Old Age, Disability, and Survivors

Regulatory Framework

First law: 1922.
Type of program: Social insurance and social assistance system.

Coverage

Employed persons; self-employed persons; and unemployment benefit recipients.
Voluntary coverage for certain categories of workers, including unemployed workers without unemployment benefits, parents raising children, students, and people with previous coverage.

Source of Funds

Insured person: 15.5% of gross earnings. (Contribution rates may vary in certain cases.)
There are no minimum earnings used to calculate contributions.
There are no maximum earnings used to calculate contributions.
Voluntarily insured persons contribute 24.35% of a chosen amount which is equal to or above 60% of the average gross wage in the second to last month before the claim is made.
The insured’s contributions also finance work injury permanent disability benefits. The death benefit and funeral allowance are financed under Sickness and Maternity.

Self-employed person: 24.35% of assessed income; farmers contribute 15.5% of assessed income.
Assessed income is equal to gross income minus expenditures.
The minimum assessed income used to calculate contributions is the legal minimum wage.
The legal minimum wage is €748.10 and is adjusted annually according to changes in the prices of basic necessities.
The maximum assessed income used to calculate contributions is 2.4 times the average gross wage of employed persons in Slovenia during the second to last month before the claim is made.
The self-employed person’s contributions also finance work injury permanent disability benefits. The death benefit and funeral allowance are financed under Sickness and Maternity.

Employer: 8.85% of payroll. (Contribution rates may vary in certain cases.)
There are no minimum earnings used to calculate contributions.
There are no maximum earnings used to calculate contributions.
The employer’s contributions also finance work injury permanent disability benefits. The death benefit and funeral allowance are financed under Sickness and Maternity.

Government: Covers the cost for certain groups of insured persons, including war veterans, police personnel and former military personnel; pays employer contributions for farmers; covers any deficit in the event of an unforeseen decline in contributions; finances social assistance benefits; contributes as an employer.

Qualifying Conditions

Old-age pension: The full pensionable age is 63 (men) or age 61 (women) with at least 20 years of contributions.
Age 58 (men) with at least 40 years of contributions or age 57 and 4 months (women) with at least 37 years and 9 months of contributions. Age 65 (men) or age 63 (women) with at least 15 years of contributions.
Employment must cease.
Deferred pension: The pension may be deferred.
The pension is payable abroad under reciprocal agreement.

Disability pension: Paid for the loss of all working capacity (total disability) or a greatly reduced capacity for the usual or similar work (partial disability). The insured must have at least three months of coverage or been insured at the time of the incapacity if younger than age 21; at least 25% of the total possible number of years of coverage if aged 21 to 29; or at least 33.3% of the total possible years of coverage if aged 30 or older.
A board of medical examiners of the Institute for Pension and Invalidity Insurance of Slovenia assesses and reviews the disability.
The disability pension is payable abroad under reciprocal agreement.
Constant-attendance allowance: The allowance is paid to persons residing permanently in Slovenia who require the constant attendance of another person.

Survivor pension: The deceased had at least five years of coverage or received or was entitled to receive an old-age or disability pension.
Eligible survivors are widow(er)s aged 53 or older; children younger than age 15 (age 26 if a student); dependent mothers or fathers aged 58 or older; dependent grandchildren,
brothers, and sisters. Age conditions do not apply if the person is incapable of work.

The pension ceases if the surviving spouse remarries before age 58 (widower) or age 57 and 4 months (widow), except if assessed with a total incapacity for work.

Child’s supplement: Paid if average per capita family income does not exceed a state-determined income limit. The survivor pension is payable abroad under reciprocal agreement.

Death benefit: Paid to dependent family members for the insured’s death.

Funeral allowance: Paid to the person who paid for the insured’s funeral.

Old-Age Benefits

Old-age benefit: If the insured has at least 15 years of coverage before 2000, the monthly pension is 35% (men) or 40% (women) of the insured’s average adjusted earnings during the best 18 consecutive years since 1970 plus 2% (men) or 3% (women) of average adjusted earnings for each additional year of coverage before 2000, up to 20 years, plus 1.5% (men and women) of average adjusted earnings for each year of coverage from 2000.

The insured’s earnings for pension calculation purposes are adjusted according to changes in average wages and pensions.

The minimum old-age pension is 35% of the minimum pension base.

The minimum pension base used to calculate benefits is €551.16 a month.

Deferred pension: The pension is increased by 0.3% for each month of coverage at age 63 (men) or age 61 (women), by 0.2% for each month of coverage at age 64 (men) or age 62 (women), and by 0.1% for each month of coverage at age 65 (men) or age 63 (women). The maximum increase is 7.2%.

Benefit adjustment: Benefits are adjusted twice a year according to changes in the national average monthly wage.

Permanent Disability Benefits

Disability pension: The pension is a percentage of the pension base, according to the length of the coverage period.

If the insured has at least 15 years of coverage before 2000, the monthly pension is 35% (men) or 38% (women) of the pension base plus 2% of the pension base for each year of coverage above 15 years before 2000, and 1.5% for each year of coverage from 2000.

The pension base is the insured’s average adjusted earnings during the best 18 consecutive years since 1970.

If the disability began before age 58, the coverage period used to calculate the pension includes 66.7% of the period between the date the disability began and age 58 (men and women) and 50% of the period from ages 58 to 63 (men) or 61 (women). If the disability began after the person reaches age 58, the coverage period includes 50% of the period from the date the disability began to age 63 (men) or 61 (women).

The minimum monthly pension for a disability that began before age 63 (men) or age 61 (women) is 45% (men) or 48% (women) of the pension base. The minimum monthly pension for a disability that began when aged 63 or older (men) or aged 61 or older (women) is 35% of the pension base.

The minimum pension base used to calculate benefits is €551.16 a month.

The maximum pension base used to calculate benefits is €2,204.64 a month.

Partial disability: The pension ranges from 12.5% to 50% of the full disability pension according to the number of hours worked a day. In certain cases, the partial pension may be increased by up to 40% but must not be greater than 80% of the full disability pension.

Constant-attendance allowance: The allowance is 100%, 70%, or 35% of the supplementary rights assessment base, according to the degree of disability and the assessed need for constant attendance.

The supplementary rights assessment base is €414.50 a month.

Benefit adjustment: Benefits are adjusted twice a year according to changes in the national average monthly wage.

Survivor Benefits

Survivor pension: The monthly pension for one survivor is 70% of the pension the deceased received or would have been entitled to receive; 80% for two survivors; 90% for three survivors; or 100% for four or more survivors.

The pension ceases if the surviving spouse remarries before age 58 (widower) or age 57 and 4 months (widow), except if assessed as totally incapable of work.

Child’s supplement: A supplement is paid.

Benefit adjustment: Benefits are adjusted twice a year according to changes in the average wage.

Death benefit: A lump sum of €237.73 is paid.

Funeral allowance: A lump sum of €507.12 is paid.

Administrative Organization


Institute for Pension and Invalidity Insurance of Slovenia (http://www.zpiz.si), including nine regional units, administers the program.
Slovenia

Sickness and Maternity

Regulatory Framework
First laws: 1922 (sickness) and 1949 (maternity).
Current laws: 2003 (parental care and family benefits) and 2005 (health care and health insurance).
Type of program: Social insurance system.

Coverages
Cash and medical benefits: Employed and self-employed persons and farmers and their dependents.
Medical benefits only: Current and former military personnel, social assistance cash benefits recipients, and all persons residing permanently in Slovenia without coverage.

Source of Funds
Insured person: 6.36% of gross earnings (sickness and medical benefits) and 0.1% of gross earnings (maternity benefits).
There are no minimum earnings used to calculate contributions.
There are no maximum earnings used to calculate contributions.
The insured’s contributions also finance temporary work injury benefits (see source of funds under Work Injury) and the death benefit and funeral allowance (see source of funds under Old Age, Disability, and Survivors).
Self-employed person: 12.92% of assessed income (sickness and medical benefits) (insured farmers contribute 6.36% of assessed income or 18.78% of income from agricultural and forest lands, according to occupation) and 0.1% of assessed income (maternity benefits).
Assessed income is equal to gross income minus expenditures.
The minimum assessed income used to calculate contributions is the legal minimum wage.
The legal minimum wage is €748.10 a month.
The maximum assessed income used to calculate contributions is 2.4 times the average gross wage in the second to last month before the claim is made.
Employer: 6.56% of payroll (sickness and medical benefits) and 0.1% of payroll (maternity benefits).
There are no minimum earnings used to calculate contributions.
There are no maximum earnings used to calculate contributions.
The employer’s contributions also finance the death benefit and funeral allowance (see source of funds under Old Age, Disability, and Survivors).

Government: Covers the cost for certain groups of insured persons and the unemployed; pays for the health care of military personnel, and emergency health care for uninsured persons; finances 92% of the cost of maternity benefits from general taxation; contributes as an employer.

Qualifying Conditions
Cash sickness benefits and medical benefits: There is no minimum qualifying period.
Cash maternity, paternity, and child care benefits: There is no minimum qualifying period. Parental benefits during leave periods are paid to the mother, father, adoptive parent, or any other person caring for the child.

Sickness and Maternity Benefits
Sickness benefit: The monthly benefit is 90% of the insured’s average earnings in the last year for an incapacity that is the result of an illness; 80% for a nonwork-related injury or if caring for a family member; 100% for work-related injuries or occupational diseases, for an organ or blood donation and for quarantine periods, a war invalid, or a civilian invalid of war. The benefit is paid after a 30-day waiting period (the employer pays for the first 30 days) for up to 12 months; from the first day for an organ or blood donation, for quarantine periods, or if caring for a family member.
The minimum benefit is the legal monthly minimum wage of €748.10. The legal minimum wage is adjusted annually according to changes in the prices of basic necessities.

Maternity benefit: 100% of the insured’s average earnings in the last year before maternity leave. The benefit is paid for 28 days before and 77 days after the expected date of childbirth.
The minimum benefit is 55% of the legal monthly minimum wage.
The legal monthly minimum wage is €748.10.
The legal monthly minimum wage is adjusted annually according to changes in the prices of basic necessities.
The maximum benefit is 2.5 times the national average monthly wage.
The national average monthly wage is €1,510.44.
In the event of multiple births or the birth of a child with a mental or physical disability, maternity benefits may be extended by 90 days for each child; for a premature birth for up to 280 days. If parents are raising two children aged 8 or younger at the time of the birth of another child, the benefit is extended by 30 days; if raising three children, 60 days; if raising four or more children, 90 days.
Paternity benefit: 100% of the insured’s average earnings during the last year before the paternity leave period is paid for 15 calendar days and must be taken during the mater-
nity leave period. Up to 75 days of unpaid paternity leave may also be taken until the child reaches age 8.

**Child care benefit:** 100% of the insured’s average earnings in the last year before the maternity leave period is paid for up to 260 days, starting after the maternity benefit ceases.

**Workers’ Medical Benefits**

Benefits include general and specialist care, dental care, surgery, hospitalization, rehabilitation, transportation, drugs, and technical aids. A six-month coverage period is required for eyeglasses, hearing aids, and dental appliances (three months for other technical aids, including orthopedic aids). Medical benefits are provided until rehabilitation.

The Health Insurance Institute provides medical services.

Cost sharing: Children up to age 15 (age 18 if a full-time student or age 26 without coverage in their own right) are fully covered by compulsory health insurance. For other family members, copayments vary according to the type and complexity of the service provided.

Compulsory insurance covers from 10% to 100% of the costs of certain medical benefits.

Persons with an assessed physical disability of at least 70%, persons with disabilities receiving assistance allowances, and social assistance recipients receive free or partially-subsidized benefits.

**Dependents’ Medical Benefits**

Benefits include general and specialist care, dental care, surgery, hospitalization, rehabilitation, transportation, medicine, and technical aids. A six-month coverage period is required for eyeglasses, hearing aids, and dental appliances three months for other technical aids, including orthopedic aids). Medical benefits are provided until rehabilitation.

Family members are insured if they reside permanently in Slovenia (or are covered by a reciprocal agreement). Eligible dependents are a spouse or partner without coverage in their own right and children up to the age 15 (age 18 if a full-time student or age 26 without coverage in their own right).

The Health Insurance Institute provides resources for medical services.

Cost sharing: Children up to age 15 (18 if a full-time student or 26 without coverage in their own right) are covered 100% by compulsory health insurance. For other family members possible copayments vary according to the type and complexity of the service provided. Compulsory insurance covers from 10% to 100% of the costs of certain medical benefits.

Persons with an assessed physical disability of at least 70%, persons with disabilities receiving assistance allowances, and social assistance recipients receive free or partly-subsidized benefits.

**Administrative Organization**


Health Insurance Institute (http://www.zzzs.si), directed by a board of directors and elected representatives of employers, government, and employees, administers cash sickness and medical benefits through 10 regional units and 45 local offices.

**Work Injury**

**Regulatory Framework**

**First law:** 1922.

**Current laws:** 2005 (Act on Health Care and Health Insurance) and 2005 (Act on Pension and Invalidity Insurance).

**Type of program:** Social insurance system.

**Coverage**

Employed persons; self-employed persons, students in vocational training; disabled persons in training; and certain unemployed persons.

**Source of Funds**

**Insured person:** For temporary disability and medical benefits, see source of funds under Sickness and Maternity. For permanent disability benefits, see source of funds under Old Age, Disability, and Survivors.

**Self-employed person:** 0.53% of gross earnings for temporary disability benefits. For permanent disability benefits, see source of funds under Old Age, Disability, and Survivors.

There are no minimum or maximum earnings used to calculate contributions.

**Employer:** 0.53% of payroll for temporary disability benefits. For permanent disability benefits, see source of funds under Old Age, Disability, and Survivors.

The employer pays flat-rate contributions for students in vocational training, disabled persons in training, certain unemployed persons and certain other groups.

There are no minimum or maximum earnings used to calculate contributions.

**Government:** Any deficit caused by a decline in contribution rates for permanent disability benefits.

**Qualifying Conditions**

**Work injury benefits:** There is no minimum qualifying period.
Temporary Disability Benefits
The monthly benefit is 100% of the insured’s average earnings in the last calendar year before the disability began. The benefit is paid from the first day of incapacity until recovery or certification of a permanent disability. The minimum benefit is the legal monthly minimum wage. The legal monthly minimum wage is €748.10. The legal minimum wage is adjusted annually according to changes in the prices of basic necessities.

Permanent Disability Benefits

Permanent disability pension: The monthly pension for an assessed disability that is the result of a work-related injury or an occupational disease is calculated as a percentage of the pension base paid with at least 40 years (men) or 38 years (women) of coverage. The minimum pension is 78.5% of the minimum pension base.

The minimum pension base is €551.16 a month.

The disability is assessed and reviewed by a board of medical examiners of the Institute for Pension and Invalidity Insurance of Slovenia assesses and reviews the disability.

Constant-attendance allowance: The allowance is 100%, 70%, or 35% of the supplementary rights assessment base, according to the degree of disability and the assessed need for constant attendance.

The supplementary rights assessment base is €414.50 a month.

Benefit adjustment: Benefits are adjusted twice a year according to changes in the national average monthly wage.

Workers’ Medical Benefits
Benefits include general and specialist care, dental care, surgery, hospitalization, rehabilitation, transportation, medicine, and prostheses.

All costs arising from accidents at work and occupational diseases are covered.

The Health Insurance Institute provides medical services.

Survivor Benefits

Survivor pension: The monthly pension for one survivor is 70% of the pension the deceased received or would have been entitled to receive; 80% for two survivors; 90% for three survivors; 100% for four or more survivors.

The pension ceases if the surviving spouse remarries before age 58 (widower) or age 57 and 4 months (widow), except if assessed with a total incapacity for work.

Child’s supplement: Paid if the average income for each family member does not exceed a state-determined income limit.

Eligible survivors are a widow(er)s aged 53 or older; children younger than age 15 (age 26 if a student); a dependent mother or father aged 58 or older; dependent grandchildren, brothers, and sisters. Age conditions do not apply if the person is incapable of work.

Benefit adjustment: Benefits are adjusted twice a year according to changes in the national average monthly wage.

Administrative Organization


Institute for Pension and Invalidity Insurance of Slovenia, including nine regional units, administers the permanent disability and survivors program.

Ministry of Health (http://www.mz.gov.si) provides general supervision of the health insurance system.

Health Insurance Institute (http://www.zzzs.si), directed by a board of directors and elected representatives of employers, government, and employees, administers temporary disability benefits and medical benefits through 10 regional units and 45 local offices.

Unemployment

Regulatory Framework

First law: 1927.


Type of program: Social insurance system.

Coverage

Employed persons, including public-sector employees, part-time employees, and self-employed persons.

Voluntary coverage for citizens employed by foreign employers in certain foreign countries and their family members.

Source of Funds

Insured person (employees): 0.14% of gross earnings. The minimum earnings used to calculate contributions are the minimum gross wage defined by law.

The minimum gross wage is €748.10.

There are no maximum earnings used to calculate contributions.

Employer: 0.06% of gross payroll.

Self-employed person: 0.2% of declared income.

The minimum earnings used to calculate contributions are the minimum gross wage defined by law.

The minimum gross wage is €748.10.
There are no maximum earnings used to calculate contributions.

**Government**: Contributes as an employer for unemployment benefit recipients.

**Qualifying Conditions**

**Unemployment benefit**: The insured must have been employed at least nine months in the 24 months prior to unemployment (for part-time employees periods of work are converted into an equivalent full-time period). The insured must be involuntarily unemployed, registered with the Employment Service within 30 days after unemployment occurred, and actively seeking employment.

**Unemployment Benefits**

The monthly benefit for the first three months is 80% of the insured’s average monthly earnings in the last eight months; thereafter, 60%.

The minimum benefit is €350.

The maximum benefit is three times the amount of the minimum benefit.

The duration of the benefit depends on the length of the coverage period. Benefits are paid for up to three months for a coverage period of nine months to four years; for up to six months for a coverage period of five to 15 years; for nine months for a coverage period of 16 to 25 years; and for 12 months for a coverage period of more than 25 years.

Benefit adjustment: Benefits are adjusted annually.

**Administrative Organization**


Employment Service of Slovenia (http://www.ess.gov.si), directed by a managing director and elected representatives of employers, government, and employees, administers the program through its headquarters, 12 regional units, and several local offices.

**Family Allowances**

**Regulatory Framework**

**First law**: 1949.

**Current law**: 2001 (family benefits).

**Type of program**: Universal system.

**Coverage**

Families with children residing permanently in Slovenia or in the EU.

**Source of Funds**

**Insured person**: None.

**Self-employed person**: None.

**Employer**: None.

**Government**: The total cost.

**Qualifying Conditions**

**Child benefit**: Paid for a child younger than age 18. The benefit is paid to a parent or the child’s guardian.

**Birth grant (layette)**: Paid for a newborn child whose father or mother resides permanently in Slovenia.

**Large family allowance**: Paid to families with three or more children younger than age 18 (age 26 if a student, in training, or disabled).

**Special child care allowance**: Paid for a child who is younger than age 18 (age 26 if a student) and needs special medical care. The allowance may be combined with the parent income supplement.

**Parent income supplement**: Paid to a parent who has ceased or reduced work to care for a child younger than age 18 with a severe physical or mental disability. The supplement may be combined with the special child care allowance.

**Family Allowance Benefits**

**Child benefit**: The monthly benefit is paid according to eight income categories and the number of children in the family.

The minimum benefit is paid for children in households with earnings from 82% to 99% of the national average monthly wage in the calendar year before making the claim for the benefit. The minimum benefit for one child living with both parents is €19.88.

The maximum benefit is paid for children in households with earnings of 18% or less of the national average monthly wage in the calendar year before making the claim for the benefit. The maximum benefit for one child living with both parents is €114.31.

Higher rates are paid for the second and third child, according to family income.

Single-parent supplement: Benefits for children living in a single-parent family are increased by 10%.

Child care supplement: Benefits for preschool children who do not receive child care services are increased by 20%.

**Birth grant (layette)**: A lump sum of €280.75 is paid for the purchase of clothing and other necessities.

**Large family allowance**: €393.46 (for three children) and €479.83 (for four or more children) a year is paid.
**Slovenia**

**Special child care allowance:** €101.05 a month is paid; €202.17 for a child in need of constant care.

**Parent income supplement:** The minimum benefit is the legal monthly minimum wage.

The legal monthly minimum wage is €748.10.

Benefit adjustment: Benefits are adjusted annually in January according to changes in the prices of basic necessities.

**Administrative Organization**

Ministry of Labor, Family, and Social Affairs (http://www.mdds.gov.si) administers the program through 62 local social work centers.