories of self-employed persons who gain an income as:

- an individual performing individual work;
- a person who is permanently residing in the Republic of Latvia and who receives the author's royalties, except the inheritor of those royalties or other people who take-over those royalties;
- sworn notary;
- sworn lawyer;
- sworn auditor;
- practise doctor, practise pharmacist, practise veterinarian, practise optometrist;
- other individuals registered as a profit tax payer on economic activities;
- owner of a the farmers' (fishermen's) farm not being in the employment of the management institution of respective farm but performing its management function, provided no manager (director) has been appointed (elected) under the law;
- a person whose permanent residence shall be the Republic of Latvia and whose work shall be paid from the funds of the foreign technical assistance or international finance institutions' loan allocated to the Republic of Latvia;
- sworn enforcement officer;
- individual businessman.

Self-employed persons shall be registered in the Tax Payers' Register of the State Revenue Service.

As self-employed people have no wages, the contribution basis is declared by the self-employed themselves. The Cabinet of Ministers sets the minimum and maximum amounts of the contribution basis. The minimum amount of earnings subject to contributions is LVL 1,800 (\in 2,576) per year and the maximum amount cannot exceed LVL 29,600 (\in 42,358) per year in 2008. The payment is made every 3 months.

Self-employed persons are insured if their income exceeds the minimum amount of the base for compulsory contributions defined by the Cabinet of Ministers. The social insurance contribution rates differ amongst the categories of self-employed persons. They are the following in 2008:

- self-employed persons (also those disabled of group I or II) insured for the risks of old-age, death, sickness, parent's, maternity and disability: 30.44%;
- self-employed persons over retirement age insured for the risks of oldage, death, parent's, maternity and sickness: 28.02%;
- individuals carrying out management of real estate and registered as tax payers for income gained from economic activity who are insured for the risks of old-age, death and disability: 26.00%.

The self-employed persons do not make social insurance contribution payments concerning insurance against occupational accidents and insurance against unemployment as they employ themselves and bear responsibility for their working conditions and safety.

Social assistance arrangements (as provided by the law "On Social Services and Social Assistance", Sociālo pakalpojumu un sociālās palīdzības likums) and health care arrangements (as provided by the law "On General Practitioners", Likums "Par prakses ārstiem", and by the law "On Medical Treatment", Ārstniecības likums) are applied without reference to employment status of the claimant, thus they are valid for self-employed persons as well.

LIECHTENSTEIN

+ Basic principles

In Liechtenstein, no independent special system for the self-employed has been set up. According to the insurance branch, self-employed persons may either be insured on a voluntary basis or are subject to compulsory insurance on account of their place of residence or economic activity in Liechtenstein.

+ Financing

The provisions of the general systems apply (obviously except for employer's contributions).

+ Sickness and maternity: Benefits in kind

The self-employed are subject to compulsory insurance concerning benefits in kind. As far as benefits and deductibles are concerned, it is also the regulations of the general system that apply.

+ Sickness and maternity: Cash benefits

No compulsory insurance. Persons who are over 15 years of age and are not compulsorily insured may take out voluntary insurance offering cash benefits. In case of sickness implying complete unfitness for work, the insured sick benefit is to be paid out to them during at least the same period of time as has been fixed for employees.

In any case, self-employed women residing in Liechtenstein receive a onetime maternity supplement (amount subject to income and number of children).

+ Long-term care

In Liechtenstein, no independent protection system covering long-term care has been set up. Benefits payable in case of long-term care are drawn from various social security schemes. A self-employed person is entitled to the same benefits under the same conditions as an employee (except for benefits derived from the accident insurance: such a claim is only justified if he or she is insured on a voluntary basis).

+ Invalidity

The self-employed are subject to compulsory invalidity insurance (1st pillar). They pay contributions in harmony with the aggregate of the employer's and employee's contributions and those made to the administrative expense. As a matter of principle, self-employed persons are granted the same benefits as all other insured persons. Obviously, there are benefits which have been specifically tailored to the needs of employees or selfemployed persons (e.g. financial assistance for invalid self-employed persons in order to help them maintain their undertakings).

There is no compulsory insurance in the 2nd pillar (company staff welfare). The self-employed have the possibility of taking out provident insurance with the same insurance carrier as their employees (in case they have employees). In such a case, they have to pay the full contribution rate. By analogy, they are subject to the same regulations that apply to employees. Also the self-employed who have no employees may join the insurance.

+ Old-age

The self-employed are covered by the compulsory old-age and survivors insurance (1st pillar). They pay contributions in harmony with the aggregate of the employer's and employee's contributions and those made to the administrative expense. However, they benefit from a decreasing contribution scale and pay lower contributions if their annual income falls below CHF 26,000 (\in 15,767). The self-employed are granted the same benefits as all other insured persons.

No compulsory insurance has been provided for in the 2nd pillar (company staff welfare).

The self-employed have the possibility of taking out provident insurance with the same insurance carrier as their employees (in case they have employees). In such a case, they have to pay the full contribution rate. By analogy, they are subject to the same regulations that apply to employees. Also the self-employed who have no employees may join the insurance.

+ Survivors

The self-employed are covered by the compulsory old-age and survivors insurance (1st pillar). They pay contributions in harmony with the aggregate of the employer's and employee's contributions and those made to the administrative expense. However, they benefit from a decreasing contribution scale and pay lower contributions if their annual income falls below CHF 26,000 (\in 15,767). The self-employed are granted the same benefits as all other insured persons.

No compulsory insurance has been provided for in the 2nd pillar (company staff welfare).

The self-employed have the possibility of taking out provident insurance with the same insurance carrier as their employees (in case they have employees). In such a case, they have to pay the full contribution rate. By analogy, they are subject to the same regulations that apply to employees. Also the self-employed who have no employees may join the insurance.

+ Employment injuries and occupational diseases

No compulsory insurance has been provided for. Self-employed persons may take out voluntary insurance. The regulations of the compulsory insurance apply correspondingly.

+ Family benefits

Self-employed persons are compulsory members of the Family Benefits Agency. They have to pay contributions (incl. contributions to the administrative expense) to such amount as an employer would have to bear (in the system of the Family Benefits Agency, employees' contributions are non-existent). Self-employed persons receive the same amount of benefits as all other persons.

+ Unemployment

The unemployment insurance is compulsory for employees. Subscription is not compulsory for the self-employed nor do they have any other possibility of voluntary insurance.

LITHUANIA

+ Basic principles

Self-employed persons are identified on the basis of the Law on State Social Insurance (Valstybinio socialinio draudimo įstatymas) according to the sources of payment of compulsory social insurance contributions. An "employed person" receives wages and is insured by the employer's means (a certain part of the contribution is also paid by the insured person). A "self-employed person" receives income for his/her activities and pays compulsory insurance contributions himself/herself. The basic legislation defines special categories of economically active persons who are insured or eligible to social protection. The following categories of insured under the Law on State Social Insurance are identified as self-employed:

- owners of personal enterprises;
- full members of partnerships;
- persons, who are occupied with individual activities (barristers, utter barristers, notaries, bailiffs, owners of licenses and other).

Self-employed are not compulsorily covered by sickness and maternity insurance (however, they can receive maternity benefits from non-insurance based family benefits scheme or they can insure themselves by voluntary sickness and maternity social insurance). They are not covered by labour accidents and professional diseases insurance. They are also not obliged to insure themselves against unemployment, but are insured in itself due to their participation in the pension insurance scheme.

Pension insurance and health insurance schemes differ for employed and self-employed (the scheme of benefits is common for all, but contributions are different). Health insurance (that means mainly benefits in kind, not sickness or maternity insurance benefits) is compulsory for all residents.

Pension insurance contributions are collected on the following basis: owners of personal enterprises, full members of partnerships, barristers and utter barristers, notaries, bailiffs, other persons, who are occupied with individual activities contribute per month 50% of the official amount of basic pension and 15% of declared by themselves income. Contributions of declared income, but not less than 12 minimum wages per year, are paid if these persons get more than 12 minimum wages per year. Self-employed owners of license contribute 50% of the official amount of basic pension.

For the purpose of health insurance (benefits in kind), self-employed persons might be identified on the basis of the Law on Health Insurance (Sveikatos draudimo įstatymas), the identification of self-employed in the social insurance and in health care has some differences. Following categories of insured under the above mentioned law might be treated as self-employed:

- owners of personal enterprises;
- members of partnerships;
- persons, who are occupied with individual activities (barristers, utter barristers, notaries, bailiffs, owners of licenses and other);
- farmers and their family members employed in the farm.

Compulsory health insurance contributions are set as follows:

- contributions of owners of personal enterprises and members of partnerships are calculated as 2% of before last quarter average monthly wage announced by the Statistics Department;
- persons, who are occupied with individual activities, contribute 30% of the income tax of individuals but no less than 1/12 of the annual State budget contribution for the persons insured from State resources;
- farmers and their family members employed in the farm contribute 3.5%, small land users and their family members 1.5% of the minimum wage.

LUXEMBOURG

+ Basic principles

In Luxembourg, social protection of the self-employed is primarily regulated under the general system, although special organisations are responsible for farmers on the one hand and craftsmen, retailers and manufacturers on the other hand. Organisations authorised for the sickness and maternity branch are the Agricultural Sickness Fund and the Sickness Fund for the Self-employed. Protection for invalidity, old-age and survivors concerns the Agricultural Pension Fund and the Pension Fund for craftsmen, retailers and manufacturers. Social protection covers all risks; this includes unemployment for the self-employed who had to cease their occupation and who are looking for a salaried job. A specific system for employment injuries and occupational diseases applies for farmers.

As regards health care in case of sickness and maternity, as well as cash benefits for sickness, maternity, invalidity, old-age and survivors, the selfemployed are, like the employed, required to be insured in the general system.

+ Financing

The general contributions rate is also in force as in the general system. For farmers, the premium method is set inclusively based on vegetable and animal productions of the farm during the year preceding the year of contributions. For the other categories of the self-employed, the premium method is set inclusively based on the professional income under fiscal law. The income of the previous taxation year and communicated by the contributions administration is taken into account.

Contributions to be paid by farmers are set according to the surface of the farmland and the nature of the crops. Smaller farms are subject to a system of flat-rate contributions.

+ Sickness and maternity: Benefits in kind

All the regulations shown in tables III and V (conditions and amount of benefits) are thus applicable to all workers.

+ Sickness and maternity: Cash benefits

To be given the right to financial sickness benefits, a qualifying period exists for self-employed persons from the month of the appearance of the sickness and the next three months. Instead of calculating by referring to the expected salary during the sickness, the benefits are calculated by referring to previously declared income subject to contributions. For cash benefits for maternity, the regulation of the general system applies to the self-employed.

+ Long-term care

There is no special feature compared to the general system.

+ Invalidity

The regulation of the general system is also applied to the self-employed for benefits. Exercising a self-employed activity is incompatible with granting an invalidity pension.

+ Old-age

The regulation of the general system is also applied to the self-employed for old-age protection. The periods of self-employed professional activity taking place before the systems were in use, are taken into account for up to 15 years as assimilated periods.

+ Survivors

The regulation of the general system is also applied to the self-employed for the survivors' protection system.

+ Employment injuries and occupational diseases

All measures of the general system are applicable, except for the farmers for whom specific rules exist:

- no right to financial benefits during the first thirteen weeks following the injury
- methods of calculating the different pensions, applying a surcharge for serious injuries.

+ Family benefits

As regards family benefits, the general system applies for the self-employed.

+ Unemployment

The self-employed who had to cease their occupation owing to economic and financial difficulties, to medical reasons, to a third party or by a case of force majeure, may obtain unemployment benefits when they register as jobseekers. They must have completed at least two years of compulsory pension insurance as a self-employed person. However, for the purposes of calculating the two-year qualifying period, periods of insurance completed as an employed person can be aggregated, provided the person has carried out activities as a self-employed person for at least six months before the submission of the request for compensation. Jobseekers must be resident in Luxembourg at the time of cessation of their activities. Selfemployed persons must register as jobseekers within six months following the cessation of their activities.

In case unemployment benefit is granted, the self-employed person is entitled to an allowance corresponding to 80% of the income which the pension fund used as a basis for calculating contributions for the last activity. Full unemployment benefit cannot exceed the ceilings provided in the general scheme. It cannot be lower than 80% of the social minimum wage.

HUNGARY

+ Basic principles

In principle all self-employed persons are covered for all the branches of social security in the general system, consisting of health and sickness schemes (covering health care, sickness, maternity and the specific treatment of work incapacity related to an employment injury or a professional disease) and pension scheme (covering old-age, survivorship, invalidity and the specific treatment for employment injuries or professional diseases) and a mandatory unemployment insurance.

Self-employed agricultural entrepreneurs are to pay all the contributions on the basis of the national minimum wage, except if their annual turnover did not exceed HUF 7 million (\in 27,644) in the preceding year, in which case they only have to pay 9.5% pension contribution and 4% in-kind health insurance contribution on the basis of 20% of their turnover income. If the self-employed agricultural entrepreneur chooses, she/he can pay additional contributions in order to gain higher benefit entitlements. Those self-employed agricultural entrepreneurs whose previous contributory periods combined with the remaining time until standard retirement age does not reach 20 years, are not compulsorily insured but have to pay HUF 4,350 (\in 17) per month in return for health care entitlement (unless being already otherwise insured).

The family support scheme is of a universal type, which covers every Hungarian citizen, regardless of their employment status. Consequently, every self-employed is covered by the family support scheme. The same principle is applied for the universal means tested social assistance schemes.

+ Financing

Self-employed people pay similar contributions as the wage earners. Contrary to the employees, the self-employed person pays the contribution him/herself on the basis of the income, which s/he declares. Self-employed persons pay contributions on a monthly base.

Self-employed persons pay contribution of 4% on the basis of their income for the unemployment scheme.

Self-employed persons who perform activities in a complementary way (kiegészítő tevékenységet folytató vállalkozó) pay contribution (HUF 4,350 (\in 17) per month) for the entitlement to employment injuries, occupational disease scheme and for in-kind health services. In addition they pay a contribution of 9.5% for the entitlement to pension enhancement of 0.5% per year.

The following persons are considered to be self-employed persons performing their activity in a complementary way: those private entrepreneurs running their business either independently or as members of a partnership, who are either beneficiaries of their old-age pension benefit or beneficiaries of survivor's pension benefit, given that they reached the retirement age.



+ Basic Principles

The Social protection system in Malta is a general scheme that covers both employed and self-employed persons. Self-employed persons are eligible to all benefits, pensions and allowances with the exception of unemployment benefit. In such a scenario however, a self-employed person is entitled to social assistance if he satisfies the capital/income means test.

+ Financing

For the purpose of Social Security Contribution payments, a distinction exists in Maltese legislation between self-occupied persons and self-employed persons.

Self-employed Contributions are paid by persons who are not gainfully occupied but have a net annual income that exceeds \in 1,005. Persons who are gainfully occupied and whose annual net earnings exceed \in 1,005, pay self-occupied Contributions.

The Self-occupied contribution is ≤ 24.89 per week if the annual net earnings of the preceding year are less than $\leq 8,628$. If the annual net earnings exceed $\leq 16,000$, the contribution due is ≤ 47.88 per week.

The Self-employed Contribution is \in 20.68 per week if the annual net income exceeds \in 1,005 but does not exceed \in 7,168. If the annual net income exceeds \in 7,168, the rates are the same as in the self-occupied category.

+ Benefits in kind: Sickness and Maternity

Medical care, health care services and treatment are free in Government Hospitals and Government Health Clinics to all residents.

+ Cash benefits: Sickness and Maternity

Sickness benefits are issued after a three-day waiting period. Payment is made every week. The rates payable are as follows:

- Single parents or a married person whose spouse is not employed on a full-time basis: € 16.75 per day.
- Single persons: € 10.81 per day.

The provisions of the maternity benefit are the same for employed and self-employed persons.

+ Invalidity Pension

The provisions that apply for an employed person apply for a self-employed person as per Table V "Invalidity".

+ Old-Age Pension

The provisions that apply for an employed person apply for a self-employed person. Only the calculation method to decide the amount of pension issued differs. Table VI "Old-age" refers.

+ Survivors Pension

The provisions that apply for an employed person apply for a self-employed person as per Table VII " Survivors".

+ Employment Injuries & Occupational diseases

Self-employed persons are entitled to injury benefit when injury is derived from gainful occupation. The waiting period is three days.

The injury benefit is paid every week and the rates are:

- Married person: € 25.09 per day.
- Single person: € 18.89 per day.

All gainful employed persons who contract one of the diseases referred to in the Fourth Schedule of the Social Security Act, 1987.

+ Family Benefits

Family benefits are granted to the self-employed as well as to the employed. The quantification of the amount of benefit due is means tested and based on the number of children under the care and custody of the recipient.

+ Unemployment Benefits

Self-employed persons are not entitled to an unemployment benefit.

THE NETHERLANDS

+ Basic principles

The general protection system applies as a rule to all residents of the Netherlands; therefore special regulations for self-employed exist only in a few points.

+ Financing

With the exception of the general child allowance act, that provides for child allowance to be financed from taxation, the national insurance schemes are financed by contributions, which - together with income tax - are deducted as set amounts.

+ Sickness and maternity: Benefits in kind

With regard to the benefits-in-kind for sickness, the Health Insurance Act and the Exceptional Medical Expenses Act (AWBZ), apply to all residents, and thus also to the self-employed. The self-employed have a right to the same benefits as all residents in the case of maternity.

+ Sickness and maternity: Cash benefits

With regard to cash benefits for sickness, no protection system exists for self-employed persons.

+ Long-term care

Long-term care is covered by the Exceptional Medical Expenses Act (AWBZ). The AWBZ applies to all residents, and thus also to the self-employed.

+ Old-age

The self-employed have a right to the same benefits as all residents.

+ Survivors

The self-employed have a right to the same benefits as all residents.

+ Employment injuries and occupational diseases

Against the risk of employment injuries and occupational diseases there is no special protection system.

+ Family benefits

The self-employed have a right to the same benefits as all residents.

+ Unemployment

Self-employed persons are not insured against unemployment; here the corresponding law applies only to employees.



+ Basic principles

In Norway, all categories of self-employed are compulsory members of the general scheme of universal coverage.

Some special and more favourable provisions apply to fishermen, entitling them to benefits very similar to those of employed persons. They also enjoy a lower rate of member's contributions compared to other self-employed persons. This lower rate of contributions also applies to farmers, and is the same as that paid by employees.

+ Financing

Benefits to self-employed are generally financed as an integral part of the general scheme, which is financed in part by social security contributions, in part by tax revenue. The rate of the member's contributions levied on income from work of the self-employed, is generally 11%, whereas farmers and fishermen pay only 7.8% which corresponds to the rate applying to employees.

The lower rate of contributions and the extended benefit rights of fishermen are financed through a special contribution (produktavgift) levied on the first hand turnover value of the catch. The lower rate for farmers forms part of the general basis for the annual settlements (jordbruksoppgjøret) between the State and the agricultural sector.

+ Sickness and maternity: Benefits in kind

The general scheme applies to all residents, self-employed included.

+ Sickness and maternity/paternity: Cash benefits

Covered by the general scheme, but no right to cash sickness benefits (sykepenger) for the first 16 days (for employees, the first 16 days are covered by the employer), and the compensation rate is 65% in contrast with a 100% for employees. In both respects a voluntary top-up coverage to fill the gap, is available. The 65% compensation rate with a top-up to 100% available through voluntary coverage, also applies to parental benefit (foreldrepenger).

Fishermen and farmers have a top-up coverage as part of their collective arrangements, see under Financing.

+ Long-term care

The general scheme applies to all residents, self-employed included.

+ Invalidity

The general scheme of universal coverage applies, including basic pension and earnings-related supplementary pension.

+ Old-age

The general scheme of universal coverage applies, including basic pension and earnings-related supplementary pension.

+ Survivors

The general scheme of universal coverage applies, including basic pension and earnings-related supplementary pension.

+ Employment injuries and occupational diseases

A voluntary coverage in the general scheme is available for self-employed persons, farmers included.

Fishermen are compulsorily covered as part of their extended rights, see under Financing.

+ Family benefits

The general scheme of universal coverage applies also to self-employed persons of all categories.

+ Unemployment

Generally, there is no compulsory coverage for the self-employed. Nor is a voluntary coverage available.

However, unemployment benefits based on previous work as an employee, can be drawn up to nine months into a start-up period as a self-employed, and there is an entitlement to unemployment benefits between 64 and 67 years of age provided the activity as a self-employed has ceased.

Fishermen are compulsorily covered as part of their extended rights, see under Financing.





+ Basic principles

Austria used to have a comprehensive special scheme both for farmers and for craftsmen and retailers until 31 December 2004.

As of 1st January 2005 all pension systems were harmonised for those persons who had not yet completed the age of 50 by 1st January 2005 (the existing special schemes have continued to apply to persons over this age in a slightly modified way). The General Pension Act (Allgemeines Pensionsgesetz - APG) provides for harmonised provisions on contributions and benefits for employees, farmers, retailers and civil servants. However, the contributions for farmers and retailers are partially paid by the State. The existing special provisions have continued to remain in force in a modified way.

Differences existing in the field of health and accident insurance remain unaffected.

AGRICULTURE

The special scheme for farmers borne by the Social Insurance Fund for Farmers (for pension insurance see Basic principles) covers farm proprietors, assisting family members and recipients of an agricultural pension. The scheme comprises benefits in kind in case of sickness, benefits in case of maternity as well as the areas of invalidity, old age and survivors. The special scheme requires compulsory membership, and if the obligation to insure ceases, it is possible to carry on insurance coverage on a voluntary basis.

+ Financing

88.8% of benefits in kind payable in case of sickness are funded from contributions and 11.2% are derived from other sources. 30% of maternity benefits are financed from contributions and 70% out of the families' compensation fund. The rate of contribution in respect of these benefits is 7.5% of the insurable value of landed property which as a matter of principle is calculated on the surface value and does not exceed the upper limit of assessment of monthly \notin 4,480; assisting family members are subject to special regulations.

32.4% of the protection scheme of the branches invalidity, old age and survivors is financed from contributions, 67.4% from government funds and 0.2% from other sources. The rate of contribution is 15% of the insurable value of landed property which as a matter of principle is calculated on the site value and does not exceed the upper limit of assessment of monthly \in 4,480; assisting family members are subject to special regulations.

97.2% of the employment injury and occupational disease scheme is financed from contributions and 2.8% are derived from other sources. The rate of contribution is 1.9% of the insurable value of landed property which as a matter of principle is calculated on the surface value and does not exceed the upper limit of assessment of monthly \in 4,480.

+ Sickness and maternity: Benefits in kind

Benefits payable in case of sickness include the entire range of benefits (out-patient treatment, dental treatment, in-patient treatment, medicines, prostheses, psychotherapy and rehabilitation measures). Basically, all benefits imply a deductible of 20% to be borne by the patient, in case of hospital care this portion is reduced to 10%. As a matter of principle, the same regulations determined for sickness apply to benefits in kind in case of

maternity. In contrast to this, benefits in case of maternity do not imply any deductibles. As a supplementary benefit in kind, a farm help may be used.

+ Sickness and maternity: Cash benefits

Concerning the scheme cash benefits in case of sickness, no protection scheme for farmers has been provided for. Maternity cash benefits are granted if there is no allowance for a farm help as replacement: \in 24.87 per day is paid for an 8-week period before and for an 8-week period (12 weeks in case of a problematic birth) following the birth.

+ Long-term care

Benefits are granted according to the regulations of the general scheme (Long-term care benefit of the Federal Government and the Länder, benefits in kind by public and private providers).

+ Invalidity

Benefits are granted according to the regulations of the general scheme. The only particularity is that instead of the occurrence of invalidity, permanent incapacity must have been diagnosed (i.e. loss of capacity to pursue a regular remunerative activity).

+ Old-age

Benefits are granted according to the provisions of the General Pension Act (APG; see Basic principles).

+ Survivors

Instead of receiving a pension, the surviving spouse may elect to continue to run the business of the deceased spouse. In such a case, the widow's/ widower's pension is dropped, but the deceased person's accumulated insurance periods will be added to the pension claims of the surviving spouse.

+ Employment injuries and occupational diseases

Special regulations contained in the general scheme apply to farm proprietors and assisting family members. Compulsory membership of the Social Insurance Fund for Farmers. Globally, benefits paid out correspond to those of the general scheme. The calculation of pensions rests on a flat-rate basis of assessment: in principle \in 16,584.57.

+ Family benefits

Farmers are eligible for family benefits within the framework of the general scheme.

+ Unemployment

No scheme available.

CRAFTS AND COMMERCE

The special scheme set up for self-employed craftsmen and retailers (for pension insurance see Basic principles) is borne by the Social Insurance Institute for the Self-employed and is responsible for members of the Chamber of Trade and Industry (in principle, all owners of business establishments) and such persons as derive revenue in respect of professional services or any other self-employment income on the basis of a commercial activity, have any influence on companies founded according to the schemes benefits in kind in case of sickness and maternity, invalidity, old age and survivors, membership is compulsory. If the obligation to insure ceases, it is possible to carry on insurance coverage on a voluntary basis.

+ Financing

Health care is financed at 86.6% by contributions and at 13.4% by other sources. The contribution rate amounts to 9.1% of revenues liable to income tax up to the upper limit of assessment of \in 4,585 per month.

Cash benefits in case of sickness (voluntary insurance): the amount is 4.25% of revenues liable to income tax up to the upper limit of assessment of \in 4,585 per month.

65.5% of the protection offered by the schemes invalidity, old age and survivors is financed from contributions, 33.9% from government funds, and the remaining 0.6% are derived from other sources. Contributions are 15.5% (and will be gradually increased - by 0.25 percentage points every year - to 17.5% starting in 2006) of revenues liable to income tax up to the upper limit of assessment of \in 4,585 per month. A monthly amount of \in 7.65 has to be paid in respect of employment injury and occupational disease insurance; a voluntarily increased insurance is possible.

+ Sickness and maternity: Benefits in kind

Benefits are granted according to the regulations of the general scheme. As is the case of farmers, an underlying deductible of 20% is applicable. Insured persons whose annual contributory basis is in excess of \in 55,019.99 receive in principle cash benefits instead of benefits in kind (refund of costs in case of claims made against the contractual partners of the Social Insurance Institute). Benefits are granted also in case of maternity according to the regulations of the general scheme. In contrast to health insurance, the deductible is dropped in case of maternity. On principle, the insurance carrier concedes a farm help.

+ Sickness and maternity: Cash benefits

Benefits may be claimed in case of sickness after a waiting period of 6 months. Sickness benefits are paid subsequent to the expiration of a waiting period of 3 days during a period of up to 26 weeks. The daily amount of the sickness benefit is 80% of the monthly contributory basis divided by 30. In case of maternity, the waiting period does not apply. In replacement of a farm help, a maternity allowance in the amount of \in 24.87 per day is paid for an 8-week period before and for an 8-week period (12 weeks in case of a problematic birth) following the birth.

+ Long-term care

Benefits are granted according to the regulations of the general scheme (Long-term care benefit of the Federal Government and the Länder, benefits in kind by public and private providers).

+ Invalidity

Benefits correspond to those of the general scheme with the unique particularity that instead of the occurrence of invalidity, a case of permanent disability must have been diagnosed (i.e. loss of capacity to pursue a regular remunerative activity).

+ Old-age

As regards old-age protection, the provisions of the General Pension Act (APG; see Basic principles) apply.

+ Survivors

When providing protection for survivors, it is a particularity that the surviving spouses may also elect to maintain the undertaking of the deceased spouse. In such a case, the widow's /widower's pension is not paid out, and the deceased person's accumulated insurance periods will be added to the pension claims of the surviving spouse.

+ Employment injuries and occupational diseases

Businessmen and craftsmen are insured within the framework of the general scheme. Benefits paid correspond in general to those of the general scheme.

+ Family benefits

Businessmen are entitled to family benefits of the general scheme.

+ Unemployment

Self-employed persons can take out voluntary unemployment insurance from 01 January 2009. The decision for or against registration in the unemployment insurance scheme can only be changed after eight years. As a contribution basis it is possible to choose among one quarter, one half or three quarters of the maximum contribution basis according to the Act on Social Insurance for Persons engaged in Commercial Activities (Gewerbliches Sozialversicherungsgesetz (GSVG)). The contribution is equal to 6% of the overall contribution for compulsorily insured persons according to the respective contribution basis. The entitlement to benefits corresponds to that for compulsorily insured persons. Benefits claims can also be based on non-self-employed work done in the past that was subject to compulsory insurance.

Self-employment work can be a time limit extension reason for the assessment of qualification for unemployment benefits after work that was subject to compulsory unemployment insurance of at least five years or already unlimited before the end of 2008, in other cases of maximum five years.



+ Basic principles

The Law of 13 October 1998 on the system of social insurance (Ustawa o systemie ubezpieczeń społecznych) reshaped the social security landscape. From 1 January 1999 onwards the self-employed persons who perform non-agricultural activities and their co-operating persons are part of the general social insurance system. They are insured in the pension scheme on a mandatory basis (covering old-age, survivorship and invalidity) and in the employment injuries and occupational diseases scheme.

The sickness insurance of such persons is voluntary. The scheme on employment and prevention of unemployment is also applicable to self-employed persons (not to farmers). In the social security schemes there are in principle no specific rules for self-employed persons. Self-employed persons have the right to same benefits in the same amount as the employed persons. With regard to the financing, specific rules have been created for self-employed persons in order to establish the income basis upon which contributions are being levied.

Farmers and their family members are insured in a specific categorical system, which covers short-term incapacity of work (sickness, maternity and labour accidents) and pensions (old-age, invalidity and survivorship). Depending upon the size of the farmed land as well as other specific conditions, the insurance is either compulsorily or voluntarily.

+ Health care

Health care and family benefits are granted in principle to all persons residing legally in the country. In principle no differentiation is made between professional groups, except for the contribution payment with regard to health care. The benefits are provided in the same way to all persons who are entitled to them.

+ Financing

Contributions of self-employed persons are entirely financed by the insured themselves, with their own funds. The insured self-employed persons also calculate and transfer contributions to the appropriate field office of the Social Insurance Institute (Zakład Ubezpieczeń Społecznych, ZUS) as the competent administrative body. Farmers pay contributions to the administrative body of the agricultural insurance system (KRUS).

Starting from the 30 December 1999, the self-employed person must also pay contributions for the social insurance of the co-operating persons (such as assisting family members).

For self employed persons the contribution basis for the pension insurance is a declared amount, no lower than 60% of the average monthly remuneration for the previous trimester. This contribution is subject to the same maximum ceilings as those applied to employed persons. But there are preferential principles of paying social security contributions for persons starting up their own businesses. Persons who started up their own businesses are allowed to pay in the period of 24 calendar months, commencing the effective day of the business start-up, social security contributions based on the amount declared by them, however this is not to be lower than 30% of the minimum remuneration for work.

Sickness insurance contributions operate on the same basis as pension contributions except that a different maximum ceiling is used. The contribution basis for voluntary sickness insurance may not exceed 250% of the average remuneration in the previous trimester monthly.

The rate of contribution for accident insurance is 0.67% - 3.60% of gross wage. The financing principles of agricultural social insurance are regu-

lated by the law of 20 December 1990 on the agricultural social insurance. The basis of financing are contributions of insured persons and state subsidies. These subsidies for pensions' payment cover approximately 94% of the Agricultural Fund. The amount of the contribution is determined every trimester at a level guaranteeing fluent financing of the Fund's expenses.

+ Health care and maternity (benefits in kind)

The health care system provides benefits in- kind to the insured persons who are in need of health treatment. As far as benefits are concerned no difference is made between professional groups.

+ Sickness and maternity (benefits in cash)

Sickness insurance is to be taken on a voluntary basis for self-employed persons. The same for maternity benefits.

In order to open the entitlement for a sickness benefit the voluntarily insured self-employed person has to prove 180 days of continuous insurance record (whereas the mandatory insured employee has to be insured continuously for 30 days).

The self-employed person, if insured, does not receive any benefit if the illness lasts less than 30 days. However, the right to sickness benefit is granted from the first day of insurance if the claimant's incapacity for work results from an employment injury or occupational disease. The benefit amount and the period of payment are the same as for employed persons. Self-employed persons are not entitled to the Child-minding Allowance (Zasiłek opiekuńczy) and Compensation Allowance (Zasiłek wyrównawczy).

In the agricultural insurance system several income replacement benefits are foreseen in case of short-term work incapacity. Compensation along the lines of the general system is foreseen if the work incapacity is caused by an employment injury or occupational diseases. In case of non-work related illness or accident, the farmer is provided with a benefit when he or she is incapable of work for a continuous period of more than 30 days.

+ Invalidity

The same rules apply as for employed persons.

+ Old-age

The same rules apply as for employed persons but self employed persons generally do not have the right to the early retirement pension.

The agricultural old-age pension is composed of a contributory and a supplementary part. The contributory part provides in a benefit that is related to the average income of the persons concerned. The replacement rate of the supplementary part amounts to approximately 25% of the basic amount.

+ Survivors

The same rules as for employed persons.

+ Labour accidents and professional diseases The same rules as for employed persons.

+ Family benefits

The family benefits are integrated in a universal scheme financed by general taxation.

+ Unemployment

The same rules as for employed persons.

PORTUGAL

+ Basic principles

In Portugal, all self-employed persons are compulsorily covered by the social protection system (general system of social security for self-employed persons).

However, membership is voluntary for persons whose gross annual income for self-employed work is equal to or less than six times the indexing reference of social support (IAS, indexante dos apoios sociais). In addition, lawyers and solicitors are covered by a specific insurance fund.

The general system of social security for self-employed persons provides for two benefit schemes: one compulsory, which stipulates the granting of benefits in case of maternity, occupational diseases, invalidity, old-age and death, and another voluntary membership which grants benefits also in case of sickness. The delivery of family benefits is guaranteed under the subsystem of family protection, which covers the whole residential population.

Employment injury insurance is compulsory. Self-employed persons are obliged to take out insurance against this risk with an insurance company.

Health care is paid for by the National Health Service, universal base for all residents, subject to a reciprocity principle as regards citizens of third States.

+ Financing

Financing of the general system for the self-employed is to be paid by the workers themselves. The rate of contributions amounts to 25.4% or 32%, depending on whether it concerns, respectively, the compulsory or voluntary protection scheme.

The amount of the contributions is the result of applying these rates to a flat-rate remuneration selected by the insured between 10 levels indexed to the indexing reference of social support (IAS, indexante dos apoios sociais), the first corresponding to 1.5 times this reference and the last to 12 times this reference. If the gross annual income of the self-employed work is less than 18 times the IAS, the tax base of the contributions is decreased, the limit being 50% of the said indexing reference.

In case of accumulation of an employed activity covered by a compulsory social protection system with the exercise of a self-employed activity, the law stipulates, as long as certain conditions are monitored, the exemption of payment of contributions based on the latter activity.

The exemption of contributions is also stipulated for those drawing an invalidity and old-age pension who practice a self-employed activity. This right is also guaranteed to persons holding an occupational disease pension and suffering from incapacity to work of 70% or more.

In case of first membership in the system, payment of contributions is due only from the 12th month of self-employed activity. This measure aims at developing self-employed work.

+ Sickness and maternity: Benefits in kind

Benefits are granted by the National Health Service, under the responsibility of the Ministry of Health.

+ Sickness and maternity: Cash benefits

Benefits are granted according to the regulations of the general system for the employed. However, some exceptions exist:

Sickness: the period of absence for granting sickness benefits is 30 days (employees: 3 days); the maximum period to pay this allowance is 365 days (employees: 1,095 days). In case of hospitalisation, in case of sickness (which would start during the granting period of maternity benefits and beyond that period) and in case of tuberculosis the compensation is paid during the entire period of incapacity (this right concerns both categories of workers).

Maternity: the system does not provide for the following benefits, which are granted to employed persons: paternity allowance corresponding to 5 days off; parental holiday allowance (15 days) granted to the father; allowance for assistance to sick children younger than 10 years of age or handicapped regardless of age; allowance for assistance to children suffering from chronic diseases or severely handicapped; allowance for grandparents' special days off.

+ Long-term care

Benefits in cash are granted according to the regulations of the general system for the employed. Benefits in kind are delivered according to the regulations established for all dependants in long-term care.

+ Invalidity

Benefits are granted according to the regulations of the general system for the employed.

+ Old-age

Benefits are granted according to the regulations of the general system for the employed.

+ Survivors

Benefits are granted according to the regulations of the general system for the employed.

+ Employment injuries and occupational diseases

For employment injuries, rules are applied as established for the employees except for adaptations related to the nature of the self-employed activity, notably as regards the annual income taken into account for calculating bonuses and cash benefits. This corresponds to at least 14 times the indexing reference of social support (IAS, indexante dos apoios sociais).

As regards occupational diseases, benefits are granted according to the regulations of the general system for the employed (until a specific regulation is approved).

+ Family benefits

Benefits are granted according to the regulations of the general system of family benefits which covers all residents.

+ Unemployment

No unemployment protection system exists for the self-employed.



+ Basic principles

Romania has opted for the incorporation of self-employed in the existing universal or general social protection schemes.

Commonly, social insurance schemes have self-employed specific rules with regard to coverage, financing and impact of non-compliance, whereas they enclose similar rules for self-employed and other groups of population with regard to covered risks and benefits. Social assistance schemes have not special rules based on personal statute.

Lawyers are members of a categorical scheme. This is influenced by the general scheme covering the same risks.

+ Financing

Specific rules with regard to financing.

+ Sickness and maternity: Benefits in kind

- Coverage: Compulsory insurance.
- Financing: Contributions. Rate 6.50% of declared earnings. No ceiling.

+ Sickness and maternity: Cash benefits

- Coverage: Compulsory insurance.
- Financing: Contributions. Rate: 0.85%. No ceiling.

+ Long-term care

Not special rules based on personal statute.

+ Invalidity, Old-age and Survivors

Coverage: Compulsory insurance for self-employed (except farmers who can opt for a voluntary insurance). No coverage threshold requirement. Multiple statutory coverage in case of practicing several professional activities.

Financing: The contribution rates vary with the working conditions:

- Normal working conditions: 29%
- Difficult working conditions: 34%
- Special working conditions: 39%.

No ceiling.

+ Employment injuries and occupational diseases

Coverage: For short-term benefits voluntary insurance, For long-term benefits compulsory insurance (except farmers who can opt for a voluntary insurance).

Financed by contributions. Contribution rate for short-term benefits: 1%; no ceiling. For long-term benefits: See "Invalidity, Old-age, Survivors".

+ Family benefits

Not special rules based on personal statute.

+ Unemployment

- Coverage: Voluntary regime.
- Financing: Contributions. Rate 1.50%. No ceiling.

FINLAND

+ Basic principles

In Finland the self-employed are covered by the same social security schemes based on residence as employed persons and any other person residing permanently in Finland. They are entitled to health care, benefits for sickness and maternity, family benefits, basic unemployment benefits and national pension (old age, invalidity and survivors' pensions) under the same conditions as all residents. Self-employed persons are covered by the Self-employed Persons' Pensions Act (YEL), farmers are covered by the Farmers' Pensions Act (MYEL). Special rules apply to employment accident insurance and earnings-related unemployment benefits.

+ Financing

Most benefits are financed according to the rules of the general system. Following are the exceptions from the general system. The additional sickness cash benefit for farmers covering the waiting period in the general scheme is financed by the government. The earnings-related pensions for self-employed are financed mostly by their contributions and the rest is covered by the State (in 2008 approximately 10.5%). The earnings-related pensions for farmers are mostly financed by the State (in 2008 approximately 79%) and the rest is financed through the insured persons' contributions. The benefits for employment injuries for farmers are financed 33.8% by the insured persons and by the government each, whereby the remaining part is financed through transfer payments by other insurance systems.

+ Sickness and maternity: Benefits in kind

The granting of benefits-in-kind for sickness and for maternity is solely based on residence in Finland; self-employed persons thus receive the same benefits as employees, with no distinction made between the two groups.

+ Sickness and maternity: Cash benefits

Cash benefits for sickness and maternity are also based solely on residence in Finland. Benefits are calculated on the pensionable income insured under the Earnings-Related Pension Scheme (YEL or MYEL). For self-employed farmers an additional statutory scheme exists (covering the waiting period in the general system). Sickness allowance is paid after completion of a waiting period consisting of the first day of work incapacity and the following nine weekdays. For persons insured under the Self-Employed Persons Pensions Act (YEL), the waiting period is effectively reduced to the first day of work incapacity and the following three weekdays.

+ Long-term care

All self-employed persons are entitled to the same long-term care as all residents.

+ Invalidity, old-age and survivors

These risks are covered by two systems: through the national pension scheme, which is valid for the self-employed in the same way as for all other population groups, and through the Earnings-Related Pension Scheme where special pension provisions apply to self-employed persons and farmers (Self-employed Persons' Pensions Act, YEL; Farmers' Pensions Act, MYEL). A self-employed person is obliged to take out a pension insurance when the activity concerned has lasted for at least four months and the es-

timated earned income is at least \in 6,186.65 annually. The earnings-related pension insurance for self-employed persons in agriculture, i.e. farmers, fishermen and reindeer herders, is compulsory when the farm contains more than 5 ha of arable land and the income is at least \in 3,093.33 annually.

+ Employment injuries and occupational diseases

The self-employed persons may take out a voluntary insurance against accidents at work and occupational diseases as laid down in the Employment Accident Insurance Act. The insurance coverage corresponds to the insurance coverage for employed persons. For self-employed farmers the insurance is compulsory.

+ Family benefits

Family benefits, as a part of the general system of social protection, are available to all families, thus to the self-employed just as to employees and all other groups in the population.

+ Unemployment

The self-employed are insured by the basic unemployment insurance. Since 1995 the self-employed have had the possibility to join voluntarily the earnings-related unemployment insurance scheme and qualify for the earnings-related unemployment allowance as members of special unemployment funds, with rules particularly adapted to the situation of the selfemployed (e.g. in defining unemployment).



+ Basic principles

Self-employed: those engaged in an independent gainful activity as their sole and principal occupation (as independent contractors, craftsmen or private traders, persons engaged in artistic or other cultural activity, an activity in the field of media, in the field of health care or social security, persons engaged in clerical or any other religious office, have their own private practice as lawyers or notaries public or persons engaged in any other activity permitted by law) and thereby generate income equal to at least the minimum salary.

+ Health care

Self-employed persons are covered by the compulsory insurance based system. The contribution rate for all health insurance rights (benefits in kind, cash benefits) for self-employed is 12.92% of basis for pension and invalidity insurance.

+ Sickness cash benefits

Self-employed persons have the right to compensation during sickness leave on a basis of compulsory health insurance.

+ Maternity

Self-employed persons are insured for parental protection and have the right to parental leave, parental benefits and rights related to part-time work. The contribution rate for cash benefits for self-employed is 0.20% of basis for pension and invalidity insurance.

+ Invalidity and old-age

Self-employed persons are covered by the compulsory insurance scheme from the date of commencement of engagement in an independent activity (entry in the Register of Independent Contractors, entry into membership of a chamber,...), to the date of cessation of engagement in such activity. Compulsory insurance encompasses the right to pension (old-age pension, invalidity pension, widow/widower's pension, survivor's pension, partial pension), rights under invalidity insurance (occupational rehabilitation, the right to invalidity benefit, the right to reassignment and part-time work, the right to other benefits under invalidity insurance, the right to travel allowance), supplementary rights (right to assistance and attendance allowance and the right to disability allowance).

Contribution rate for old-age, survivors and invalidity pensions for the selfemployed is 24.35% of insurance basis (15.50% as employees and 8.85% as employers).

+ Employment injuries and occupational diseases

Covered by compulsory health and pension and invalidity insurance. Contribution for employment injuries and occupational diseases (temporary incapacity) for the self-employed is 0.53% gross wage. Long-term incapacity is covered by old-age and invalidity insurance (see "Invalidity and oldage" above).

+ Unemployment

A self-employed person is unemployed if the profit from his activity has not exceeded the amount of the minimum salary compensation, or if a person is an owner or co-owner of companies, whose profit in the last calendar year prior to occurrence of unemployment, reduced by payment of compulsory social security contributions, has not exceeded the amount of the minimum salary compensation.

Self-employed may be engaged in voluntary insurance for the case of unemployment. They are therefore entitled to unemployment financial benefits, reimbursement of transport and relocation costs, the right to health care and the right to pension and disability insurance.

Contribution rate for unemployment for the self-employed is 0.20% gross wage (0.14% as employees and 0.06% as employers).

SLOVAKIA

+ Basic principles

In Slovakia, the protection of the self-employed in the areas of benefitsin-kind for sickness and maternity, as well as benefits-in-cash for sickness, maternity, invalidity, old-age, survivors, unemployment and family benefits is achieved within the general system.

+ Financing

There are specific rates of contributions to the general system for selfemployed persons. The Assessment Base of self-employed persons is 50% of average monthly taxable income over the previous year (for voluntary insured the sum assigned by him/her).

There are upper and lower ceilings for the Assessment Base. The maximum monthly Assessment Base is:

- 4-times the average wage in 2006 = SKK 75,044 (€ 2,234) for old-age, invalidity, survivors and unemployment insurance, and for reserve fund;
- 3-times the average wage in 2006 = SKK 56,283 (€ 1,676) for health (benefits in kind) insurance;
- 1.5-times the average wage in 2006 = SKK 28,142 (€ 838) for sickness and maternity (cash benefits) insurance.

The minimum monthly Assessment Base is SKK 8,100 (\in 241) (minimum wage).

Rates of contributions of self-employed persons as a percentage of the Assessment Base for:

- Old-Age and Survivors is 18% (if appropriate, 9% each for the 1st and 2nd pillar),
- Invalidity and Survivors is 6% (but zero if incapacity for work is more than 70% or old-age benefit entitlement),
- Sickness and Maternity (Health care) is 14% (but only 7% if disabled),
- Sickness and Maternity (Cash benefits) is 4.4%,
- Unemployment is 2% (only voluntary insurance),
- Reserve Fund is 4.75%.

Self-employed persons with a yearly income less than SKK 97,200 (€ 2,894) (12-times of minimum wage) are exempted from compulsory sickness and maternity insurance (cash benefits) as well as from compulsory invalidity, old-age and survivors insurance. Membership is possible through voluntary insurance.

+ Sickness and Maternity: Health care and cash benefits

The benefits are granted according to the regulations of the general system.

+ Invalidity, Old-Age, and Survivors

The benefits are granted according to the regulations of the general system.

+ Employment injuries and occupational diseases

There is no protection system for the self-employed.

+ Family benefits

The benefits are granted according to the regulations of the general system.

+ Unemployment

The benefits are granted according to the regulations of the general system, but only in case of non performance of the self-employed activity and previous voluntary insurance.



+ Basic principles

In Sweden the social protection system is fundamentally founded on the principle of national insurance. The group of people protected is thus not defined according to a certain social status, and no distinction is made between employees and the self-employed. Self-employed persons thus enjoy the social protection of the general system.

+ Financing

The regulations of the general system apply for the financing.

+ Sickness and maternity: Benefits in kind

The granting of the benefits is based either on residence or on work in Sweden; self-employed persons thus receive the same benefits as employees, with no distinction made between the two groups.

+ Sickness and maternity: Cash benefits

With regard to cash benefits for sickness and maternity, compulsory insurance is required for employees as well as for the self-employed. For each group, however, slightly different regulations apply for sickness: while a waiting period of one day is required for workers, benefits thus being granted starting with the second day of sickness, self-employed persons can choose between two insurance categories, which stipulate a waiting period of either 3 or 30 days. Self-employed persons receive the same benefits for maternity as employees, with no distinction made between the two groups.

+ Invalidity

Benefits for invalidity require, besides certain age limits, residence or work in Sweden. For the self-employed the same regulations apply as for employees.

+ Old-age

For protection in old age there are two systems: an income-related pension and a guaranteed pension. The guaranteed pension is tied solely to residence in Sweden, and thus does not differentiate between employees and the self-employed. Self-employed persons consequently have the same protection. The income-related pension, on the other hand, is a separate additional insurance scheme based on gainful employment – this as well is available to employees as well as to the self-employed.

+ Survivors

Similar to the regulations for old age insurance, the protection of survivors does not differentiate according to social status. In the guaranteed pension system, self-employed persons are insured based upon their residence in Sweden, consequently they enjoy protection through the income-related pension scheme just as employees do.

+ Employment injuries and occupational diseases

The system of protection for employment injuries and occupational diseases compulsorily includes all persons who are gainfully employed: it therefore applies to the self-employed as well as to employees.

+ Family benefits

The regulations of the general system apply here. Family benefits, as a part of the general system of social protection, apply to all families, thus for selfemployed as well as for employees and all other groups in the population.

+ Unemployment

Social protection exists for the self-employed: Self-employed persons have the option of joining the unemployment insurance fund responsible for their occupational branch and consequently acquire entitlement to insurance benefits. In addition, if they fulfil the necessary requirements, they may have claim to unemployment assistance benefits.

UNITED KINGDOM

+ Basic principles

In the United Kingdom the general protection system basically includes the self-employed. For individual regulations, special requirements apply for the self-employed; but there are no further distinctions made within the group of self-employed persons itself.

+ Financing

National Insurance contributions are graduated for the self-employed (in contrast with those for employees) according to three income classes: Self-employed persons with annual profits less than GBP 4,635 (\in 6,253) can apply to be excepted from paying compulsory contributions. Those with annual profits GBP 4,635 (\in 6,253) or more pay a flat-rate contribution of GBP 2.20 (\in 2.97) per week. In addition, those self-employed people with annual profits between GBP 5,225 (\in 7,048) and GBP 34,840 (\in 46,999) also pay an earnings related contribution of 8% and 1% above GBP 34,840 (\in 46,999).

Family benefits are financed according to the regulations of the general system; they are paid for by taxation.

+ Sickness and maternity: Benefits in kind

Under the National Health Service, all residents (including self-employed persons) are entitled to receive health care on the basis of clinical need and which is essentially free at the point of service (entitlement is not linked to the payment of National Insurance contributions). Such services include general medical services (including care provided by general practitioners), acute hospital care and services provided by a district nurse or community psychiatric nurse. Charges can be made for some services, for example, prescriptions for medicines and surgical appliances, but many people receive these services free of charge, either because they have a low income, or because they belong to a category of people, such as pensioners, who are exempt from charges.

+ Sickness and maternity: Cash benefits

Incapacity Benefit is payable to self-employed persons who paid sufficient contributions in one of the last three tax years and have paid or been credited with sufficient contributions in both relevant tax years preceding the one of the claim for benefit. There are two rates of benefit: GBP 61.35 (€ 83) per week is paid for the first 28 weeks and GBP 81.35 (€ 110) per week thereafter. The self-employed, however, have no claim to Statutory Sick Pay (GBP 72.55 (€ 98) from the beginning of sickness) because this is paid by employers.

Maternity Allowance is payable to women who have been self employed in at least 26 weeks out of the 66 weeks, ending with the week before the baby is due, and have average weekly earnings of at least GBP 30 (\in 40). It is paid for 26 weeks at GBP 112.75 (\in 152) or 90% of average earnings if less than GBP 112.75 (\in 152).

+ Long-term care

There is no general scheme of long-term care benefit in the UK, but selfemployed people can get any available help on the same basis as everyone else.

+ Invalidity

The regulations of the general protection system apply.

+ Old-age

Self-employed persons can qualify for the contributory (state) Basic Retirement Pension on the same basis as employed persons, but they generally have no entitlement to a state earnings-related pension.

+ Survivors

The surviving spouse or civil partner of a self-employed person who has died may be entitled to survivor's benefits on the same basis as the spouse or civil partner of a person who was employed, but there is no entitlement to a state earnings-related pension.

+ Employment injuries and occupational diseases

No protection system exists for self-employed persons.

+ Family benefits

The general system applies without special arrangements.

+ Unemployment

No protection system exists for self-employed persons. If they become unemployed, they can claim income-based Jobseeker's Allowance (which is means-tested).

ANNEX 4

MISSOC INFO BULLETIN I 2008

4A. SYNOPTIC REPORT

SYNOPTIC REPORT- MISSOC – INFO 1 DEVELOPMENTS IN SOCIAL PROTECTION IN 2007

I. Introduction

This synopsis of the development of social protection systems in the participating countries attempts to identify the major challenges they face and the ways in which social protection policies are responding to them. As such, it provides an overview of developments in participating countries in four key areas: social integration and labour market inclusion; social security and social services; support for families with children; and pension systems. In reviewing the developments in individual countries, the summary report tries to also make reference to planned reforms in these policy areas and, when possible, attempts to identify broader trends in relation to the developments at the EU level.

According to recent key EU documents, the tasks and challenges in social protection especially concern: active policies for social integration and labour market inclusion with emphasis on individualisation, specialisation and long-term reintegration as well as the development of tools for prevention and rehabilitation; policies to improve the efficiency of expenditure used for social security and social services while at the same time improving their quality; adapting policies in support of family life, to take account of demographic ageing, changes in living conditions and a growing diversity in family relationships; and measures to modify old-age pension systems.

II. Developments throughout Europe¹

1. <u>Social integration and labour market inclusion:</u> <u>Multi-faceted approaches</u>

+ The overall context

The 2007 Joint Report on Social Protection and Social Inclusion² emphasised the close link between social integration and labour market inclusion in its assessment of the current state of affairs in the following way: "Active inclusion emerges as a powerful means of promoting the social and labour market integration of the most disadvantaged. Increased conditionality in accessing benefits is a major component, but this must not push those unable to work further into social exclusion. While most Member States champion a balanced approach combining personalised labour market support, including skills training, for those who have the potential to work, and accessible, high-quality social services, more attention needs to be given to ensuring adequate levels of minimum resources for all, balanced with making work pay."

This assessment reflects the fact that active inclusion has been at the forefront of national policies for some time now and continues to be so. As such, countries have continued their work on improving active inclusion policies, intensifying their focus and upgrading system incentives for activation. Austria has adopted a series of measures to modernise rules for accepting employment by tailoring them more closely

to the situation of the job-seeker. Germany introduced legislative measures to promote the long-term integration of the unemployed in the labour market, especially older persons above 50 years of age and youth entering the labour market. Luxembourg has introduced changes to unemployment legislation emphasising reactivation of job-seekers through individual activation agreements and promoting employment of young people through instruments offering real employment prospects. Slovakia has introduced amendments broadening active labour market policy instruments as well as increasing allowances for targeted instruments. Slovenia has introduced more long-term planning within active employment policy to increase effectiveness and introduced changes aimed at the activation of recipients of social assistance. The UK has also intensified services for job-seekers unemployed for more than a year. In an attempt to stimulate employers, Sweden has introduced exemptions and reductions from payment of general payroll taxes by employers who employ persons who are unemployed for more than 1 year, receiving long-term sickness or disability benefits and other marginalised groups.

+ Financial incentives to work

An important part of measures aimed at increasing motivation for activation has focused on setting up incentives to financially ease the transition to work for recipients of benefits. The concept of accumulation of benefits with work income has continued to play a key role in this aspect by removing previous financial disincentives of people receiving benefits to find employment. The accumulation of benefits with employment income for low-income workers is being tested in some regions in France and, after evaluation, may be extended to all low-income workers. Ireland has broadened conditions for jobseekers to retain more of their social welfare payment upon finding employment to better cover women and part-time workers. The UK piloted



¹ The overview of developments in individual states reflects developments in Austria, Belgium, Bulgaria, Cyprus, Czech Republic, Denmark, Germany, Estonia, Greece, Finland, France, Iceland, Ireland, Italy, Latvia, Lichtenstein, Lithuania, Luxembourg, Hungary, Malta, The Netherlands, Norway, Poland, Portugal, Romania, Slovenia, Slovakia, Spain, Sweden, Switzerland and the United Kingdom as reported by national correspondents.

² Joint Report on Social Protection and Social Inclusion 2007: Social inclusion, Pensions, Healthcare and Long Term care. European Commission, Directorate-General for Employment, Social Affairs and Equal Opportunities, Unit E2. Manuscript completed in March 2007.

a new "better off in work credit" to ensure that all long-term claimants see a significant rise in their incomes when they take a job. Sweden will introduce changes to make it easier to combine disability benefits with income from work. In Belgium, the social supplement for former unemployed persons and former invalids who find work will continue to be paid for up to 2 years if they have dependants. In Denmark, the trial remission of debt to public services for unemployed persons who start working also served to increase the motivation to move from benefits into work.

+ Integrating and/or retaining people with disabilities into employment

In addition to measures promoting active inclusion mostly through targeted financial incentives, policies also focused on strengthening measures to combat labour market exclusion. Significant efforts were made to counter labour market exclusion due to disability and work-related accidents and diseases through a focus on rehabilitation, measures to prevent work-related disabilities and accidents, as well as incentives for employers to employ persons with disabilities.

Paying close attention to strengthening rehabilitation, Hungary introduced a new rehabilitation benefit for disabled persons able to work with rehabilitation. Sweden will introduce a rehabilitation chain with stricter time frames for assessing work capacity, to speed up return to employment. The UK also reformed incapacity benefits with the goal of active participation in employment activities and launched a pilot program to raise awareness among employers about employment of disabled persons. In Iceland, the disability assessment committee has proposed a massive increase in work rehabilitation and a new system to assess disability and ability to work.

Focusing on work-related disabilities and injuries, Denmark started a campaign to reduce depression related disability. Also Finland has launched a project designed to reduce the amount of depression-related disability. The initiative aims to improve mental health in the working-age population by promoting mental well being at the work places and by targeting depression prevention, treatment and rehabilitation. It also aims to develop a range of best practices concerning people on sick leave due to depression and to enhance their return to work. In Norway, efforts are being continued to decrease the number of people on sick-leave through increased involvement of employers and medical professionals in follow-up activities.

Addressing the role of employers in preventing work-related disabilities and injuries, Denmark is introducing reduction of work accidents contributions for employers that take preventive measures against work accidents and occupational diseases. Belgium introduced a system of differentiation of premiums for employment injuries insurance as an incentive for companies to implement results-related prevention policies. Slovenia has re-examined the quota system for employing workers with disabilities according to the real possibilities in each sector and increased incentives for employers to employ disabled persons above the prescribed quota. Accident insurance reform is also being prepared in Luxembourg.

+ Punitive measures

In addition to active inclusion measures extending opportunities and support, a smaller number of punitive measures were introduced to motivate people to keep or find jobs. To motivate persons to make an effort to stay in work, the Czech Republic introduced the loss of entitlement to unemployment benefits if the unemployed person was laid off because of serious infringement of work duties. In Denmark a minimum requirement of 300 hours worked per year was introduced for persons receiving benefits for more than 2 years. Sweden introduced a reduction in long-term unemployment benefits (from 80% to 70% after 200 days). In the UK, it became mandatory for all lone parents claiming Income Support for 12 months or more with a child aged 5-13 years to participate in work focussed interviews every 6 months. The 18-month limit on social allowances for healthy unemployed persons of working age was first implemented in Bulgaria on 1 January 2008, while eligibility requires at least 9 months registered unemployment without refusal of job vacancy or training.

+ Providing security

Increased activation efforts focused on ensuring that all persons able to work are motivated to find or keep employment also create an incentive to improve social support for those persons, who despite their best efforts are unable to secure an income from work. To better support the attainment of minimum living standards, the Czech Republic initiated a reform of the living minimum system, separating it from housing contributions and introducing a two-tier system differentiating between active and inactive individuals. To increase the income of carers, Ireland has introduced provisions whereby a person who has an entitlement to a non-care related social security payment can retain that payment and also receive an additional half-rate benefit for caring. Bulgaria has introduced a new pecuniary benefit for long-term unemployed persons who are nearing the retirement age but do not yet qualify for a pension. Policy measures regarding social integration and labour market inclusion have thus continued to strive for the delicate balance also stressed in the 2007 Joint Report - increasing the targeting and effectiveness of active inclusion balanced by strengthening social support for those unable to secure an income from work.

2. <u>Social security and social services: Improving quality</u> <u>and cost-efficiency</u>

+ The overall context

In its 2006 communication Implementing the Community Lisbon programme: Social services of general interest in the European Union³, the Commission pointed out that "modernising social services is one of the most important issues facing Europe today" (p. 3). The 2007 communication Services of general interest, including social services of general interest: a new European commitment⁴ reflects the agreement reached in the Protocol on services of general interest annexed to the Lisbon Treaty in outlining the basic principles guiding this modernisation: the role and wide discretion of national, regional and local authorities in align-

³ Implementing the Community Lisbon programme: Social services of general interest in the European Union. Communication from the Commission. (SEC(2006) 516). Brussels, 26 April 2006, COM (2006) 177 final.

⁴ Services of general interest, including social services of general interest: a new European commitment. Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions. Brussels, 20.11.2007, COM(2007) 725 final.

ing services as closely as possible to the needs of the users; respecting the diversity of services, situations, and needs and preferences of users; achieving a high level of quality, safety and affordability, ensuring equal treatment and promoting universal access, and upholding user rights.

National policies have also been aware of this challenge and responded with measures to improve the efficiency of expenditure used for social security and social services while at the same time trying to improve the quality and accessibility of schemes and services. Efforts to improve the efficiency and streamline social security systems and social services focused on controlling expenditure as well as streamlining processes and using the synergies of unified organisation and collection of contributions.

+ Cost containment in health care

Measures to improve expenditure control were especially evident in healthcare. In one approach, measures were introduced to improve the regulation of healthcare expenditure. In France, new financing legislation has reinforced mechanisms to regulate health insurance expenditure. Hungary focused on the re-structuring of hospital capacities, the re-regulation of the pharmaceutical market emphasising tight price competition among pharmaceutical companies and facilitating the prescription of the most effective but lowest-cost medication by practitioners. Lichtenstein has introduced monitoring and quarterly publishing of statutory healthcare insurance costs and services together with quantitative planning for service providers. Luxembourg has intensified the promotional campaign for the use of generic medication and initiated actions to promote prudent use of resources in the hospital sector with regard to consumption of medication and more efficient procurement of medical and non-medical supplies.

In some cases, measures to improve expenditure control in healthcare were also accompanied by tighter reimbursement limits or moderate patient co-payments to increase cost-consciousness. In France, reimbursement limits were introduced on certain healthcare products or treatments. Hungary has introduced moderate visit fees for primary and specialist care as well as moderate hospitalisation fees, with exemptions for minors, mothers, emergency healthcare and other relevant situations. In Netherlands, the no-claims bonus scheme has been replaced by a compulsory excess for insured persons over 18 years of age with compensation for persons with unavoidable long-term health expenses. While moderate charges for visiting ambulatory doctors and hospital stays were abolished in Slovakia, these were partially compensated by limits on specialised ambulatory care brought about by the need for a general practitioner's referral. Changes focusing on increasing competition in the provision of health services and between health insurance funds were introduced among others in Germany. Lichtenstein introduced quarterly monitoring of healthcare expenditure.

On the other hand, expenditure control measures were complemented by a focus on improving the quality and access to healthcare, through strengthening of maximum waiting periods in Denmark and Sweden or introduction of a cap on prescription fees in Austria. Belgium has introduced an end to fee supplements for hospitalisations concerning children accompanied by parents, increased reimbursement for related expenses of cancer patients and their parents as well as simplified reimbursement of expenditure resulting from healthcare treatment accidents. In Cyprus, work is under way to implement the new National Health System with universal healthcare coverage by the end of 2008.

+ Increased efficiency of administration

Most countries have also continued to improve the general efficiency of public administration of social systems. These efforts materialised in the form of simplification and unification of legislation, as was the case with regard to pension benefits legislation in Finland or the new social security framework law with a new structure and more transparent and rigorous financial management in Portugal. They were also manifested through the unification or centralisation of system administration as could be seen in France with the unification of employment benefits and services provision and the unification of unemployment insurance and social security contributions collection. Norway continued the merging of local social insurance and employment offices. Romania continued the centralisation of the collection of contributions and consolidated family and child matters under a single body - the Ministry of Labour, Family and Equal Opportunities. Sweden is continuing the reorganisation of the Social Insurance Agency with a closer cooperation with the Public Employment Service and the Health Care System.

In other instances, specific aspects of system management were improved. In Greece, the focus was on the computerisation of social security institutions, the increased utilisation of pension funds and the speeding up of pension awarding. In Ireland, improved financial planning was carried out for the first time via the first Annual Output Statement for the Department of Social and Family Affairs. Belgium has modernised pension application procedures to allow electronic pension requests by internet and automated the issuing of pension estimates for workers who reach the age of 55. In Finland the employees in the private sector will receive (from 2008 on) annual pension data records containing information on the accrued pension provision and an estimate of the pension amount. The public sector will be covered by the system in 2010. Fraud prevention was not a major focus of initiatives in the area of social protection, with Austria and Belgium tightening rules for combating non-declared employment by instituting registration prior to start of work and France improving cooperation among public institutions and reinforcing checks. In Sweden, a Commission is currently investigating the incidence and size of fraud in the welfare systems

+ Quality of social services

In the field of social services, a focus on improving and extending outpatient home-based care is apparent from the new legislation in the Czech Republic and Germany or the introduction of complete pension payment to pensioners in care in Finland. The same focus should be reflected in the new legislation on social services being prepared in Slovakia. These developments reflect a growing focus on providing quality social services closely tailored to the needs of individual users within their natural environment.

⁵ Services of general interest, including social services of general interest: a new European commitment. Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions. Brussels, 20.11.2007, COM(2007) 725 final.

At the same time, significant work remains to be done in systematically promoting the quality of social services. In this regard, a voluntary EU quality framework providing guidelines on the methodology to set, monitor and evaluate quality standards and support bottom-up initiatives aimed at developing voluntary quality standards and exchange of experience proposed by the Commission in its 2007 communication⁵ could replicate the success brought about by coordination in other areas.

3. Supporting families with children

+ The overall context

The Commission's 2006 communication The demographic future of Europe – from challenge to opportunity⁶ recognises family policies promoting the demographic renewal in Europe as the first key element to constructively addressing the demographic challenge facing Europe today. The common aim of these policies is to (i) reduce the inequality of opportunities offered to citizens with and without children, (ii) offer universal access to assistance services for parents, in particular for education and care for young children, and (iii) manage working hours to offer both men and women better opportunities for lifelong learning and for balancing their private and working lives.

The 2007 Commission's communication Promoting solidarity between the generations⁷ reflects upon the need to adapt policies in support of family life to take account of demographic ageing, changes in living conditions and the growing diversity in family relationships, acknowledging the broader context of family policies within public polices influencing family situations. It also reiterates the trend towards the decentralisation of activities, individualisation of rights and benefits, and targeting of expenditure to increase the incentive to work while paying due attention to the fact that family policies are increasingly taking account of the changes in aspirations and practices concerning the respective roles of men and women in society. Measures undertaken within the area of family policies on the national level have continued to reflect these challenges even if the multitude of approaches makes it harder to identify clear trends.



+ Increase of child allowances

Governments continued to extend direct state support for families with children with the main focus remaining on supporting families with more than one child, either through direct increases in state support or the broadening of entitlement conditions flexibility. Portugal has increased the family allowance from the second child onwards. Austria has increased support for families with at least 3 children by increasing child benefits for the 3rd and subsequent child and also by significantly increasing the family income threshold for entitlement to multiple children's allowance. Estonia raised the child allowance for the third and subsequent child. A general non-contributory single payment benefit for childbirth was introduced in Spain. In contrast, Slovakia introduced an increase in childbirth allowance for the first child only.

+ Wider eligibility basis for entitlement to family benefits

To promote the combination of state family support and family income from work, increased flexibility of entitlement rules was introduced in various ways. Austria introduced a flexible system of parental allowance allowing families to choose the length of the benefit as well as for parents to alternate in its receipt according to the specific needs of the family. Cyprus extended Maternity Allowance from 16 to 18 weeks. Conditions for paternal benefit were also relaxed in Estonia. Luxembourg replaced the tax credit for children by a tax bonus to better support low income families. In the Netherlands, a new means-tested child allowance for each child has replaced the tax credit for children to provide income support for low-income families. New legislation in Spain brought maternity and paternity benefits for self-employed persons in line with benefits for employees. Slovakia introduced a child benefit supplement for pensioners caring for children, who are not eligible for the child tax bonus in place. France improved the conditions for maternity leave of self-employed mothers. Belgium increased support for single parent families with children and adopted a more flexible approach in determining orphan allowances based on contribution history of either deceased or surviving parent.

+ Various measures

Still, state support for families and its modifications remained varied. Parental allowance was increased across the board in the Czech Republic. Monthly family allowance for children was equalised for every child in Bulgaria and the beginning-of-school-year lump-sum cash benefit was modified to allow payment in kind, if it is deemed appropriate by the school. Lithuania increased maternity benefits and extended the payment of child benefits to all children under 18 or attending school. Portugal introduced a prenatal allowance. In France, child benefits (school year allowance) were modulated according to age of child. Latvia replaced the state-financed child-raising allowance for employed persons by a parental benefit financed from social insurance contributions. Germany introduced a new parental allowance and parental leave replacing the previous child-raising allowance.

- ⁸ Presidency Conclusions. Brussels European Council 8/9 March 2007, Doc. No. 7224/07.
- 9 COM(2007) 244 final.

⁶ The demographic future of Europe – from challenge to opportunity. Commission Communication. Brussels, 12.10.2006, COM(2006) 571 final.

⁷ Promoting solidarity between the generations. Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions. Brussels, 10.5.2007, COM(2007) 244 final.

Despite the variety of approaches, family policy is increasingly becoming an issue of common interest. This is not only attested by the establishment of the European Alliance for Families at the 2007 Spring European Council that will "serve as a platform for the exchange of views and knowledge on family-friendly policies as well as of good practices between Member States."⁸ It has already been given a more specific shape by actions presented by the Commission in its communication Promoting solidarity between the generations⁹ through a high-level group of government experts on demographic issues, European, national, regional and local forums and networks, an observatory of best practices and relevant research tools. These developments are creating further possibilities for learning from best practices throughout Europe in developing family policies that will reflect the changing shape of European families in providing them the support they need and deserve.

4. Pension systems:

Improving coverage and long-term financial sustainability

+ The overall context

The 2007 Joint Report on Social Protection and Social Inclusion¹⁰ reflects the general trend of adapting pension systems "to increases in life expectancy and creating a transparent relationship between contributions and benefits," while acknowledging that "ageing means that pension adequacy increasingly depends on more people working – and working longer", whether through reducing access to early retirement schemes or increasing incentives and opportunities to work longer." At the same time, the report reiterates that "the long-term sustainability of public finances is still at risk" and coping with this is a "key policy challenge." It concludes that "the issues of pension adequacy, sustainability and modernisation need to be considered jointly." In tune with these assessments, pension systems continued to be modified to balance broad coverage of population and long-term financial sustainability of old-age pension systems.

+ Increasing retirement age

Taking into account increasing life expectancy, the trend of increasing retirement age has continued in several countries. In Denmark the retirement age will be increased from 65 to 67 years by 2024-2027. In Germany, a gradual increase of the retirement age from 65 to 67 will take place by 2029. In Malta, the current retirement age of 60 for women and 61 for men will be increased to 65. In the UK the retirement age will rise from 65 to 66 by 2024-2026, to 67 by 2034-36, and to 68 by 2044-2046. The introduction of so-called "windows" deferring old-age pension entitlements by up to 6 months has in practice also raised the retirement age review and adjustment every 5 years, with a 15 year notice guaranteeing security.

+ Restricted use of early retirement schemes and encouraging prolonged careers

To keep pension expenditure in check and promote employment of older persons, changes to pension system have continued to target early retirement conditions. In France, early retirement rules continued to be tightened by increased employer contributions. Hungary has instituted a minimum early retirement age of 60 for men and 57 for women, with at least 38 years of work. Portugal has introduced an increased reduction in early retirement pensions. In Slovakia a cap on early retirement has been introduced by limiting eligibility to only 2 years prior to retirement age. Belgium has introduced stricter rules concerning preretirement age pensions, keeping exceptions before the age of 60 for long careers, arduous jobs, workers with serious physical problems and for employees of companies in difficulty or undergoing reorganisation. In addition to introducing more strict rules for early retirement, Italy also introduced more favourable conditions for workers carrying out arduous work are older than 57 years of age and having paid contributions for 35 years.

Tightening the rules for early retirement was accompanied by measures to reward long work records. Such measures were adopted in Lithuania for persons with work record longer than 30 years. Portugal also improved the protection of long contributory work careers. Belgium introduced additional entitlements for those continuing to work after the age of 62 or after working more than 44 years and introduced a fixed prosperity-linked bonus depending on length of work career. Bulgaria has also introduced a bonus for persons continuing to work after retirement age and having worked for 37 years (men) or 34 years (women). New legislation introduced in Iceland allows persons over 70 years old to earn income from employment without affecting the amount of the national pension. In Switzerland, measures to motivate longer work careers are being considered in the context of the occupational pension scheme (2nd pillar).





¹⁰ Joint Report on Social Protection and Social Inclusion 2007: Social inclusion, Pensions, Healthcare and Long Term care. European Commission. Manuscript completed in March 2007.

In addition to measures targeting early retirement and rewarding longer work careers, some changes also targeted the more technical aspects of pensions systems. To ensure sustainability of the pension system, a cap on the highest pensions and a financial sustainability factor into pension calculation was introduced in Portugal. On the other hand, Romania abolished maximum limits in the pension calculation formula and broadened the contribution base for the pay-as-you go system.

+ Extended coverage of pension schemes

In addition to addressing long-term sustainability and increasing life expectancy, social security rules were modified in some countries to broaden and improve system coverage, especially of groups of persons without full-time work income. In Austria, coverage was extended for those providing care for relatives. Malta adopted measures to extend coverage for parents caring for children and part-time workers. In Romania, changes extended coverage to all self-employed persons while also extending coverage through the reduction of exemptions and broadening of the voluntary insurance regime. New legislation introduced in Spain integrated self-employed agricultural workers into the general self-employed and autonomous workers scheme and extended coverage for self-employed workers. The UK introduced changes to ensure fairer access to state pensions for women by decreasing minimum qualifying years and improving credits for parental caring duties. Measures to universalise coverage for parents caring for children, i.e. not only mothers but also for fathers, were adopted in Czech Republic. Italy has relaxed the rules for pooling contributions for pension entitlement from different schemes without the need to transfer contributions (from a minimum of 6 years to a minimum of 3 years within a given scheme).

In some countries, work was continued on a more systematic expansion or revision of the set-up of old-age pension systems. In the UK, an increase and simplification of state pensions has been complemented by obligatory enrolment in workplace pension schemes and introduction of personal accounts for low earners. In Ireland, the Government presented a Green Paper setting out the options that might be considered for future pension development including maintaining the status quo, universal provision, enhancing social security pensions, alternative tax incentives and mandatory approaches. On the other hand, an effort to unify various pension schemes was initiated in France as well as in Portugal, while conditions of awarding special (miners') pensions were tightened in Poland.

+ Strengthening of the insurance principle

A number of countries have also continued work on the introduction of defined-contribution schemes, where the pension depends on contributions and interest earned on them during a working lifetime. Romania introduced private pension funds with gradually increased contribution rates. Bulgaria increased contributions to compulsory private pension insurance (in parallel with decrease of contribution to state pension insurance funds) and introduced voluntary occupational schemes as a supplement to the pension system. And following the first 3 years of the functioning of the funded pension scheme, Slovakia has enacted a temporary period to enter or opt-out of the funded pension scheme. Since these systemic reforms are only in their beginnings, it will be extremely interesting to observe their impact on the financial sustainability of social security systems and countries' abilities to address demographic changes.

III. Looking ahead

In the area of social integration and labour market inclusion there is general orientation towards the specific needs of disadvantaged groups on the labour market. New measures are being implemented to activate both employees and employers. Various combinations of benefits and income from work are being created, even tailored to specific groups, utilising a combination of services, benefits and tax tools. Growing attention is being paid to prevention and rehabilitation of work-related disabilities and injuries. Social integration policies not only try to combat exclusion but aim to improve the social support for those who are active but unsuccessful in securing sufficient income from work.

A second major trend can be seen with regard to the management and financing of social protection, especially through regulations to improve expenditures, concentration on efficiency of public administration of social systems, fine-tuning various aspects of system management, and particular care for the quality of social services. These measures to improve the efficiency of expenditure used for social security and social services, however, come together with trying to improve the quality and accessibility of services. Furthermore, in all countries there are evident efforts to advance and improve the regulation of healthcare, not only with regard to expenditure but also the quality and access to healthcare.

It can also be noted that governments continued to extend direct support for families with children with a greater emphasis on various specific life situations and family forms. The tools of family policies are more decentralised and individualised, while this decentralisation and individualisation takes on different modifications in different countries.

Pension systems continued to be modified to balance broad coverage of population and long-term financial sustainability of old-age pension systems. Among the major trends, we can count the continued gradual increasing of retirement age, promotion of employment of older persons and tightening of early retirement conditions to reward long work records as well as attempts to improve coverage of groups of persons without full-time work income.

Hand in hand with these developments, several countries are in the process of preparing comprehensive changes to social protection systems. Comprehensive social security system reform is under preparation in Finland and a review of social security legislation was started in Malta. A general revision of public policies in terms of efficiency and financial balance is being prepared in France. Ongoing social dialogue about social security reform is taking place in Greece and under preparation in Norway following the political agreement on new models for old-age, disability and early retirement schemes. In Cyprus, reform measures have been proposed to improve the financial sustainability of the Social Insurance Scheme and are currently under discussion with social partners. Reform measures proposed in the National Strategy Report on Pensions are currently also under discussion with social partners in Bulgaria. In the UK a single system of benefits for all persons below retirement age is under consideration.

Prof. Iveta RADIČOVÁ

Document available at: http://www.missoc.org

ANNEX 4

MISSOC INFO BULLETIN I 2008

4B. COUNTRY REPORTS 2008 (3 EXAMPLES)

COUNTRY REPORTS 2008 (3 EXAMPLES: UK - NORWAY AND SLOVENIA)

UNITED KINGDOM

The Department for Work & Pensions (DWP) promotes opportunity and independence for all through modern, customer-focused services. It helps people to achieve their potential through employment, so that they are able to provide for their children and to work and save for secure retirement.

To achieve this DWP has strategic objectives to:

- Reduce the number of children living in poverty
- Maximise employment opportunity for all and reduce the numbers on out-of-work benefits
- Improve health and safety outcomes
- Promote independence and well-being in later life, continuing to tackle pensioner poverty and implement pension reform
- Promote equality of opportunity for disabled people
- Pay customers the right benefits at the right time
- Provide an effective service delivery to individuals and employers

EMPLOYMENT

+ General

Unemployment has fallen substantially since New Deal was introduced in 1997. More than 1.8 million people have been helped into jobs, an extra 300,000 lone parents in work has helped lift 600,000 children out of poverty, and the numbers on Incapacity Benefit are falling, while long-term claimant unemployment for young people has been virtually eliminated. Despite this progress, a number of challenges remain.

More targeted support for those most in need is required to give them the skills and advice they need to get back into work. And for those on incapacity benefits, more focus on capability and what people can do, not on disability and what they cannot do. The paper "Transforming Britain's Labour Market" sets how New Deal worked and an action programme for the future.

http://www.dwp.gov.uk/welfarereform/docs/PMNewD-eal2-01-08.pdf

+ Moving towards full employment

Following public consultation, the Document "Ready for work: full employment in our generation" sets out steps to be taken to move people towards full employment, to improve their skills to have better opportunities for progression.

The main points are

- Lone parents on income support who are able to work will be required to actively seek work once their youngest child is 12 or over from October 2008, 10 or over from October 2009 and 7 or over from October 2010.
- From October 2009, major reforms of the New Deal will see jobseekers who struggle to find work after 12 months of trying referred to specialist intensive help from private, public and voluntary sector providers. These providers will get longer and larger contracts and will be paid on the basis of results.
- A commitment to look further at the idea of a single system of benefits for all people below pension age to provide greater simplicity and incentives to work.

It also introduces measures to ease and encourage the transition from welfare to work and a new emphasis on skills support. These include:

- The national roll-out of the 'In Work Credit' from April 2008, which offers £40 a week (£60 in London) extra support for lone parents;
- piloting a new 'better off in work credit' next year which tops up the earnings of those who have been on long-term benefits so that their weekly in-work income will be at least £25 a week more than on benefits;
- reforms of the '16-hour rule' so that short-term Incapacity Benefit claimants can study for more than 16 hours without losing Housing Benefit;
- more childcare provision through the Department for Children Schools and Families extended school programme;
- and a skills health check for all new benefit claimants.

http://www.dwp.gov.uk/welfarereform/readyforwork/

+ Employablility Skills Programme

A lack of skills can mean some people experience moving between low-skilled jobs and periods of unemployment. The UK has recognised the significance of addressing people's skills needs in the recent publication of the papers "World Class Skills: Implementing the Leitch Review of Skills in England" and "In Work, Better Off: Next Steps to Full Employment". It is important that low-skilled unemployed people have access to flexible training which gives them the skills that employers value, to help them get a job and progress in work. The Employability Skills programme will provide this.

The Employability Skills programme offers a package of learning leading to both basic skills and employability qualifications. The programme aims to help Jobcentre Plus customers:

- Enhance their employability skills
- Secure and sustain employment
- Ensure that continue to develop their skills once they gain employment.

www.ius.gov.uk/publications-leitchreview.htm www.dwp.gov.uk/welfarereform/in-work-better-off/in-work-betteroff.pdf

+ Local Employment Partnership (LEP)

The LEP involves major employers in both the public and private sectors giving a commitment to offer guaranteed job interviews for people who have been on benefit and who are ready and prepared to work. These companies help people to develop the skills and confidence they need to take advantage of these opportunities.

SICKNESS

The Welfare Reform Act 2007 received Royal assent on 3 May 2007. It makes provision for a new benefit Employment and Support Allowance (ESA) which will be an integrated contributory and income based allowance.

From October 2008 Incapacity Benefit and Income Support, paid on grounds of incapacity, will be replaced with ESA. It will be paid to new claimants and will be the main working age benefit for people with health conditions and disabilities. Existing claimants will remain on Incapacity Benefit and Income Support.

Unless they have the most severe disabilities or health conditions, those entitled to ESA may have their benefit reduced if they do not participate in work-focused interviews and eventually engage in work-related activities.

DISABILITY

+ Employability Initiative

Employ Ability is a pilot exercise that will be rolled out in 2008 nationally. It will:

- Challenge negative assumptions about the skills and talents of disabled workers, and those with long-term health conditions and address misconceptions of risk (e.g. adaptations to the workplace for the disabled employee are costly – in most cases the costs are negligible or cost nothing)
- Build the confidence of employers in recruiting and retaining disabled workers and promote best practice examples of how this is being successfully done to the benefit of business.
- Improve employers' access to practical information, making it easier for them to locate relevant sources of advice and support for their situation.

Employ Ability will advise employers not only on best practice in recruiting disabled employees but also in retaining current employees who become disabled while in the job – this is necessary in order to prevent those employees from having to leave their job. The current employment rate of disabled people is 50% compared to 74% for nondisabled people.

+ Disability Rights

During 2007 the Office for Disability Issues (ODI) and key government departments have made good progress towards equality for disabled people, but there's a long way to go. Early in 2008, the ODI will launch an independent living strategy aiming to give disabled people more choice and control over the services and support they need.

http://www.officefordisability.gov.uk/

PENSIONS REFORM

The Pensions Act became law on 25 July 2007. It makes changes to the State Pensions system which includes:

- raising the State Pension age gradually to reflect increasing longevity. The first increase from 65 to 66 will take place between 2024 and 2026; the second increase from 66 to 67 will occur between 2034 and 2036; and the third increase from 67 to 68 will take place between 2044 and 2046.
- from 2010, making the system fairer for women and carers by reducing the number of qualifying years needed for a full Basic State pension to 30 and better recognising and rewarding caring duties through credits
- making the Basic State Pension more generous by linking it to earnings rather than prices
- reforming the State Second Pension so it becomes a simple, flat-rate weekly top-up to State Pension
- proposing a duty on employers to automatically enrol jobholders into, and to contribute to, a qualifying workplace pension scheme
- introducing the concept of personal accounts which are described as a 'simple, low-cost pension saving scheme' aimed at moderate to low earners who currently do not have access to a workplace pension scheme. This would be overseen by a Personal Accounts Delivery Authority
- setting out a compliance regime for the new duties on employers.

http://www.dwp.gov.uk/pensionsreform/

PENSION POVERTY

This Public Service Agreement (PSA), led by the Department for Work and Pensions with major contributions from the Departments of Health and Communities and Local Government, brings together action across Government to tackle pensioner poverty and to ensure that the UK adapts well to an ageing society by promoting greater independence and well-being in later life.

The PSA five key indicators to assess progress over three years are;

- Employment rate of those age 50-69 and the percentage difference between this and the overall employment rate
- Pensioner poverty
- Healthy life expectancy at 65
- Over 65s satisfied with home and neighbourhood; and
- Over 65s supported to live independently at home

It provides holistic planning and delivery by national and local service providers. Strong local leadership (with effective Local Area Agreements (LAAs) and Local Strategic Partnerships, involving wide partnerships of Government, private and third sector organisations and older citizens themselves) will be critical to further improving later life in the UK.

In addition, it outlines further reforms that the Government will take forward, over the three year period, to promote improvements in independence and well-being in later life for the longer term. These include the pension reforms. (see above)

CHILD POVERTY

A new unit has been set up bringing together experts from the Department for Work and Pensions (DWP) and the Department for Children, Schools and Families (DSCF) with the remit of co-ordinating and developing policy with HM Treasury and across Government that will support the ongoing work to end child poverty.

The Child Poverty Unit renews the UK commitment to eradicating child poverty. It will work across Government so it can think and act strategically, sharing expertise and joining up resources to help end child poverty.

Most three and four year-olds have access to free childcare, due to £3 billion of annual funding by Government, which helps many parents get back to work. The UK has also committed to spending £2 billion more by 2010 on public services which will be aimed at breaking cycles of deprivation and help to meet the 2020 target. These focus on childcare, raising attainment, improving schools, reducing health inequalities and improving school transport.

The UK is also committed to narrowing the gap in educational achievement between children from deprived backgrounds and those who are better off. This will provide a path out of poverty for generations to come.

Document available at: http://www.missoc.org



NORWAY

INTRODUCTION

The most important step regarding the pension reform in 2007 was the parliamentary settlement on the new models for earning and drawing pensions. Then, a more detailed proposal for a new scheme on old-age pension could be carried out, and the proposal is now at the consultation stage.

Regarding the outstanding questions, two important documents have been delivered. The committee whose task was to examine a new scheme on disability pension and its relationship with the early retirement schemes presented its report in May 2007, and the consultation stage was finalised in October 2007. On the basis of this work, the Government will come up with a proposal for a new disability benefit in 2009.

The committee, whose task was to propose necessary adaptations of the agreement-based early retirement scheme (AFP) in the private sector, has also finalised its work and different models have been presented. The report will be the basis for the negotiations between the social partners during the spring of 2008 and this matter is politically very sensitive.

Regarding the Letter of Intent regarding a More Inclusive Working Life and its second objective, increasing the recruitment of functionally impaired persons, specific target goals were set by the supplement agreement in May 2007. The expected retirement age for persons at the age of 50 has risen from 63.5 years in 2005 to 63.9 years in 2007, and this is in line with the third objective.

The new labour and welfare administration is still in the transitional period 2006-2009, and 146 NAV (National Office for Social Insurance Abroad) offices had been established by the end of 2007. About 280 NAV offices will be established in 2008 and 2009. The Labour and Welfare Directorate proceed with the reorganisation in order to focus on the target groups for the front-line service, customers who have difficulties to transfer to active work-oriented measures and customers who need an overall solution.

PENSION REFORM – PROPOSAL ON A NEW SCHEME FOR OLD-AGE PENSION

In March 2001, the Government appointed the Pension Commission whose task was to come up with a proposal for a pension reform. The background concerned combined effects of an ageing population and an increase in pension expenditure far beyond the expected rate of growth of the economy. The Report from the Pension Commission (PCR NOU 2004:1) was published on 13 January 2004 and followed by a political debate and a broad consultation process that formed the basis for the former Government's Report to the Storting (the Parliament) on Pension Reform (Stortingsmelding 12/2004-2005), which was submitted on 10 December 2004.

On 19 May 2005, a parliamentary consensus on the principles of the reform was reached and on 26 May 2005, the Storting requested the Government to proceed with a reform on the basis of the agreement. The main principle of a new and more sustainable pension system is that work participation should pay in respect of acquiring pension rights, and accordingly, there should be a clearer correlation between work participation throughout a person's working life and the pension benefit, and all working years should give rise to pension entitlements. Annual indexation of old-age pensions corresponding to the average rise in prices and wages and adjustments for changes in life expectancy at retirement age should also be implemented.

On 20 October 2006, the Government presented to the Storting the White Paper on Earning and Drawing Old-Age Pension from the National Insurance Scheme (Stortingsmelding nr. 5 (2006-2007) Opptjening og uttak av alderspensjon i folketrygden). After having made some minor alterations to the proposal, the parties of the Government and three of the opposition parties entered into an agreement on the new models for earning and drawing pensions that was later adopted by the Storting on 23 April 2007.

The Ministry of Labour and Social Inclusion has prepared a proposal for a new scheme on old-age pension based on the two parliamentary settlements. The proposal was presented on 28 January 2008, and it is now at the consultation stage. The deadline for comments is 28 April 2008. The main elements of the new old-age pension scheme are as follows:

- Annual pension earning equal to 18.1 per cent of income up to 7.1 times the Basic Amount (BA) (approx. NOK 474,000 (EUR 60,000)).
- Annual inheritance gains (supplement calculated on the basis of the mortality rate in the different age groups in the course of the pension earning year).
- Pension earning subject to annual indexation corresponding to increase in wages.
- Flexible old-age pension, full or partial, from the age of 62 provided that the pension entitlement exceeds the level of minimum pension from the age of 67.
- Possibility to combine pension with work without the pension being reduced.
- Annual pension reflects the expected number of years as a pensioner.
- Adjustments for changes in life expectancy shall have effect from the year of 2010 for all new old-age pensioners.
- Annual indexation of old-age pensions corresponding to the annual rise in wages reduced by 0.75 per cent shall apply to all oldage pensioners as of 2010.
- Guaranteed pension at the same level as the current minimum pension, but reduced by 80 per cent of the earned income-based pension.

Persons, who defer retirement, shall receive higher annual old-age pensions, and those persons who consider retirement, will have the possibility to continue working in order to compensate for reduced annual pension benefits due to increase in longevity. According to the proposal, pension earning should be possible up to and including the age of 75.

Pension entitlements for unemployed people will be improved in so far as pension earning for this group will be based on income from work previous to the unemployment period and not, as today, on the basis of the unemployment benefits.

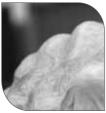
Regarding unpaid care of children and adults (sick, disabled, elderly), care providers shall build up pension entitlements equal to an annual income of 4.5 BA (approx. NOK 300,000 (EUR 38,000)) (today 4 BA). Pension earning for child-rearing periods shall be granted for a maximum period of six years /per child. The conscripts shall build up pension entitlements corresponding to an annual income of 2.5 BA (approx. NOK 167,000 (EUR 21,160)) with effect for new conscripts from 2010.

It is proposed that the 1954-1962 cohorts should be subject to both old and new scheme for old-age pension, in so far as the pension of the 1954-cohort will consist of ninety per cent of an annual pension calculated on the basis of the old scheme and 10 per cent of an annual pension calculated on the basis of the new scheme.

The committee whose task was to examine a new scheme on disability pensions whilst taking into account its relationship with the early retirement schemes presented its report on a new disability benefit and a new old-age pension to persons on disability benefits on 16 May 2007, (NOU 2007:4: Ny uførestønad og ny alderspensjon til uføre). The main element of its proposal was to abolish the current calculation of the benefit as a pension benefit, and instead, to introduce an income security model in line with short-time benefits to people at work. The basis for the calculation should be the average income, up to 6 BA (approx. NOK 400,800 (EUR 50,780)), during the three best out of five years prior to the moment when the disability occurred. The majority proposed that the benefit should amount to 66 per cent (the minority, 64 per cent) of the average income. Also different models in respect of pension earning for person on disability benefits were discussed. The consultation stage was finalised 1 October 2007, and the follow-up of this work is expected to be presented in 2009.

On 13 June 2007, the Minister of Labour and Social Inclusion, Mr. Bjarne Håkon Hanssen invited the social partners to participate in a committee whose task was to propose necessary adaptations of the agreementbased early retirement scheme (AFP) in the private sector. The committee presented its report on 6 February 2008 in which different models were discussed. The report will be an important contribution to the negotiations between the social partners during the spring of 2008.

Adaptations of the rules on occupational pension schemes, both in public and private sector, as well as the rules on survivors' benefits are also necessary and remain to be solved.





FOLLOW-UP OF THE LETTER OF INTENT REGARDING A MORE INCLUSIVE WORKING LIFE (IW AGREEMENT) (INTENSJONSAVTALEN OM ET MER INKLUDERENDE ARBEIDSLIV 2006-2009)

The Tripartite Agreement on a More Inclusive Workplace between the Government and the social partners was concluded in 2001 and its three objectives were as follows: First, reduce sickness absence by 20 per cent by the end of the year 2005 compared to the situation in the second quarter of 2001, second, stimulate the inclusion into the workforce of more people with impaired functional capacity and third, raise the effective retirement age.

Even though none of the three objectives had been achieved, the Government and the social partners considered the IW agreement to be an appropriate means to obtain a more inclusive working life and to contribute to keeping people in work and off benefits. Accordingly, the parties to the previous agreement entered into a new agreement towards the end of 2005, the Letter of Intent regarding a More Inclusive Working Life for the period 2006-2009. Four supplementary agreements have been concluded, three in 2006 and the fourth on 15 May 2007.

It is a common understanding that the overall objectives are to counter sickness absence, increase focus on job presence and prevent exclusion from working life, and to increase the recruitment of persons who do not have an employment relationship. It's also agreed to intensify preventive measures regarding health and safety at work. A joint goal for all the objectives is to reduce the proportion of persons receiving sickness benefits, rehabilitation benefits and disability benefits from the National Insurance. In 2005, the number of persons on these benefits was 18.8 per cent of the population in the age group 16-66 years while the figure was 18.5 per cent in 2007.

A reduction of sickness absence by 20 per cent compared to the situation in the second quarter of 2001 continues to be one of the objectives, and the Government has committed itself to preserve the present scheme of sickness benefits unless otherwise agreed by the parties. The sickness absence remained unchanged at 6.8 per cent in the third quarter of 2007 compared to the third quarter of 2006. However, the sickness absence in the third quarter of 2007 was 8.3 per cent lower than in the third quarter of 2001.

As of 1 March 2007, new measures to follow-up people on sick leave came into effect. The IW-enterprises must have drawn up a follow-up plan at the latest six weeks (earlier eight weeks) after the sick leave started. In connection with the plan, the employee must have tried workrelated activities and the employer has to carry out required initiatives and implement necessary adaptations at the workplace. The involvement of the employee in question and the doctors or other therapists responsible for the treatment, have been extended through obligatory "dialogue meetings" between all the relevant parties, within 12 weeks at the latest. The Labour and Welfare Administration and the Labour Inspection Authority have been also strengthened enabling these authorities to follow up the individual cases, including carrying out controls and sanctioning. The Labour Inspection Authority will also focus in particular on preventive measures in the working environment.

Regarding the second objective, increasing the recruitment of functionally impaired persons, it is agreed on the following goals: the percentage of persons on long-term sick leave (13 weeks or longer) who return to work four weeks after the sickness benefit period should be more than 70 per cent, increase the percentage of persons on long-term sick leave (13 weeks or longer) who start attending vocational rehabilitation during the sick leave period by at least 2 per cent, and increase the percentage of functionally impaired persons who go from social security benefits to work by 45 per cent. Regarding the latter, the proportion remained unchanged in 2007 compared to 2006, and it seems to be stable at approximately 40 per cent, i.e. 5 per cent below the target figure.

As regards the third objective, it was agreed to increase the expected retirement age, which was 63.5 years in 2005, for persons at the age of 50 by at least 6 months. The figures provided for 2007 confirm the positive trend since 2004, as the expected retirement age had risen to 63.9 years.

THE NEW LABOUR AND WELFARE ADMINISTRATION - THE NAV REFORM

In December 2001, the Norwegian Parliament (the Storting) instructed the Government to work out a proposal on coordination of the National Insurance Service, the Employment Service and the Social Welfare Service. The objectives were as follows: more people in work and fewer on benefits, a more customer-friendly, customer-oriented service, a coordinated and efficient labour and welfare administration, and focus on the individual person's total need of assistance.

On 31 May 2005, the Storting approved the proposal for a new labour and welfare administration, [Stortingsproposisjon nr. 46 (2004-2005)], and on 16 June 2006, the law on the organisation of a new labour and welfare administration, [Odelstingsproposisjon nr. 47 (2005-2006)], was adopted.

The Directorate of Labour and Welfare was established on 1 July 2006 on the basis of the two former directorates, the National Insurance Administration (Rikstrygdeverket) and the Directorate of Labour (Arbeidsdirektoratet). All the County Offices (19) were established in 2006, and these offices are responsible for the local cooperation agreements with the municipalities. At local level, the former National Insurance Offices and the Employment offices will be gradually merged into NAV offices during the transitional period 2006-2009. By the end of 2007, 146 NAV offices had been established, and about 280 NAV offices will be established in 2008 and 2009.

The target groups for a joint front-line service are firstly, customers who continue receiving benefits and are difficult to transfer to active workoriented measures, and secondly, customers who need an overall solution. In order to focus on the target groups, the NAV Office shall mostly deal with discretionary decisions, for example decisions on vocational rehabilitation and temporary disability, and other tasks that require closer individual guidance.

Decisions concerning entitlement to social security benefits whereby the conditions are more objective and rather mandatory will be carried out by units at county level and organised as NAV Special Services. Decisions and other duties in relation to pension benefits will be carried out by five regional pension units also organised as NAV Special Services. The establishment of these units are planned to take place during 2008.

In line with the reform, social financial assis¬tance will be an integrated part of the whole range of services provided by the NAV Of¬fice. Also the new Individual Qualification Program (kvalifiseringsprogram) with the objective to include more recipients of subsistence allowance in work oriented activities will be provided by the NAV Office. Therefore, the Government has decided that these tasks and some other measures in connection with the action plan against poverty shall be transferred from the Directorate for Health and Social Affairs to the Labour and Welfare Directorate in 2008.

All tasks in connection with health care services including reimbursement have been organised as NAV Special Services through six regional units and one national unit. It is decided that these units shall be transferred to the Directorate for Health and Social Affairs before 2010.

Annex - Access to official documents in Norway

Legal texts: www.lovdata.no Other official documents: www.regjeringen.no Pension reform: www.pensjonsreform.no

Document available at: **www.missoc.org**



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SLOVENIA

There were no major changes to social protection legislation in Slovenia in 2007. There was, however, an important change as regards adjustment of several social security benefits. Based on the Act regulating adjustments of transfers to individuals and households in the Republic of Slovenia, which has been in force since January 2007, social security benefits are adjusted according to the growth of the consumer price index. The main goal of the act is to create additional incentives for people's work activity.

The main developments and changes in the field of social protection are as follows:

EMPLOYMENT POLICY

Based on the Employment and Insurance against Unemployment Act (ZZZPB), the Government of the Republic of Slovenia, after consulting its social partners, adopts the Active Employment Policy (AEP) programme of measures for an individual budget or planning period. In accordance with the provisions of the ZZZPB, the AEP programme contributes to implementing medium-term guidelines and strategic documents for the development of the labour and employment market adopted at the EU level.

The AEP programme contains four measures with individual activities representing the fundamental areas for detailed instruments or programmes of intervention into the labour market in modern societies (in terms of direct influence on the efficient functioning of the labour market and on coordinating supply and demand). The measures should stimulate innovative and specific measures and projects aimed at settling the points at issue and encouraging development actors in local areas.

Up till now the Government of the Republic of Slovenia has been adopting the AEP programme for an individual calendar year – a factor which does not provide for balanced plans for implementation and financing. Consequently, a need has emerged for more stable and administratively effective measures which would include the promotion of greater personal recognisability among employers, the unemployed and the wider public.

The fusion of programmes in terms of their substance and the sounder financing of these programmes are the fundamental measures of the reforms aimed at a more successful employment policy under the Framework of Economic and Social Reforms for Increasing the Welfare in Slovenia. The AEP programme has therefore been drafted for a longer period; it encompasses measures for the period 2007–2013 and the implementation plan for the years 2007 and 2008.

The fundamental strategic objectives of the AEP programme are:

- increasing employment and reducing unemployment;
- preventing the progression to long-term unemployment (reducing the share of the long-term unemployed) and increasing the progression to employment;
- reducing structural unemployment: increasing employability by raising the level of education and qualifications and by improving skills (improving the educational profile of the unemployed);
- increasing the flexibility and competitiveness of employees;
- promoting new employment (increasing the number of supported projects for developing new employment opportunities);

- enhancing social inclusion (reducing the share of recipients of financial compensation and social assistance in cash among the unemployed).
- The activities or instruments included under the individual measures are targeted at all those who are recorded in the registry of unemployed people at the Employment Service of Slovenia, as well as other active and inactive individuals in the labour market.

Priority target groups for inclusion into the programmes should correspond to actions for resolving the identified major problems at the Slovenian labour market. In implementing the AEP programme, the regional factor shall be taken into account, which means that in allocating funds priority shall be given to areas with above-average levels of unemployment.

The Advice and Assistance in Finding a Job measure is intended for all unemployed people and those seeking a job or information on jobs and the needs of the labour market.

The Education and Training measure will give priority to inclusion of the unemployed with no vocational education or with occupations in excess supply, the young unemployed up to 24 years of age, young people without work experience, recipients of social assistance in cash and of financial compensation, and other less-employable unemployed persons, particularly the Roma, the disabled and persons with identified employment handicaps.

The Education and Training measure will also attach priority to implementing training projects for the occupations with the greatest excess demand, which will primarily comprise training for the acquisition of new additional knowledge, skills and competences for vocational areas for which there is an insufficient supply in the Slovenian labour market and which are hence compensated for by employing aliens.

The Promoting Employment and Self-Employment measure will give priority to inclusion of the long-term unemployed, recipients of social assistance in cash and of financial compensation, the unemployed above 50 years of age, young people up to 24 years of age and first-time job seekers, but primarily those without adequate education with regard to the needs of the labour market, as well as the disabled, Roma and other unemployed persons with identified employment handicaps.

Activities within the Programmes for Increasing Social Inclusion measure are intended for all those who are less employable and have failed to find a job with their previous actions. The measure will give priority to integrating the long-term unemployed, recipients of social assistance in cash, the unemployed above 50 years of age, young people up to 24 years of age and first-time job seekers, but primarily those without adequate education with regard to the needs of the labour market, as well as the disabled, Roma and other unemployed persons with identified employment handicaps.



FLEXICURITY MEASURES

The Act amending the Employment Relationships Act has been adopted. Among other matters it is expected to facilitate more flexible employment and greater efficiency, while preserving the adequate protection of employees.

The principal amendments which are expected to lay the grounds for a gradual reform of the labour market include providing greater internal flexibility of employment with the possibility of employing for a particular type of work; expanding the legal basis for the use of the forms of flexible employment; clearer and more efficient regulation of implementing the instrument of giving notice; clearer regulation of remuneration for work; more consistent implementation of the principle of proportionality; more flexible regulation of working time; incentives for conciliating professional career and family life; reducing notice periods; regulating the right to severance pay in case of ensuring continued employment with other employers; the right to additional overtime work; termination of employment of a worker in case of a daily absence from work without leave; and greater protection of employees from discrimination and all forms of ill-treatment.

FAMILY POLICY

The first certificates have been awarded to more than 30 companies which took part in a "Family-friendly enterprise" campaign. The campaign was launched as a part of the "Equal Initiative", carried out by a developmental partnership in cooperation with the Ministry of Labour, Family and Social Affairs.

The main goal of the campaign is to contribute to better reconciliation of family and work, and thus to creating conditions for the freer decision-making of individuals, especially young persons, on how to organise and live their lives.

The Family Violence Prevention Act is currently being prepared. The act will define the notion of violence in families; it will also lay out the role and tasks of state authorities, holders of public authority, public service contractors and authorities of self-governing local communities, as well as non-governmental organisations taking part in consideration of family violence. Actions for protecting the victims of family violence will also be determined.

DISABILITY

In the field of care for the disabled, the National action programme for disabled persons for the period from 2007 to 2013 was adopted. The focus of the programme is the integrated welfare of all disabled persons, not merely from the social security aspect. Objectives within the scope of informing and raising public awareness about possibilities and rights of the disabled to employment, education, health care, culture, sport and religious life, as well as unimpeded access to built environment and information, and independent life are also included. The programme comprises 12 main objectives, together with 124 measures for integrated regulation of all aspects of the life of disabled persons. The objectives of the programme are as follows:

- 1. Increase social awareness of disabled persons, their contribution to the development of society, and their rights, dignity and needs.
- 2. All disabled persons have the right to choose equally and without discrimination where and how they wish to live, and to be fully integrated and participating in social life.

- **3.** Provide disabled persons with access to built environment, transport, information and communications.
- **4.** Based on equal opportunities and freedom from discrimination, disabled persons should be provided with access to an inclusive educational system at all levels, as well as to lifelong learning.
- **5.** Provide disabled persons with access to work and employment, without discrimination, in a working environment that is open, inclusive and accessible.
- **6.** Provide disabled persons with adequate living standards, financial assistance and social security.
- 7. Provide disabled persons with efficient health care.
- **8.** Ensure the inclusion of disabled persons into cultural activities and forms of cooperation in the field of equal accessibility of cultural goods.
- **9.** Provide disabled persons with the possibility to participate in sports and recreational activities.
- **10.** Provide disabled persons with the possibility of equal participation in the religious and spiritual lives of their communities.
- 11. Enhance the activities of organisations of persons with disabilities.
- **12.** Detect and prevent violence and discrimination against disabled persons.

The Equalisation of Opportunities for Persons with Disabilities Act is being drafted. Its purpose is to prevent and eliminate disability-based discrimination against disabled persons and to create equal opportunities for disabled persons in all areas of public life. The principles on which the act is based are respect for the human rights and dignity of disabled persons, equal opportunities and non-discrimination of disabled persons, and social respect and acceptance of disability.

Both the programme and the Act were prepared in consultation with representatives of disability organisations.

In addition, the new Regulation on determining employment quotas for disabled persons was adopted. The basis for its adoption is the Employment Rehabilitation and Employment of Disabled Persons Act. After the first year of the implementation of the quota system, the Ministry of Labour, Family and Social Affairs carried out an analysis of the employment situation of disabled persons and prepared a few amendments. Accordingly, some changes have been made in certain branches (e.g. quotas have been lowered in fishery, construction, trade, catering, transport, etc. and increased in education, health care and social care).

The new regulation also increases the amount of remuneration for employers who exceed the quotas, from 20% to 25% of the minimum wage per month for each employed disabled person above the prescribed quota.

SOCIAL ASSISTANCE ACT

In January 2007, amendments to the Social Assistance Act entered into force. Changes were adopted mainly to ensure a more transparent and fairer system of social assistance, especially as regards activation of beneficiaries and prevention of abuse in this field.

Document available at: **www.missoc.org**

ANNEX 5 MISSOC CORRESPONDENTS AND SECRETARIAT

MISSOC CORRESPONDENTS AND SECRETARIAT

To ensure the reliability of information published by MISSOC, each participating country is represented by correspondents from the national ministries or institutions that are responsible for the areas of social protection. Please find below the list of persons acting as MISSOC National Correspondents in 2010, following the alphabetical order of country names in their national language.

BELGIUM (BE)

DONIS, Jacques

Service public fédéral - Sécurité sociale, D.G. Politique sociale Centre Administratif Botanique - Finance Tower Boulevard du Jardin Botanique 50, boîte 1 - B-1000 Bruxelles

MATHIEU, Robert

Service public fédéral - Sécurité sociale, D.G. Politique sociale Centre Administratif Botanique - Finance Tower Boulevard du Jardin Botanique 50, boîte 1 - B-1000 Bruxelles

DENMARK (DK)

RASMUSSEN, Uffe B. Ministry of Employment Ved Stranden 8 - DK-1061 Copenhagen K

FROMM, Bente National Social Security Agency Landemaerket 11 - DK-1119 Copenhagen K

GERMANY (DE)

BULGARIA (BG)

BONEVA, Dobrinka Ministry of Labour and Social Policy Directorate of European Integration and International relations 2, Triaditza Str. - BU-Sofia 1051

DRAGANOV, Dragomir

Ministry of Labour and Social Policy - Policies and Strategies Directorate 2, Triaditza Str. - BU-Sofia 1051

SWITZERLAND (CH)

SCHNYDER, Erika Office fédéral des assurances sociales - Affaires internationales Effingerstr. 20 - CH-3003 Berne

MASCETTA, Claudina Office fédéral des assurances sociales - Affaires internationales Effingerstr. 20 - CH-3003 Berne

CZECH REPUBLIC (CZ)

SKÝVOVÁ, Daniela

RIHOVÁ, Petra Ministry of Labour and Social Affairs Coordination of Social Security Unit - MOLSA Na poricnim pravu 1 - CZ-12801 Prague 2

Ministry of Labour and Social Affairs - Dep. of Social Insurance Na poricnim pravu 1 - CZ-12800 Prague 2 ALBERS, Rainer

Bundesministerium für Arbeit und Soziales (BMAS) Referat VI-a-3 - Rochusstr. 1 - D-53108 Bonn

HARDER, Madlen Bundesministerium für Arbeit und Soziales (BMAS) Referat V-b-4 - Rochusstr. 1 - D-53108 Bonn

ESTONIA (EE)

HALLIKA, Evelyn

Ministry of Social Affairs - Social Security Department Gonsiori 29 - EE-Tallinn 15027

NETTAN-SEPP, Agne Social Security Department - Ministry of Social Affairs Gonsiori 29 - EE-Tallinn 15027

GREECE (GR)

RIZOU, Anne

Ministry of Employment and Social Protection Transnational Service for Social Insurance Stadiou, 29 - GR-10110 Athens

PAPAIOANNOU, Sotiria

Ministry of Employment and Social Protection Dept of Social Insurance for Self Employed Persons Stadiou, 29 - GR-10110 Athens

SPAIN (ES)

GARCÍA-PEREA, Pilar National Institute of Social Security C/ Padre Damián 4 - 7° A - E-28036 Madrid

NAVARRO-PERUCHA, Pilar National Institute of Social Security C/ Padre Damián 4-6, 7° A - E-28036 Madrid

FRANCE (FR)

GOUPIL, Marie-Agnès Ministère du Travail, des Relation sociales et de la Solidarité Direction de la Sécurité Sociale 14. avenue Duquesne - F-75350 Paris 07 SP

DELETANG, Nicole Centre des liaisons européennes et internationales de sécurité sociale (CLEISS) 11, rue de la Tour des Dames - F-75426 Paris Cedex 09

ICELAND (IS)

HAUKSDOTTIR, Vilborg Ministry of Health Vegmúla 3 - IS-150 Reykjavík

SVERRISDOTTIR, Hildur State Social Security Institute Laugavegur 114 - IS-150 Reykjavík

IRELAND (IE)

CUNNINGHAM, Paul Dept of Social and Family Affairs, Aras Mhic Dhiarmada, Store Street - IRL-Dublin 1

MOYNIHAN, Denis Dept of Social and Family Affairs, Aras Mhic Dhiarmada, Store Street - IRL-Dublin 1 DONATINI, Vera

Institut national de la Prévoyance sociale Via Giosuè Borsi, 11 - I-00196 Roma

BENETTI, Stefania Ministère du Travail, de la Santé et des Politiques sociales Direction générale pour les politiques de prévoyance Via Flavia, 6 - I-00187 Roma

CYPRUS (CY)

ITALY (IT)

FLORIDOU, Soula

Ministry of Labour and Social Insurance - Social Insurance Services 7 Vyronos Avenue - CY-Nicosia 1465

PSARA, Athina Ministry of Labour and Social Insurance - Social Insurance Services 7 Vyronos Avenue - CY-Nicosia 1465

LATVIA (LV)

SELAKOVA, Laura Ministry of Health Brivibas Street 72 - LV-1011 Riga

LIEPA, Linda Ministry of Welfare Skolas Street 28 - LV-1331 Riga

LIECHTENSTEIN (LI)

BECK, Marita Amt für Gesundheit (AG) Liechtensteinische Landesverwaltung Äulestrasse 51, Postfach 684 - FL-9490 Vaduz

SEELIGER, Juergen Liechtensteinische Alters- und Hinterlassenen-versicherung Gerberweg 2 - FL-9490 Vaduz

LITHUANIA (LT)

JALINSKIENE, Grazina

Ministry of Social Security and Labour Social Policy Analysis and Forecasting Dept A. Vivulskio st. 11 - LT-03610 Vilnius

VYSNIAUSKAITE-RADINSKIENE, Kristina Ministry of Social Security and Labour International Affairs Department A. Vivulskio st. 11 - LT-03221 Vilnius

LUXEMBOURG (LU)

EWEN, Claude

Inspection Générale de la Sécurité Sociale Ministère de la Sécurité Sociale, 26, rue Zithe, Boîte postale 1308 - L-1013 Luxembourg

KRIES, Mady Inspection Générale de la Sécurité Sociale Ministère de la Sécurité Sociale, 26, rue Zithe, Boîte postale 1308 - L-1013 Luxembourg

HUNGARY (HU)

RÉZMÜVES, Judit Ministry of Health

Arany János utca 6-8 - Budapest 1051

LUKACS, Eva Ministry of Health Arany János utca 6-8 - Budapest 1051

MALTA (MT)

MUSÙ Mark

Ministry for the Family and Social Solidarity -EU and Intl. Affairs Directorate 310, Republic Street - ML-Valletta CMR 02

CESARE, Anton

Department of Social Security - International Relations Unit 38, Ordnance Street - ML-Valletta VLT 2000

VORDERMAN, Marloes

Ministry of Health, Welfare and Sport - Health Insurance Department PO Box 20350

MOLENAAR, Robin

Ministry of Social Affairs and Employment Div. for Income Insurance and Provisions Postbus 90801 - NL-2509 LV Den Haag

NORWAY (NO)

RESBERG, Anne-Louise

Ministry of Labour and Social Inclusion P.O. Box 8019 DEP - N-0030 Oslo

SKAUG, Vegard Andreas Ministry of Health and Care Services Department of Municipal Health Care Services P.O. Box 8011-Dep - N-0030 Oslo

AUSTRIA (AT)

PÖLTL, Manfred

Bundesministerium für Arbeit, Soziales und Konsumentenschutz, Abteilung II/A/4 - Stubenring 1 - AT-1010 Wien

FRANK, Margherita Bundesministerium für Arbeit, Soziales und Konsumentenschutz, Abteilung II/A/4 - Stubenring 1 - AT-1010 Wien

POLAND (PL)

KNYŻEWSKA, Joanna

Ministry of Labour and Social Policy - Dept of Migration Nowogrodzka Str. 1/3 - PL-00513 Warszawa

ROŻEK, Elżbieta

Ministry of Labour and Social Policy - Dept of Migration Nowogrodzka Str. 1/3 - PL-00513 Warszawa

THE NETHERLANDS (NL)

PORTUGAL (PT)

GUEDES DE SOUSA, María Conceição

Ministère du Travail et de la Solidarité sociale Direction générale de la Sécurité sociale Largo do Rato, 1 - P-1269-144 Lisboa

PEREIRA DA SILVA, Amélia

Ministère du Travail et de la Solidarité sociale Direction générale de la Sécurité sociale Largo do Rato, 1 - P-1269-144 Lisboa

ROMANIA (RO)

CONSTANTINESCU, Alexandra

Ministry of Public Health General Directorate Foreign Relations and European Affairs Str. Cristian Popisteanu nr.1-3, Sector 1 - 010024 Bucharest

TOMA, Christian Ministry of Labour, Family and Social Security Cabinet of the Minister Str. Dem I Dobrescu nr. 2-4, Sector 1 - 010024 Bucharest

FINLAND (FI)

PALOTIE-HEINO, Tiina Ministry of Social Affairs and Health - Financing and Planning Dpt. PB 33 - FIN 00023 Government

LINDQVIST-VIRTANEN, Carin

Ministry of Social Affairs and Health - Insurance Department PB 33 - FIN-00023 Government

GRANLUND, Tiina Ministry of Social Affairs and Health - Insurance Department PB 33 - FIN-00023 Government

SLOVENIA (SI)

GODINA, Janja

Ministry of Labour, Family and Social Affairs Intl. Relations and European Affairs Service Kotnikova 28 - SI-Ljubljana 1000

BEDNÁRIK, Rastislav

Ministry of Labour, Social Affairs and Family Institute for Labour and Family Research Zupne Nam. 5 - SK-Bratislava 812 41

KOVAC, Jaroslav

PAJU, Jaan

Ministry of Labour, Social Affairs and Family Department of Migration and Integration of Foreigners Spitalska 4-6 - SK-Bratislava - 816 43

SWEDEN (SE)

SLOVAKIA (SK)

Swedish Social Insurance Agency Adolf Fredriks Kyrkogata 8 - SV-10351 Stockholm

ANDERSSON, Patrik Ministry of Health and Social Affairs Fredsgatan 8 - SV-10333 Stockholm

UNITED KINGDOM (UK)

ROWLAND, Chris

Dept. for Work and Pensions - Joint International Unit Visits and Best Practice Exchange Team Level 5C - Caxton House Tothill Street - UK-London SW1H 9NA

The MISSOC Secretariat

The MISSOC Secretariat, appointed by the European Commission, is responsible for the ongoing coordination of the network and the preparation of its publications. These tasks were carried out by

Bernard Brunhes International (BBI)

62 Avenue Paul Deschanel, B-1030 Brussels, Belgium. Tel: (+32-2 240 63 03) Fax: (+32 2 240 63 01) e-mail: secretariat@missoc.org Website:**www.missoc.org**

The secretariat was directed by Jan Spooren and the permanent members were Michael Coucheir, Laura Brehmer, Iolanda Lupu supported by the experts Yves Jorens (Ghent), Iveta Radicova (Bratislava), Konstantinos Kremalis (Athens), John Ditch(York), József Hajdú (Szeged) and Saskia Klosse (Maastricht).

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