

HELLENIC REPUBLIC

MINISTRY OF LABOUR AND SOCIAL AFFAIRS

GENERAL SECRETARIAT FOR SOCIAL SECURITY
GENERAL DIRECTORATE FOR SOCIAL SECURITY
DIRECTORATE OF SPECIFIC INSURANCE AND BENEFITS
DEPARTMENT OF BILATERAL AGREEMENTS AND
RELATIONS WITH INTERNATIONAL ORGANISATIONS

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<u>Subject</u>: "39thAnnual Report on the Application of the European Code of Social Security (Period fromJuly 1st of 2020 to 30th of June 2021)"

TO:

Please find in the Annex below the 39th detailed report of Greece on the application of the European Code of Social Security (article 74 of the Code).

We remain at your disposal.

The Deputy Minister of Labourand Social Affairs

Panagiotis Tsakloglou

ANNEX

39th (THIRTY NINTH) ANNUAL REPORT ON THE APPLICATION OF THE EUROPEAN CODE OF SOCIAL SECURITY

DETAILED REPORT

FOR THE PERIOD FROM JULY 1st OF 2020 TO 30th OF JUNE 2021

(ARTICLE 74)

Part I: General Provisions

Part II: Medical Care

Part III: Sickness Benefit

Part V: Old-age Benefit

Part VI: Employment Injury Benefit

Part VIII: Maternity Benefit

Part IX: Invalidity Benefit

Part X: Survivors' Benefit

Part XI: Standards to be complied with by Periodical Payments

Part XII: Common Provisions

Part XIII: Miscellaneous Provisions

Part XIV: Final Provisions

Reportby the Greek Government, in accordance with Article 74 of the European Code of Social Security for the period from 1stof July 2020 to 30thof June 2021, on the measures taken to give effect to the provisions of the ECSS, ratified by Law 1136/13-3-1981.

I. General Remarks

During the period under examination the following Laws related to the application of the Code were in force:

Part of the Code	Laws
Part I – General Provisions	Law 1846/1951 (Government Gazette 179 A).
	Article 37 of Law 4387/2016
	Article 33 of Law 4670/2020
Part II – Medical Care	Article 33 of Law 4368/2016 (Gazette 21/A'),
	Joint ministerial decision A3(c)/GP/oik. 25132/04-04-2016 (Gazette 908/B'),
	Article 31 of Law 1846/1951, article 148 of Law 3655/2008, article 48 of Law 3996/2011, article 61 of Law 4369/2016, article 22 and 23 of Law 4529/2018, article 37 of Law 4670/2020 and article 29 of Law 4722/2020
Part III – Sickness Benefit	Articles 35 and 37 of the Law 1846/1951, article 36 of the Law 3996/2011.
Part V – Old-Age Benefit	Articles 1,2,28,29, 34 and 37 of Law 1846/1951,
	article 22-51 of Law 2084/1992,
	article 145 of Law 3655/2008,
	article 16 of Law 3863/2010,
	par. E of the article 2 of the Law 4336/2015 and
	Ministerial Decision F.11321/oik. 47523/1570/23-10-2015 (Gazette B, 2311).
	Law No 4387/2016 of 12 May 2016.
	Law No. 4393/2016 of 6 June 2016.
	Law No. 4472/2017 of 19 May 2017.
	Ministerial Decision F80000/oik.21628/936/17-05-2017 (Government Gazette B 1721).

	Law No. 4583/2018 of 18 December 2018.
	Law No. 4554/2018 of 18 June 2018.
	Law No. 4611/2019 of 17 May 2019.
	Law No. 4623/2019 of 9 October 2019.
	Law No. 4670/2020 of 28 February 2020.
	Ministerial Decision F11321/10772/382/9.3.2021 (Government Gazette B 1082).
	Law No. 4798/2021 of 24 April 2021
Part VI – Employment Injury Benefit	Article 26 of the Law 2084/1992, Sickness Regulation IKA-ETAMAYE 25078/28-5-38 (Gazette 112, t. B),
	Articles 34 and 37 of the Law 1846/1951, Law 2084/1992, Law 3655/2008, Law 3863/2010, Law 4336/2015 and Ministerial Decision F. 11321/oik. 47523/1570/23-10-2015 (Gazette B,2311)
	Law No 4387/2016 of 12 May 2016
	Law No. 4611/2019 of 17 May 2019
	Law No. 4670/2020 of 28 February 2020
Part VIII – Maternity Benefit	Articles 39 and 37 of Law 1846/1951, article 9 of the Law 2224/1994, article 11 of Law 2874/2000, article 3 of the Presidential Decree 776/1977 and article 1 of the Presidential Decree 221/1997, article 142 of Law 3865/2008 and article 36 of Law 3996/2011, par. 2 article 44 of Law 4488/2017, articles 27, 34, 36 of Law 4808/2021.
Part IX – Invalidity Benefit	Articles 1,2,28,29,37 of Law 1846/1951,
	Articles 25 and 28 of Law 2084/1992,
	Law 3655/2008, Law 3863/2010, Law4336/2015, and Ministerial Decision Φ.11321/oik. 47523/1570/23-10-2015 (Gazette B,2311).
	Law No. 4387/2016 of 12 May 2016.
	Law No. 4393/2016 of 6 June 2016.
	Law No. 4472/2017 of 19 May 2017.
	Law No. 4475/2017 of 12 June 2017.
	Law No. 4554/2018 of 18 June 2018.

	Ministerial Decision F.80100/50885/3033 (Official Gazette 5987 B'/31.12.18).MinisterialDecision F.80100/oik.17630/943/19.04.2018 (Official Gazette 1560 B'/08.05.2018).
	Law No. 4611/2019 of 17 May 2019.
	Law 4623/2019 of 09 August 2019, art.120 (134 A')
	Law No. 4670/2020 of 28 February 2020.
	Law No. 4798/2021 of 24 April 2021
Part X – Survivors' Benefit	Articles 28 and 29 of Law 1846/1951,
	Articles 25, 27 and 31 of Law 2084/1992,
	Articles 12 and 13 of Law 3863/2010,
	Law 3655/2008, Law 3863/2010,
	Law No. 4387/2016 of 12 May 2016
	Art. 19 Law No. 4611/2019 of 17 May 2019
	Art. 44 Law No 4756/2020 of 26 November 2020
	Law No. 4798/2021 of 24 April 2021

It should also be noted that social security is guaranteed by the Greek Constitution (article 22, par. 5). The social security system covers all the employees throughout the country.

II. Ratification Law

Law 1136 of 13.03.81 on the ratification of the European Code of Social Security (Gazette A` 61), in its First article states that:

III. Justification on recent reforms

Law 4670/2020 adopted provisions reformed law 4387/2016 in accordance with no. 1889/2019 and 1890/2019 Decisions of the Plenary of the Council of State, which held that supplementary insurance should operate based on the principles of equality, proportionality of contributions – benefits and intergenerational solidarity.

The provisions of the new law replace article 96 of Law 4387/2016, with in compliance with no. 1889/2019 and 1890/2019 decisions of the Plenary of the Council of State, which cancelled Ministerial Decisions oik.23123/785/7.6.2016 (B' 1604) "Determination of the technical parameters relating to the benefits of the Single Supplementary Insurance Fund" and oik.25900/470/7.6.2016 (B'1605) "Adjustment of pensions paid by the Single Subsidiary Insurance Fund".

Those decisions found the provisions of paragraphs 1 and 4 of Article 96 of Law 4387/2016 to be unconstitutionalin terms of calculating the supplementary pensions for future pensioners and the recalculation of pensions already payable, due to the lack of an actuarial study carried out before the adoption of Law 4387/2016 that substantiates the viability of the Supplementary Branch of the E.T.E.A.E.P. and the adequacy of its benefits when adopting the regulations of Law 4387/2016. The consequences of the unconstitutionality of the above legislative provisions and the annulment of the ministerial decisions shall result from the publication of the relevant decisions of the Council of State, i.e., from 04.10.2019.

Furthermore, the provisions of article 96 par. 4 of law 4387/2016 and article 6 of the Ministerial Decision oik25909/470/7.6.2016 (B'1605), setting a limit of EUR 1,300 to the sum of the main and supplementary pension paid, are annulled as non-compliant to the constitutional principles of equality and proportionality. At the same time, these provisions revise the replacement rates for main pensions. This eliminates the injustices of the previous legislative framework, which caused a deficit in return for the main pensions, particularly for those after many years (30 years) of insurance.

Part I - General provisions

1. Following the provisions of article 1 of Law 4670/2020 (Government Gazette 43 A'), the "Single Unified Social Security Fund (EFKA)" is renamed to "Electronic National Social Security Fund", hereinafter referred to as "e –EFKA". The renaming of EFKA marks the transition of the social security system to the digital age, transforming EFKA and upgrading its online services available to citizens.

The integration of the social security database is promoted, as well as the digitalization of all social security functions. The latter aims to ensure more efficient and faster services to the citizens. The integration of the social security database will allow the digitalization of all functions of social security and, consequently, its more efficientmanagement.

The organization and operation of e-EFKA is governed by the provisions of Law 4387/2016 (Government Gazette 85A') and Presidential Decree 8/2019 (Government Gazette 8A') "Organization of the National Electronic Social Security Fund: e-EFKA" as in force.

Concerning the organization and operation of inspection services, according to the provisions of Article 2 of the abovementioned Presidential Decree, the restructuring of the services of e-EFKA also include that of the Directorate General for Audits. In addition, par. 1 article 12 stipulates that the strategic objective of the Directorate-Διανομή μέσω 'ΙΡΙΔΑ' με UID: 61139fd6e12647f5ad625113 στις 19/10/21 13:54

General for Audits is to design and implement controls for the proper application of the insurance legislation, to eliminate contribution evasion and avoidance phenomena. In par. 2 of the same article, it is provided that the Directorate-General for Audits is to be structured in a Central Office and Regional Services. The operational objective of the Central Office is to coordinate and assist the work of the Regional Insurance Audit Centers (PEKA), which operate at the level of the Directorate throughout Greece and their task is to carry out substantial, on-the-spot, regular, exceptional, and specific audits for the implementation of the insurance legislation and the imputation of the corresponding insurance contributions and other charges to the insured, the employers and undertakings as the case may be.

Furthermore, with the provisions of article 2 of Law 4670/2020, from 01.03.2020 the Supplementary Insurance Branch and the Lump Sum Benefits' Branch of ETEAEP are integrated into e-EFKA, while maintaining their financial and accounting autonomy and independent monitoring of contribution payments and benefits paid per branch. ETEAEP is abolished.

2. The provisions of article 34 of Law 4670/2020 replace article 38 of Law 4387/2016, as it was in force, with individual changes in the status of main pension insurance contributions of employees who are covered by e-EFKA.

The basic framework for the calculation of the insurance contributions of employees does not change, and therefore the employees of e-EFKA continue to pay for the main pension a contribution of 20% (6.67% for the insured person and 13.33% for the employer) on all types of remuneration and up to the amount of ϵ 6,500. The amount of ϵ 6,500 is adjusted from 01.01.2023 according to the rate of change of the average annual general consumer price index of the previous year (in case of a negative price no adjustment is made), and from 01.01.2025 based on the wage change index.

3. The provisions of articles 35 and 36 of Law 4670/2020, which replaced articles 39 and 40of Law 4387/2016, respectively, , provide the following for the social security contributions of the self-employed and the farmers:

From 01.01.2020 a new regime for main pension contributions is formed for the selfemployed, independent professionals and farmers. Specifically, six insurance categories are provided, and the insured persons need to choose one.

For the self-employed and independent professionals who are engaged in professional activity for the first time, during the first 5 years of insurance, a special insurance category is provided.

The amounts of the insurance categories are presented in Table 1 below.

Table 1: Monthly Contribution of the Self-Employed, the Independent Professionals and Farmers

Monthly Contribution of the Self-Employed and the Independent Professionals

Insurance Category	Monthly Contribution
1 st	€155
2 nd	€186
3 rd	€236
4 th	€297
5 th	€369
6 th	€500
Special Category	€93

Monthly Contribution	Monthly Contribution of Farmers					
Insurance Category	Monthly	Monthly	Monthly			
	Contribution	Contribution	Contribution 2022			
	2020	2021				
1 st	€87	€89	€91			
2 nd	€104	€107	€110			
3 rd	€132	€136	€139			
4 th	€166	€171	€175			
5 th	€207	€212	€218			
6 th	€280	€288	€296			

The above amounts are adjusted from 01.01.2023, according to the rate of change of the average annual general consumer price index of the previous year (in case of a negative price no adjustment is made), and from 01.01.2025 based on the wage change index.

4. Parallel insurance - Article 32 of Law 4670/2020 and Ministerial Decision D15/E/10706/423/17-3-2021

Multiple salaried employments in different employers: Main pension contributions are paid for each paid employment under Article 38 of Law 4387/2016 and up to a maximum of €6,500pensionable earnings per month.

<u>Multiple self-employed activities:</u> For all parallel self-employed activities, only one insurance contribution for main pension under Article 39 of Law 4387/2016 shall be paid to the e-EFKA.

Employees who are self-employed or engaged in a free profession (e.g. doctors, lawyers, engineers) or agricultural activity: The insurance contributions for salaried employment provided for in article 38 of Law 4387/2016 shall be paid.

No additional contributions shall be paid for self-employment, when the contributions paid for salaried employment cover the contributions of the 2nd insurance category referred to in Article 39 or Article 40 of Law 4387/2016 or of the insurance category declared by the insured person if they are higher than the 2nd.If they fall short, the insuredpay the difference themselves.

Article 6 of ECSS

Those whose employment is terminated are entitled to request the continuation of their insurance coverage, provided that they fulfill certain conditions.

With the provisions of article 33 of Law 4670/2020, article 37 of Law 4387/2016 is replaced, regarding the voluntary insurance. Noting that, as far as the conditions of voluntary continuation of insurance are concerned, there has been no change, the employees who voluntarily continue their insurance, pay the entire amount of contribution (employer – employee), as it is formed at the beginning of their insurance. The percentage is calculated on the average of the monthly salaries on which social security contributions were paid during the last twelve (12) months before leaving their work, adjusted for the period until 2020 according to the change of the average annual general consumer price index and from 2021 onwards based on the salary change index provided by the Hellenic Statistical Authority (ELSTAT) (article 34 par. 4 of Law 4461/2017).

Self-employed, independent professionals and farmers pay the social security contribution corresponding to the insurance category they choose from the six (6) provided.

The voluntary insurance starts from the date of submitting the application to e-EFKA and is carried out for a period that cannot be less than 25 insurance days per month and 300 days per year.

The voluntary insurance ends: a) at the request of the insured, from the first day of the month following the request, b) with the retirement of the insured due to old age or indefinite disability, c) if the insured undertakes work or activity or acquires a status which is compulsorily subject to the insurance of e-EFKA and d) upon the death of the insured.

Part II - Medical care

Article 33 of the Law 4368/2016 (Government Gazette 21/A) establishes the right to free access to all public health facilities providing nursing and medical care to uninsured and vulnerable social groups.

By the Joint Ministerial Decision A3 (c)/GP/oik. 25132/04-04-2016 (GG 908/B), the criteria and procedures for access of uninsured and financially weak citizens to

public health and nursing care system of the country are established for both Greeks and foreigners.

Specifically, those benefits cover all uninsured (directly or indirectly), those who have lost their insurance coverage and are not entitled to health benefits due to debts to the pension funds and all vulnerable social groups that are included in the relevant provisions of the mentioned Law.

Regarding their medication, it is provided by the private pharmacies which have contracts with the E.O.P.Y.Y. The pharmaceuticals of high cost are supplied only by hospital and E.O.P.Y.Y. pharmacies.

Article 7 of ECSS

According to the provisions of article 487 of Law 4781/2021, insurance capacity for sickness benefits in kind is granted by e-EFKA, from 01.03.2021 to 28.03.2022, to all insured (employees and self-employed) as well as to indirectly insured members of their family, provided that they had insurance capacity on the 28.02.2021. This provision was adopted in light of the covid-19 pandemic.

Article 9of ECSS

- **A.** Use of sub-paragraph (a).
- **B.** According to par. 2of article22 of the Law4529/2018, the family members of the insured or retirees of e-EFKA are:
- a) The spouse (a wife or a husband) who is not directly insured with e-EFKA or any other social security organization apart from e-EFKA.
- b) The unmarried children (legitimate or children who have been legalized, recognized or adopted or stepchildren), the biological children of the insured or thepensioner due to disability, old age or death (article 20 of Law 4578/2018) and the foster children whose actual care or custody is given by a court order to the insured, until they reach 18 years of age or, if unemployed until they are 24 years old, if they continue their studies for 2 years after the end of their studies if they are still unemployed, but not beyond 26 years of age. These children continue to be considered members of the family of the deceased directly insured or retired under the above conditions, even in the case where they are not entitled to a pension.

In particular, children receiving a survivor's pension (deceased insured or retired) are provided with insurance capacity for health care benefits in kind, even after the age of 24 and up to the age of 35 (Article 21 of Law 4611/2019).

- c) The mother, the father and adoptive parents under same conditions as biological parents.
- d) Orphan (who have lost both parents) grandchildren and siblings, as well as maternal orphan or paternal orphan siblings or grandchildren, if the surviving parent

is considered a family member of the insured, until they reach 18 years of age and if they are unmarried.

The children with invalidity (disability of 67% or above) are protected for life.

Additionally, in accordance with provisions of Articles 12 and 13 of Law 4356/2015 (A' 181), concerning persons who have entered into a civil partnership, a family member of the insured or the pensioner is considered the other spouse.

The above apply mutatis mutandis to all funds, no matter if they provide insurance for the employed workers, freelancers or farmers.

C. Statistical data (Article 74 of ECSS)

Table 2: Number of the protected persons (Employees and Pensioners)

Year	2018	2019	2020
The number of the directly			
insured	7,142,312	6,701,499	7,936,613
The number of the indirectly insured	2 955 942	2 592 207	2.057.512
Total	2,855,862 9,998,174	2,583,397 9,284,896	3,057,513 10,994,126

Source: e-EFKA

Article 10of ECSS

A:According to EALE/G.P.80157/1-11-2018 Joint Ministerial Decision (Government Gazette/B/4898/2018) on "Single Regulation for Health Benefits" (E.K.P.Y.) of National Organization for the Provision of Health Services (EOPYY) as amended by:

- EALE/G.P.2918/7-3-2019 JMD (Government Gazette/B/889/2019)
- EALE/G.P.20254/4-3-2019 JMD (Government Gazette/B/12182019)
- EALE/G.P.51391/24-12-2020 JMD (Government Gazette/B/5821/2020)

The benefits provided by category are as follows:

1. Prevention and promotion of health.

Includes vaccinations of children and adults, according to the National Immunization Program, specificprenatal screening tests forwomen and men, tests for early diagnosis of uterine, prostate and colorectal cancer, prevent heart disease, diabetes as well as the implementation of screening protocols.

- 2. Primary health care.
- **3.** Pharmaceutical care.
- 4. Dental care

Preventive, therapeutic and prosthetic dental care is provided only by public health structures

- **5.** Physiotherapy, speech therapy, occupational therapy and psychotherapy. It is provided to beneficiaries to maintain and restore their health, both to address acute health problems and to problems that have been chronic.
- 6. Hospital care.

It includes hospitalization, care, all kinds of nursing and pharmaceutical care, appropriate treatment and treatment for rehabilitation of physical and mental disabilities or morbid conditions, diagnostic tests, any necessary medication, special therapeutic means and intentions. Hospitalization is provided in Intensive Care Units, Increased Care Units, special units (heart attacks), Neonatal Intensive Care Units, chronically ill care units, and Psychiatric Clinics.

7. Rehabilitation Treatments in Rehabilitation Centers (K.A.A.-K.N.) and Rehabilitation Centers for Daily Nursing (K.A.A.-H.N.).

In K.A.A.-K.N. physical rehabilitation and rehabilitation services are provided after hospitalization and are considered to be a continuation of this. The hospitalization also covers the medicines, consumables, personal hygiene items, the required sanitary material, patches, examinations and all required treatment operations. The K.A.A.-H.N. provides, except of the clinical examination, the physiotherapy, hydrotherapy, psychological support and occupational therapy, speech therapy and biofeedback when required.

8. Care for people with disabilities.

Care is provided to the disabled:

- in Day Care Centers, which includes the entire program of treatment operations, socialization actions, educational activities, creative employment, entertainment, medical monitoring and their transportation to and from the place of residence.
- in special schools
- in boarding schools, where except of the residence, the nutrition, care, psychological support, program of treatment operations, educational activities, creative employment, entertainment, sports and medical monitoring are provided.
- Supported Living Houses and Autonomous Living Houses.

Physiotherapy, speech therapy, occupational therapy and psychotherapy are also provided.

- **9.** Health benefits in kind for Member States of the European Union (EU) and other countries.
- **10.** Additional care-providing of therapeutic means and prosthetics, sanitary material, technical means of health, as well as special nutrition for medical purposes.

Glasses, hearing aids, artificial limbs, splints, guardians, orthopedic, eye prostheses, respiratory devices, oxygen therapy devices, cochlear implants and a BAIA-type processor, special dietary preparations for medical purposes (for metabolic diseases, malabsorption, fistulas, cystic fibrosis, gastrostomy carriers, children with milk allergy, premature and underweight newborns) through a network of contracted providers. Consumable sanitary material, infusion devices for medicines and dietary solutions, therapeutic patches of skin lesions, ostomy supplies (materials), peritoneal clearance materials, urinary catheters, pumps etc. are also provided.

- 11. Compensation for the movement of patients for medical reasons. Compensation shall be granted to beneficiaries if they move for health reasons outside their permanent residence.
- 12. Lump sum compensation for childbirth outside a nursing home.

It shall be granted only in cases where the birth is carried out at home. EOPYY has a network of contracted providers, public and private obstetrics.

13. Medically assisted reproduction.

The beneficiary shall be reimbursed €352.16 in cases where it is carried out by a private provider. The beneficiary shall not pay any expenditure in public structures.

- **14.** Compensation for exclusive nurse services in public hospitals during the night.
- **15.** Treatment in a hyperbaric oxygen chamber in outpatients.
- **16.** Bath therapy and aero therapy.
- **B:** The participation of the beneficiaries is as follows by category of benefit:
- For diagnostic examinations the participation amounts to 15% of the cost of the examinations. Exemption from participation is provided for certain categories of chronic diseases as well as for all beneficiaries who have a disability certification of 80% or more.
- For hospital treatment no participation in public structures is paid. In private structures the participation amounts to 30% of the respective compensation price (insurance price) for the entire hospitalization, with the exception of hospitalization in Intensive Care Units, Neonatal Intensive Care Units, for radiotherapy, for special cardio surgery and pediatric cardio surgery, for dialysis, for operations not performed in public structures, for hospitalization in Centers for Rehabilitation-Rehabilitation closed hospitalization, for which no contribution is paid.

In private structures also participation is set at 10% in case of psychiatric clinics and chronically ill clinics and in hospitals when they are compensated with a daily hospital fee.

- For physical therapy from private providers the participation is set at 10% of the compensation price. An exception is provided in all cases of prior hospitalization as well as in cases with severe and chronic musculoskeletal and neurological problems.
- For speech therapy there is 10% participation with the exception of minors as well as people with a disability rate of 67% or more.
- For the supply of sanitary material, 25% participation is foreseen with the exception of patients with paraplegia, quadriplegia, renal patients, amputees with 67% or more, transplanted patients, multiple sclerosis sufferers, patients with severe heart failure and mechanical heart support, HIV positive patients, blood disease sufferers, patients with diabetes if treated. Also reduced participation of 10% is provided for specific devices.
- A participation of 25% is provided for the supply of additional care, with the exception of those receiving paraplegia quadriplegia allowance for which an exemption from participation is provided.

C: As regards the provisions of article 2(2) on cases of childbirth, in accordance with Article 11(1) of the EOPYY Single Health Benefits Regulation, no participation shall be paid within the public structures for the provision of hospital care services. The National Health System comprises a large network of structures nationwide with available obstetric clinics. Reimbursement of costs/expenses shall be made only in the case of childbirth at home and shall be reimbursed in cases where hospital services are not used.

D: The measures taken to ensure that benefits provided by EOPYY ensure the preservation, rehabilitation and improvement of the health of insured persons, as well as to encourage their use, include the following: EOPYY by Ministerial Decision adopts and updates a Health Benefits' Regulation detailing health benefits in kind, the extent, the amount, method and procedure for granting them and specifying the beneficiaries of such benefits and how the expenditure concerned is to be compensated. Subsequently, the necessary clarifying circulars are issued for the specification and application of the relevant arrangements.

To ensure the provision of services to beneficiaries, EOPYY contracts with natural or legal persons active in the field of health.

EOPYY has a geographical dispersion throughout the country of both the service units and the insured citizens.

The services provided by EOPYY are communicated to its insured by any appropriate means through its administrative services, in person and by telephone and through electronic channels (Organization website, e-mail, press releases, and communications to broadcasting media).

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For servicesto insured, EOPYY has a variety of ways of providing services, either in person or through the development of a multiple electronic services, such as the Health Insurance File. The use of ICT contributes to the improvement of the services provided to citizens/customers, as new electronic services are constantly being developed that facilitate access to the services provided by the Organization.

There is continuous communication and interaction with interest groups such as health service providers, scientific companies, social institutions, insured persons and information about their views and needs is collected, to improve the services provided to the insured.

Article 11 of ECSS

In accordance with the provisions of Article 37 of Law No. 4670/2020 (Government Gazette A 43) e-EFKA insured and the members of their families shall be covered by the sickness benefits in kind, from 1st of March each year and for a period of twelve (12) months, provided that the insured has completed fifty (50) days of insurance, either in the previous calendar year or in the last 12 months before the date of emergence of the insurance risk.

Exceptionally, for the period from 01/03/2020 to 28/02/2021, in accordance with par 1 of article 29 of Law 4722/2020, the insured of e-EFKA and members of their family shall be covered for sickness benefits in kind, if they have completed 50 days of insurance in the previous calendar year or in the last twelve months, excluding the days in the last calendar quarter of the twelve (12) month period.

Article 12of ECSS

Questions 1 and 2:

Issues relating to the suspension of the right to benefits, within the meaning set out in Articles 12 and 68 of the Code, relate to the scope of competence of the e-EFKA, namely the regulatory framework for determining the insurance capacity. Article 60 of the EKPY states that: "Benefits, created while the beneficiary had insurance capacity, shall be paid, even if he lost his insurance capacity for any reason later. Benefits shall also be paid to a beneficiary who has lost his insurance capacity, if the institution grants it to him retrospectively, for the period during which he lost it. It is therefore clear that the EOPYY provides care even in the case of interruption of the beneficiary's insurance capacity, for any reason.

PART III – SICKNESS BENEFIT

Article 15of ECSS

A. Use of sub-paragraph (a) is made.

B. According to Article 35 of Law 1846/1951 (A179), only those employees directly insured with former IKA-E.T.A.M are entitled to sickness benefit.

C. Statistical data (Article 74)

Table 3: Number of insured who made use of the right to the sickness benefit and days of sickness benefit in total, from 2016 to 30.04.2021.

Year	2016	2017	2018	2019	2020	1/21- 30/4/21
Number of insured who made use of the right to the sickness benefit	183,506	196,117	216,302	228,752	148,253	55,576
Days of sickness benefit	3,177,459	3,374,937	3,745,223	3,947,715	2,748,056	1,075,946

Source: e-EFKA

Notes: The number of the insured is estimated on the basis of the number of decisions for the sickness benefit.

Article 16of ECSS

To grant the sickness benefit, the presumed wage of the insurance class is taken into account. The presumed wage is determined based on the average salary of last thirty (30) working days of the calendar year, preceding the notification of the incapacity to work.

If the reason for inability to work is an accident or disease, and there are no wages mentioned above, the presumed wage of the insurance class of the insured is taken into account. In the first case it is based on the wage on the day of the accident, while in the second case it is based on the wage on the last day of work.

The amount of sickness benefit (of directly insured, both men and women) equals to 50% of the presumed wage of the insurance class of the insured, which is determined based on the average salary of last 30 working days of the calendar year previous to notification of the incapacity to work.

The amount of sickness benefit is increased by 10% for each family member protected and cannot be higher than the presumed wage of 8th insurance class, or 70% of the wage of the insurance class based on which the allowance is calculated.

Every year, for the first 15 days of absence from work due to an illness, the benefit is equal to 50% of the daily sickness allowance, increased by 10% for each protected family member. In any case, it cannot exceed the presumed wage of the 3rd insurance class, or 35% of the wage of the insurance class under which the allowance is calculated.

The ceiling of the daily sickness allowance is increased according to family responsibilities, for the first 15 days is at€15.99 and after the first 15 days is at€29.39.

Διανομή μέσω 'ΙΡΙΔΑ' με UID: 61139fd6e12647f5ad625113 στις 19/10/21 13:54

Type of Beneficiary: Male, skilled, manual, with spouse and 2 children

It was calculated according to the art. 15 (a) and 65 (1).

Replacement rate: 45%

Monthly reference wage: €1.428,2

2

Minimum benefit according

Daily sickness benefit for the first 15 days: €15,99

Daily sickness benefit after the first 15 days: €29,39

Amount of monthly sickness benefit for the 1st month	Replacement rate in the monthly reference wage	Amount of monthly sickness benefit from the 2 nd month and after	Replacement rate in the monthly reference wage
€680,70	47,7%	€881,70	61,7%

Article 17of ECSS

According to article 35 of Law 1846/1951 (A179) and par. 4 of article 36 of Law 3996/2011 (Gazette A170), the insured with the (former) IKA-ETAM are entitled to sickness benefit if they have completed at least one hundred and twenty (120) days of insurance, either during the calendar year previous to the sickness notification or during the period of fifteen (15) months preceding the sickness notification, not including, in the latter case, the days of insurance completed during the last calendar quarter of the fifteen (15) month period.

Article 18of ECSS

Private Sector

The sickness benefit is payable if the absence from work due to illness lasts more than three (3) days.

For the first 3 days of incapacity to work, the employer is required to pay half wage or the half of the appropriate salary.

The sickness benefit is paid:

a. up to 182 days for the same or different health conditions within the same calendar year, if the insured beneficiary completed at least 120 insurance days, during the calendar year immediately preceding the sickness notification, or the last 15 months previous to the sickness notification. In the latter case, into 120 working days, the working days carried out during the last calendar quarter of 15 months period are not included

b. up to 360 days, if the insured beneficiary completed at least 300 days of work during the two calendar years immediately preceding the sickness notification, or within 30 months previous to the notification.

In the latter case, the insurance days completed during the last calendar quarter of the period of 30 months are not counted into 300 days of work.

c. up to 720 days, provided that:

1. the insured beneficiary completed 4500 days of work before the sickness notification. The 300 days of work (out of 4500) should be completed within the 5 years immediately preceding the sickness notification.

- 2. the insured, who does not fulfill the conditions of the previous section, is entitled to sickness benefit if he/she completed 1500 working days, out of which, the 600 were completed during the last 5 years immediately preceding the sickness notification.
- 3. if the insured does not satisfy any of the above conditions, he/she is entitled to the sickness benefit, if he/she meets the conditions presented on Table 4 below.

Table 4: Necessary conditions for the granting of sickness benefitin case the insured does not satisfy the conditions of section c

Age	Days of Work
Until 21 years	300 days
22 years	420 days
23 years	540 days
24 years	660 days
25 years	780 days
26 years	900 days
27 years	1020 days
28 years	1140 days
29 years	1260 days
30 years	1380 days
31 years	1500 days
32 years	1620 days
33 years	1740 days
34 years	1860 days
35 years	1980 days
36 years	2100 days
37 years	2220 days
38 years	2340 days
39 years	2460 days
40 years	2580 days
41 years	2700 days
42 years	2820 days
43 years	2940 days

44 years	3060 days
45 years	3180 days
46 years	3300 days
47 years	3420 days
48 years	3540 days
49 years	3660 days
50 years	3780 days
51 years	3900 days
52 years	4020 days
53 years	4140 days
54 years	4200 days

According to par. 4 of article 38 of Law 1846/1951 (A179), IKA-E.T.A.M has the right to suspend the payment of the sickness benefit, if the beneficiary is responsible for the worsening of their health condition due to a conduct that does not correspond to the obligations or the behavior expected from patients, or for not complying with the medical instructions indicated and intended to improve his health condition.

Public Sector

Sick leave

1. A public servant who is sick or who needs to recover may be granted paid sick leave for as many months as the years of his service, from which all sick leave he may have taken within the previous 5 years shall be deducted. Sick leave granted without interruption may not exceed 12 months. The period of service of at least 6 months shall be considered as a full year.

A first-time employee, who has not completed 6months of service, shall be entitled to receive the short-term sick leave provided for. After that, he is entitled to an unpaid leave.

- 2. Sick leave shall also consider the days of absence due to sickness preceding the leave.
- 3. An employee suffering from a hard-to-treat disease shall be granted a sick leave, the duration of which shall be twice the duration of the leave referred to in the preceding paragraphs.
- 4. Diseases that are hard to treat are determined by a decision of the Minister of Health issued after the opinion of the Central Health Council.

Granting of sick leave

- 1. Sick leave shall be grantedper month, except in the case of hard-to-treat diseases as they defined by the decision referred to in par. 4 article 54 of Law 3528/2007, it is granted per6 months at maximum.
- 2. Short-term sick leave shall be granted on the advice of a treating physician up to 8 days per year. Two (2) days of them, but not continuously, may be granted by a solemn declaration of the employee.
- 3. The employee shall be obliged to accept the visit of a doctor.
- 4. The dispatch of a doctor to check on an employee, who makes use of short-term sick leave repeatedly, shall be compulsory for the personnel directorate and any failure to do so shall constitute disciplinary misconduct by the competent head of the administrative directorate.

Procedure for granting sick leave

- 1. An employee who cannot attend work due to illness shall inform the personnel Office for his inability on the same day.
- 2. The Office shall grant the sick leave at the request of the employee. An application form for the sick leave shall be submitted within seven (7) days of the employee's absence due to illness. In the event of undue delay not due to reasons of force majeure, the sick leave shall be cut accordingly under the responsibility of the Office responsible for issuing the decision granting it. The Office may, in very specific cases, initiate the procedure for granting sick leave ex officio.
- 3. Sick leave of more than eight (8) days per year shall be granted after consultation of the relevant health committee, except where the authorization is granted on the basis of the opinion of the Director of a public hospital clinic and in the case of hospitalization for at least seven (7) days or following a surgery.
- 4. A leave of more than 1 month for mental illness shall not be granted unless prior hospitalization in a public hospital has taken place. An extension of the authorization or the granting of a new authorization, if it exceeds, in whole or in part, one (1) month in the same calendar year, shall be granted following a detailed report by a treating physician and a report examining the functionality of the patient. The content of thereport is determined by a joint ministerial decision of the Ministers of the Interior, Public Administration and Decentralization and Health. The same decision defines the Bodies entitled to carry out an examination of the patient's functionality, as well as any necessary details.
- 5. The body responsible for granting sick leave shall either grant the entire period proposed by the Primary Health Committee or, if it considers its opinion to be unjustified, refer the person concerned for examination to the Secondary Health Committee. The person concerned may, within 10 days of notification to him of the opinion of the Primary Health Committee, request a new examination by the relevant Secondary Committee, when the Primary Committee has wholly rejected or

approved less than half of the sick leave. The sick leave proposed by the Secondary Health Committee is compulsory granted.

- 6. The Office and the employee shall have the right to appeal before the Primary or special Health Committee for the exceptional granting of leave in accordance with paragraph 3 of this article.
- 7. An employee's application for an extension of sick leave shall be submitted no later than within the last fortnight of the period of leave granted to them.
- 8. The official shall be required to report for medical examination at the request of the Committee. If they do not show up, thesick leave is not granted.

PART V - OLD AGE BENEFIT

Article 26of ECSS

The pensionable age, for both old and new insured, is 62 years with 40 years or 12,000 days of insurance and 67 years with 4,500 days or 15 years of insurance. The pensionable age for reduced old-age pension is 62 years with 4,500 days or 15 years of insurance.

The paragraph 3 of this Article is used.

An old age pensioner, employed in any gainful activity, is subject to the following limitations: Art 27 of Law 4670/2020 replacing article 20 of Law 4387/2016.

For pensioners who undertake work (as an employee or self-employed) which is subject to compulsory insurance of the Electronic National Social Security Fund (e-EFKA), main and supplementary gross pensions paid, are reduced by 30% during the period of their employment.

For pensioners appointed to posts of general government bodies, main and supplementary gross pensions are being suspended until 28.02.2021 (if they are less than 61 years old by that date) and until 01.03.2022 (if they are less than 62 years old by that date). After completion of their 61st and 62nd year of age, from 01.03.2022 onwards, their main and supplementary gross pensions will be reduced by 30% during the period of their appointment.

Article 27of ECSS

- **A.** Use of sub-paragraph (a).
- **B.** The persons protected: employees in the private sector, government agencies and banks. Also, the employees recruited by the State from01.01.2011 henceforth, regular public servants, soldiers and officials of local administrative bodies. In general, the insurance is compulsory for all those pursuing an activity (as employees and self-employed, as independent professionals, as civil servants and farmers).
- C. Statistical data old age pension (Article 74)

Table 5: Number of pensions for private and public sector, between 2016-2021

Year	2016	2017	2018	2019	2020	May- 21
Number of pensions private sector	774,62 9	800,19	800,35	806,49	811,18	816,86
Number of pensions public sector	na	na	341,00 8	334,43	330,96 2	na

Source: e-EFKA

Note: The data for 2021 is estimated.

Article 28of ECSS

A) The method of calculation of old age benefit:

The main pension is composed of:

- i) The national part of thepension, which is not financed by contributions, but directly from the State budget. It is based on:
- (a) The years of insurance (at least 15 years). This amount is reduced by 2% for every year which falls short from 20 to 15 years of insurance (i.e., the amount of national pension for 15 years of insurance is €345.60 per month).
- (b) Residence in Greece (€384 per month if the pensioner has 40 years of residence from the age of 15 up to the age for receiving the pension and at least 20 years of insurance).
- ii) The contributory part of thepension which is calculated depending on:
- (a) The years of insurance considered by applying coefficients of replacement per year starting from 0.77% for 15 years of insurance, gradually increasing to 2.55% for 40 years of insurance and 0.50% for every year over 40.01 years of insurance, and
- (b) on the average pensionable earnings of the insured from the insurance year 2002 until the day the person applies for pension.

It is granted monthly.

In addition, contributions paid during the same period in different insurance funds incorporated in e-EFKA (parallel insurance) are taken into account in the amount of the contributory pension as follows: for every year of parallel insurance, the annual percentage of replacement is 0.075% for every 1% of extra contributions. Maximum Διανομή μέσω 'ΙΡΙΔΑ' με UID: 61139fd6e12647f5ad625113 στις 19/10/21 13:54

amount of monthly pension granted is €4,608 (12 times the full national pension €384).

Article 24 of Law 4670/2020 amended Article 8 of Law 4387/2016 and introduced new replacement rates.

New replacement rates are introduced to calculate the contributory part of the pension granted by e-EFKA, to increase the pension amount for the insured persons that have completed more than 30 years of insurance.

The final amount of the contributory part of the pension is calculated for the total insurance period, based on the percentage of replacement of the table below. The replacement rate for each year of insurance within each year scale corresponds to the rate indicated in the third column of the table.

Until 30.09.2019 the replacement rates for each insurance period are shown in the following Table 6:

Table 6: Replacement Rates for each insurance period until 30.09.2019

YEARS OF I	INSURANCE SCALE	REPLACEMENT RATE
FROM	ТО	
0	15	0,77%
15,01	18	0,84%
18,01	21	0,90%
21,01	24	0,96%
24,01	27	1,03%
27,01	30	1,21%
30,01	33	1,42%
33,01	36	1,59%
36,01	39	1,80%
39,01	42 and more	2,00%

From 01.10.2019 the replacement rates for each insurance period are shown in the following Table 7:

Table 7: Replacement Rates for each insurance periodfrom 01.10.2019

YEARS OF INSUI	RANCE SCALE	REPLACEMENT RATE			
FROM	ТО				

0	15	0,77%			
15,01	18	0,84%			
18,01	21	0,90%			
21,01	24	0,96%			
24,01	27	1,03%			
27,01	30	1,21%			
30,01	33	1,98%			
33,01	36	2,50%			
36,01	40	2,55%			
40,01 and more per year		0,50%			

B) Pensionable earnings:

The contributory part of the pension is based on the average pensionable earnings of the insured person from year 2002 until the day of the application for a pension. The average is calculated as the quotient of dividing the total monthly remuneration of the insured by the total insurance period. The sum of monthly salaries received by the insured is the sum of the monthly remuneration subject to contributions throughout the insurance life. The calculation of pensionable earnings takes into account the insured's earnings for each tax year, increased by the change in the average annual Consumer Price Index of the Hellenic Statistical Authority for the period until the end of 2024, and from 2025 onwards by the Wage change index, calculated by the Hellenic Statistical Authority. Ceiling on pensionable earnings: €6,500 per month on which contributions have been paid.

The recourse according to the provisions of article 65.6.b.

Worker Type: art. 65 (6) b, Manufacturing (D), ISCO 7 (having previously rejected the economic activities (hotels and restaurants) due to seasonality and Z (Wholesale and Retail Trade) due to the low percentage of manual workers.)

Standard wage:	€1,428.22
	Calculated using the database of 1/2020, is the average wage of all employees based on the above type of worker and refers to 25 days of insurance.
Basic period:	1 month
Currency:	€

Monthly Retirement Benefit:

It was calculated according to the art. 65 (1). The main pension has been calculated on the basis of Law 4387/2016, as in force.

Old-age pensions:

Replacement Rate: 40%

Monthly Reference Wage: €1,428.22

40% of the Reference Wage: 1,428.22 * 40% = €571,29

1. Type of beneficiary: Male, skilled, manual, with spouse and 40 years of insurance – Full pension

Replacement Rate: 40%

Monthly Reference Wage: €1,428.22

40% of the Reference Wage: 1,428.22 * 40% =€571,29

Pensionable salary, after 40 years of contributions, is €2,170.51

AMOUNT OF PENSION

National pension €384.00

Contributory pension €1,085.47

Main Pension €1,469.47

Supplementary Pension €367.76

Sum €1,837.23

Retirement pension replacement rate: 128.64% (according to the ECSS)

Gross pension replacement rate (in relation to average entire working life earnings before retirement): **84.56%**

2. Beneficiary type: male, skilled, manual, with spouse and 30 years of insurance - Full pension

Replacement Rate: 40%

Monthly Reference Salary: 1,428.22

40% of the Reference Wage: 1,428.22*40%= €571.29

Pensionable salary, after 30 years of contributions, is€1,749.42

AMOUNT OF PENSION

National pension €384.00

Contributory pension €461.32

Main pension €845.32

Supplementary Pension €227.69

Sum €1,073.01

Retirement pension replacement rate: 75.13% (according to the ECSS)

Gross pension replacement rate (in relation to average entire working life earnings before retirement): 61.34%

3. Beneficiary type: Male, skilled, manual, with spouse and 30 years of insurance - Reduced pension

Replacement Rate: 40%

Monthly Reference Wage:€1,428.22

40% of the Reference Wage: 1,428.22*0.40=€571.29

Pensionable salary, after 30 years of contributions, is€1,749.42

AMOUNT OF PENSION

National pension €268.80

Contributory pension €461.32

Main pension €730.12

Supplementary Pension €165.41

Sum €895.53

Retirement pension replacement rate: 62.70% (according to the ECSS)

Gross pension replacement rate (in relation to average entire working life earnings before retirement): **51.19%**

4. Type of beneficiary: Male, skilled, manual, with spouse and 15 years of insurance - Full pension

Replacement Rate Limit: 40%

Monthly Reference Wage: €1,428.22

40% of the Reference Wage: 1,428.22*0.40=€571.29

Pensionable salary, after 15 years of contributions, is€1,370.16

AMOUNT OF PENSION

National pension €345.60

Contributory pension €158.25

Main Pension €503.85

Supplementary Pension €87.10

Sum €590.95

Retirement pension replacement rate: 41.38% (according to the ECSS)

Gross pension replacement rate (in relation to average entire working life earnings before retirement): 43.13%

5. Beneficiary type: Male, skilled, manual, with spouse and 15 years of insurance and 62 years of age - Reduced pension

Replacement Rate: 40%

Monthly Reference Wage: €1,428.22

40% of the Reference Wage: 1,428.22*40%=€571.29

Pensionable salary, after 15 years of contributions, is €1,370.16

AMOUNT OF PENSION

National pension €241.92

Contributory pension €158.25

Main pension €400.17

Supplementary Pension €65.42

Sum €465.59

Retirement replacement rate: 32.60% (according to the ECSS)

Gross pension replacement rate (in relation to average entire working life earnings before retirement): 33.98 %

Article 29of ECSS

The minimum insurance period required for the retirement pension is fifteen (15) years or 4500 days of insurance (E3 subparagraph of paragraph E of Article 2 of Law. 4336/2015 (Government Gazette A 94) and Ministerial Decision F.11321 / oik.47523 / 1570 / 23.10.2015 (Government Gazette B 2311)).

Private Sector

Persons insured before 01.01.1993:

Reduced amount:

- From 62 years for men and women if 15 years of insurance or 4,500 insurance days have been completed (of which 100 days every year during the last 5 years),
- From 62 years for mothers and widowed fathers with a minor, if 18 years of insurance or 5,500 working days have been completed.
- From 50 for mothers and widowed fathers with a severely disabled child if 5,500 working days have been completed.

Persons insured since 01.01.1993:

Reduced amount:

- From 62 years for men and women if 15 years of insurance or 4,500 insurance days have been completed (of which 750 days during the last 5 years),
- From 50 years for mothers and widowed fathers with a severely disabled child if 20 years of insurance or 6,000 working days have been completed.

Public Sector

Persons insured before 01.01.1993:

Reduced amount

From 62 years for men and women if 15 years of insurance or 4,500 insurance days have been completed

Personsfirst appointed as civil servants after 01.01.1983 and insured before 01.01.1993

Reduced amount

From 60men and 55 women if 25 years of insurance completed in 2010

From 56 men/women if 25 years of insurance completed in 2011

From 58 men/women if 25 years of insurance completed in 2012

From 62 men/women if 25 years of insurance completed from 2013

Persons insured after01.01.1993

Reduced amount

From 60 men/women if 15 years of insurance completed until 2012

From 62 men/women if 15 years of insurance completed from 2013

From 50 men with disabled child if 25 years of insurance completed from 2013

Article 30of ECSS

For pensioners appointed to posts of general government bodies, main and supplementary gross pensions are being suspended until 28.02.2021 (if they are less than 61 years old by that date) and until 01.03.2022 (if they are less than 62 years old by that date). After completion of their 61st and 62nd year of age, from 01.03.2022 onwards, their main and supplementary gross pensions will be reduced by 30% during the period of their appointment.

PART VI – EMPLOYMENT INJURY BENEFIT

Private Sector

Article 31 of Law 4387/2016.

Insured persons are entitled to a disability pension and their family members a survivor's pension, in accordance with the relevant provisions and regardless of insurance period, if the disability or death is due to an accident during the time of work or an occupational disease.

In case of disability due to a working accident or an occupational disease, the amount of the pension is calculated based on articles 7, 8 and 28 of Law 4387/2016. In no case can the amount of the beneficiary's pension be less than the amount corresponding to twice the amount of the national pension, for twenty (20) years of insurance, according to article 7 of Law 4387/2016 (384 \in X2 = \in 768).

Διανομή μέσω 'ΙΡΙΔΑ' με UID: 61139fd6e12647f5ad625113 στις 19/10/21 13:54

Article 37 of Law4611/2019 (Government Gazette A' 73). In pensions due to a working accident, an accident during the time of work or an occupational disease, that have been adjusted from 01.01.2019, the full amount of the adjusted pension based on the uniform rules of e-EFKA is paid immediately from 17.05.2019.

Public Sector

Civil servants who are entitled to a pension due to incapacity or due to death that manifestly and unequivocally occurred due to the Service and due to it are still subject to the insurance-pension scheme of the State and their pensions are regulated based on the pension provisions in force at the entry into force of Law 4387/2016 and are paid by the General Accounting Office of the State and are not subject to e-EFKA (circumstance of par. 3 of article 4 of Law 4387/2017).

Article 32of ECSS

Private Sector

To receive an invalidity pension, the insured person musthave obtained a certification of at least 50% rate of disability, issued by the committee responsible for certification of disability.

Public Sector

No specific degree of disability is required, as long as there is an opinion from the Health Committees regarding the inability to work (article 153 of Law 3528/2007).

Article 33of ECSS

A. Categories of protected persons: all employees, from the first day of insurance. Occupational disease is treated the same as an accident, in terms of the consequences and reimbursement for the health care.

In case of death of the insured or pensioner, members of their family are entitled to a survivor's pension, under certain conditions. The family members are:

Surviving spouse, under certain conditions:

Length of marriage must be at least three (3) years, unless:

- the deceased died from an accident at work or homicide.
- children are born or adopted during the marriage.
- there is a pregnancy at the time of death which results in a living birth.
- the couple remarries in which case, the length of both marriages needs to be five (5) years or more and the second marriage must have lasted at least six (6) months at the time of death.

No age restrictions.

The conditions are the same for men and women.

<u>Divorced spouse</u>.

The surviving divorced spouse receives a pension if the following conditions are fulfilled:

- The former spouse, before the time of death was paying alimony as a result of a court decision.
- Ten (10) years of marriage were completed before the divorce.
- If the former spouse did not cause the divorce.
- The surviving divorced spouse is not remarried or is not in a civil partnership

Surviving partners in a civil partnership.

The partners in a civil partnership have the same rights in terms of social insurance and benefits as married couples.

Legitimate children, recognized children, adopted children and those considered as such, have to be less than 24 years old and not married to receive the survivor's pension. In addition, if they are incapable of any gainful activity due to a disability that started before the age of 24, the pension continues to be paid even after the age of 24. The pension is suspended if they get married.

Men and women are treated equally.

В.

Table 8: Pension due to the accident at work or an occupational disease

Year	2016	2017	2018	2019	2020	May- 21
The number of pensions due to the accident at work or occupational disease	3,982	3,839	3,392	3,176	3,354	3,259

Source: e-EFKA

Note: Data for 2021is

estimated.

Article 34of ECSS

In case of an accident, the insured is entitled to medical care as referred to in the Single Health Benefit Regulation (E.K.P.Y.) of E.O.P.Y.Y (no. EMP 5/17.11.2012 Joint Ministerial Decision (Gazette B' 3054).

The insured, that is hospitalized after an employment injury or an occupational disease, does not participate in the cost and receive the medical care as reported under article 10.

Article 35of ECSS

For individuals who cannot be enrolled in programs addressed to general population, there are special schools for disabled people, with programs adapted to the needs of labour market, as well as to the special features and capabilities of the educated or trained persons.

Article 36of ECSS

Accident at work – Monthly pension:

It was calculated according to the art. 65 (1).

Type of beneficiary: Male, skilled, manual, with spouse 2 children and one day of insurance

Percentage of Reference Salary: 50%

Monthly reference wage: €1,428.22

50% of the Reference Wage: 714. 1,428.22*50%

	Pensionable Salary	National Pension	Contributory Pension	Main Pension	Supplementary Pension	Sum	Gross Pension Replacement Rate	Retirement replacement rate (according to ECSS)
1 Day of insurance Full Pension	€856,83	€768,00		€768,00	0,00	€768,00	89,63%	53,77%
1 Day of insurance Partial reduction 25%	€856,83	€768,00		€768,00	0,00	€768,00	89,63%	53,77%
1 Day of insurance Partial reduction	€856,83	€856,83 € 768,00		€768,00	0,00	€768,00	89,63%	53,77%

C. For the partial loss of earning capacity see the reply under the article 54 of the Code.

Article 37of ECSS

A. In case of illness due to accident, all employees who have a single day in the insurance of former IKA-E.T.A.M entitled to medical care as referred to in the Single Health Benefit Regulation (E.K.P.Y.) of E.O.P.Y.Y (no. EMP 5/17.11.2012 Joint Ministerial Decision (Gazette B 3054).

All employees who are employed throughout the country are entitled to the benefits of article 34 (medical care), at the time when an accident at work or an occupational disease occurred. For the benefit of article 36 (pension), in case of an accident, it is required to have realized at least one (1) day of insurance, while in the case of an occupational disease, the minimum insurance period with IKA-ETAM is required, as defined in the Sickness Regulation of IKA-ETAM, depends on the type of occupational disease.

B. In case of death of the employee due to an occupational accident or disease, the dependent members of his family (widow and children) receive a survivor's pension without the residence requirement.

In case of death of the insured due to an accident (employment injury), the widow is entitled to a survivor's pension, provided that the deceased has been insured with formerIKA-ETAM (e-EFKA from 01.01.2017) for at least 1 day.

If the insured's death is due to occupational disease, the family members are entitled to a survivor's pension, provided that the deceased was insured with former IKA-ETAM (e-EFKA from 01.01.2017) for the minimum period of time specified in the Sickness Regulation of the IKA-ETAM, depending on the type of the occupational disease.

Article 38of ECSS

1. In case of sickness due to an accident, all employees who have at least one (1) day of insurance with e-EFKA are entitled to medical care as described in the Single Health Benefit Regulation (E.K.P.Y.) of E.O.P.Y.Y (no. MEP 5 / 17.11.2012 Joint Ministerial Decision (Gazette B 3054), for the duration of the disease, even if in the meantime the insured may cease to fulfill the insurance requirements for medical care coverage.

The pension is granted throughout the contingency following a medical report of the competent Centers for Certification of Invalidity (KEPA). The same stands for the medical benefits (under Part II medical care).

2. For the provision of medical care referred to in Article 34, there is no waiting period.

PART VIII - MATERNITY BENEFIT

Article 48of ECSS

- **A**. Use of sub-paragraph (a) is made.
- **B**. Women employed in the private sector and in certain Institutions of public sector are insured with former IKA-ETAM.

Directly and indirectly insured women with former IKA-E.T.AM are covered for health care benefits in kind by E.O.P.Y.Y, according to the Single Health Benefit Regulation (E.K.P.Y.) of E.O.P.Y.Y.

C. Statistical data (Article 74)

Table 9: Maternity Benefit

Year	2016	2017	2018	2019	2020	1/2021- 30/4/202 1
Directly Insured	28,245	29,043	30,489	32,117	24,229	10,933
Indirectl y insured	0	0	0	0	0	0
Days of granted benefit	3,452,36 1	3,443,48	3,665,63 7	3,748,09 9	2,809,32 5	1,177,58 2

Source: e-EFKA

Article 49of ECSS

Childbirth benefit for obstetrics costs for giving birth out of a hospital facility, for example at home: lump-sum benefit equal to $\notin 900$ for 1 child, $\notin 1,200$ for twins, $\notin 1,600$ for triplets, granted by EOPYY.

Medication for pregnancy and confinement: free of charge.

Paraclinical examinations: free of charge if made in public hospitals or laboratories of the National Organisation for Healthcare Services Provision (EOPYY. If made in private clinics/laboratories contracted by EOPYY, contribution of 15%. In private clinics not contracted by EOPYY, full charge.

Hospitalisation: The insured woman has the right to free-of-charge hospitalisation in a public hospital of the National Health System (ESY). In a contracted private clinic, her contribution is 30%. For hospitalisation in private clinics, which are not contracted by EOPYY, contribution is 100%.

The directly and indirectly insured pregnant women are provided with the care in public hospitals and hospitals contracted by the EOPYY under the same conditions that are in force for medical care.

Article 50of ECSS

- A. The article 65 of the Code is used.
- B. IKA-ETAM subsidizes directly insured women for 56 days before the expected date of childbirth (gestation benefit) and for 63 days afterwards (confinement benefit), in total of119 days. During those 119 days of maternity leave, the benefit paid is 50% of the estimated wage of the insurance class to which the insured woman has been classified, based on her earnings of the last 30 days in the previous year plus the child benefit (10% for each child and up to 40%). The minimum amount of benefit is €11.06, while the maximum daily amount is

€47.47without dependent family members and up to €66.46 daily with maximum of 4dependent members.

Article 51of ECSS

The conditions for granting the benefits of article 49 (questions A and B) are already mentioned in article 11 (PART II - Medical Care).

In order to be eligible for the "special maternity benefit" (article 50), the working woman is required to have completed at least two hundred (200)days of insurance during the two (2) years prior to the maternity leave.

Article 52of ECSS

The leave granted is 17 weeks or 119 days.

Period of 8 weeks or 56 days is granted before the date of delivery and the remaining 63 days postpartum.

The national Law has been harmonised with the Directive 92/85 of the European Union regulating that during the absence from work, the salary or an appropriate benefit needs to be maintained if the medical evaluation shows danger for the safety or the health of the working woman.

The special maternity allowance ensures the worker salary at least equal to those which would be obtained if absent from work due to sickness.

The amount of the special maternity allowance equals to the amount of sickness benefit, without the constraints of the ceilings provided for by the legislation of IKA-ETAM.

Law 4808/2021 (Government Gazette A' 101) incorporated Directive (EU) 2019/1158 of the European Parliament and of the Council of 20th of June 2019 on work-life balance. In particular:

- Article 27 introduces the definition of paternity leave. Every working father is entitled to 14 working days' paid paternity leave to be taken at the birth of the child. Such leave may: either (a)be granted 2 days before the expected date of birth, in which case the remaining 12 are granted, in whole or in part, directly as a result of the birth of the child, within the 30 days after the date of birth, or (b) be granted after the date of birth. In the case of adoption or foster care of a child up to 8 years of age, paternity leave is granted from the child's integration day in the family.
- Article 34 extends maternity leave in cases of adoption and surrogate motherhood. The presumed mother who has a child under the surrogacy procedure, as well as the working woman who adopts a child from the child's integration into the family and up to the age of 8 years, shall be entitled to the post-birth part of the maternity leave (63 calendar days) as well as all the

remuneration and allowances associated with it, provided that they meet the conditions laid down by their insurance fund.

Payment by the employer during maternity leave:

For the first month

The employer has the obligation to pay salary during maternity leave; since the pregnant woman is not considered to be responsible for being temporarily unfitted to work (the provisions of articles 657 and 658 of Civil Code are applied). More specifically, the obligation of employer to pay her salary during maternity leave is limited to 15 days in the case that the leave started after at least 10 working days and before completing the first year of service. After the completion of the first working year, the obligation of payment of salary is extended to 1month. It is to be noted that according to the above provisions, the employer can deduct any amount the beneficiary receives from her insurance institution, if it concerns the same period for which the benefits are paid. Namely for the first month the income of the pregnant woman is covered 50% from e-EFKA and 50% from the employer.

For the rest of the period

After the mentioned first 15 days or the first month of payment by the employer according to articles 657 and 658 of Civil Code, the Work Force Employment Organisation (OAED) is obliged to grant additional maternity benefits for the period up to 17 weeks. The amount paid is equal to the difference between the amount granted by former IKA-ETAM and the regular salary of the insured woman compulsory paid by the employer.

Special benefit for maternity protection

After the end of both the maternity leave and the period of 3.5 months during which she is entitled to reduced working hours that are considered to be a sort of a paid maternity leave, a working mother insured with former IKA-ETAM is eligible for special 'maternity protection leaves' that can last up to six (6) months. During the6 months' leave, she is eligible for allowance, paid by OAED, which equals to the minimum salary, as it is determined by National Labour Collective Agreement. She is also granted the relevant proportion amounts for Christmas-Easter and Vacation bonuses. This period is taken into account as insurance period in IKA-ETAM. The contributions are calculated based on the above salary and the contributions burdening the insured woman are retained and attributed to IKA-ETAM by the OAED. The employer's contribution burdens OAED, and they are also attributed to IKA-ETAM by the ORED.

In accordance with the provisions of Article 36 of Law 4808/2021, the special benefit for maternity protection is also entitled to the presumed mother (Civil Code 1464) who has a child under the surrogacy procedure and the working woman, who adopts a child from the day of the child's integration into the family and up to the age of 8 years.

PART IX - INVALIDITY BENEFIT

Article 54of ECSS

Private Sector

Assessment criteria:

A person is considered to have normal invalidity when, as a result of illness or physical or mental disability which appeared or worsened after affiliation with the social security system, they cannot earn from work that corresponds to their strengths, skills and education and their usual professional employment, more than a third of the normal earnings of a mentally and physically healthy person in the same occupational category and educational level during at least 1 year.

A person is considered to have partial invalidity when, as a result of illness or physical or mental disability which appeared or worsened after affiliation with the social security system, they cannot earn from work that corresponds to their strengths, skills and education and their usual professional employment more than half of the normal earnings of a mentally and physically healthy person in the same occupational category and educational level in the same occupation during at least 6 months

A person is considered to have severe invalidity when, as a result of illness or physical or mental disability which appeared or worsened after affiliation with the social security system, they cannot earn more than a fifth of the normal earnings of a person of the same educational level during at least 1 year.

The results of applying these criteria are expressed in percentage:

- severe invalidity: invalidity of more than 80%.
- normal invalidity: invalidity between 67% and 79.99%.
- partial invalidity: invalidity between 50% and 66.99%.

Minimum level to be eligible to invalidity pension: 50%.

The method of calculating the contributory pension, which is financed by the insurance contributions, is the same as in the old-age pension (Article 28, Part V).

The national pension is financed from the State Budget. It amounts to $\in 384.00$ for 20 years of insurance and above and is reduced by 2% for each year of insurance that is less than 20 years, with a minimum amount that corresponds to 15 years of insurance, is $\in 345.60$. To pensioners who receive a reduced disability pension, the reduction is applied according to the disability rates and specifically:

- a) from 50% to 66.99%, 50% of the above calculated national pension is granted.
- b) from 67% to 79.99%, 75% of the above national pension is granted

c) from 80% and above the full amount of the above calculated national pension is granted.

Public Sector

When the provisions of par. 2 of article 165 of Law 3528/2007 are used, a minimum percentage of disability is not required. In case of use of these provisions, the employee is dismissed from the Service, after the opinion of the Secondary Health Committee, which examines his working ability, without stating any rate of disability.

In case the employee leaves before the retirement age limit, but has established a right to a pension, his pension is paid before the completion of the age limit only if he becomes meanwhiledisable at a rate of at least 67% (sub-aa, per b, par. 3, art. 56 of PD 167/2007). The pension is paid from the date of disability certification.

For civil servants the criteria used to assess eligibility for invalidity pension, depends on the capacity to perform their duties in the civil service. The results are not expressed in percentage.

The civil servant who receives a monthly salary from the State Budget or other special resources as well asthe permanent military officer is entitled to a lifetime pension, if he is dismissed for physical or mental disability, which is not due to service and has at least 5 years of actual pensionable service. The incapacity is certified according to the provisions that apply each time (Article 1 and article 26 of PD 169/2007)

The calculation of disability pension (Article 28, Part V).

Disability pension is composed of:

a)The national pension, which is not financed by contributions, but directly from the State budget. The amount is set to \in 384 per month for at least 20 years of insurance. This amount is reduced by 2% for every year which falls short from 20 to 15 years of insurance (i.e., the amount of national pension for 15 years of insurance is \in 345.60 per month).

The above amount of the national pension is reduced further according to the rate of disability:

- severe invalidity: invalidity of more than 80%: full national pension.
- normal invalidity: invalidity of more than 67% 79.99%: 75% of the national pension.
- partial invalidity: invalidity 50% 66.99%: 50% of the national pension.

b) The contributory pension which is calculated depending:

• on the years of insurance considered by applying replacement rates per year, which start from 0.77% for 15 years of insurance gradually increasing to 2.55% for 40 years of insurance and 0.50% for every year over 40.01 years of insurance, and

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• on the average pensionable earnings of the insured person from the insurance year 2002 until the day the person applies for pension.

The contributory part of the invalidity pension varies according to previous earnings in employment.

Article 55of ECSS

- **A.** Use of sub-paragraph (a) is made.
- **B.** The employees insured with e-EFKA.
- C. Statistical data(Article 74)

Table 10: Invalidity Pension

Year	2016	2017	2018	2019	2020	May 21
Number of Pensions private sector	113,283	96,214	92,658	92,769	89,470	97,810
Number of Pensions public sector	na	na	7,901	7,823	7,907	na

Source: e-EFKA

Note: The data for the private sector for 2021 and for the public sector for 2020 are estimated.

Article 56of ECSS

For the calculation of the disability pension the provisions of articles 55a and 65 of ECSS were used.

Disability pensions

Type of Beneficiary: Male, skilled, manual, with spouse 2 children and 15 years of insurance

Percentage of Reference Salary: 40%

Monthly Salary Reference: €1,428.22

40% of the Reference Wage 1,428.22*40%: 571.29

Years of Insurance	Pensionab le salary	National Pension	Contrib utory Pension	Main Pension	Suppleme ntary Pension	Sum	Gross Pension Replace ment Rate	Retirement replacement rate (according to ECSS)
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15 Full Pension	€1.370,16	€345,60	€158,25	€503,85	€73,81	577,66	42,16%	40,45%
Partial reduction 25%	€1.370,16	€259,20	€158,25	€417,45	€59,67	477,12	34,82%	33,41%
15 Partial reduction 50%	€1.370,16	€172,80	€158,25	€331,05	€45,52	376,57	27,48%	26,37%

Article 57of ECSS

Private Sector

Insured persons who have been assessed incapable with a percentage of at least 50% invalidity rate by the competent Centers for Certification of Invalidity (KEPA) must have completed:

- 4,500 insurance days during the whole working life.
- Up to the age of 21: 300 days (or 1 year of insurance). This period increases progressively by 120 insurance days per year up to 4,200 days until the age of 54.
- If none of these conditions are fulfilled, 1,500 working days are required, of which 600 during the 5 years preceding the invalidity.

In case of a working accident or an occupational disease: full eligibility as of the first day of insurance.

In case of an accident occurred outside the working place, 2,250 or 750 insurance days (of which 300 in the last 5 years preceding the invalidity) are required.

Public Sector

If a civil servant as well as the permanent military officer is dismissed for physical or mental incapacity not due to the Service, they must have at least five (5) years of actual pensionable service (article 1 and article 26 of PD 169/2007).

Article 58of ECSS

Private Sector

The right to the disability pension lasts for the period indicated by the competent Centers for Certification of Invalidity (KEPA).

Entitlement to disability pension starts on the day the application for retirement is submittedwhen invalidity is recognized by the Decision of the Centers for Certifying

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Incapacity (KEPA), or up to six months prior to the application in case a of a prior sickness benefit (i.e., after 182, 360 or 720 days)..

For illnesses that are considered as irreversible, entitlement is granted permanently. Otherwise, the period of entitlement is decided by KEPA.

The payment of the disability pension to the insured of e-EFKA is suspended, if and as long as the pensioner does not attend, according to the provisions of the Regulation of the Organization for re-examination of his situation by the competent Health Committees (no.29, par. 7 Law 1846 / 51).

The beneficiary can decide to convert the disability pension into an old-age pension, provided that the conditions of 4,500 days of insurance and of 67 years of age are fulfilled. Totally blind persons and insuredsuffering from specific diseases, having accomplished 4,050 days of contribution, can retire earlier.

Entitlement to a disability pension is permanent for civil servants who are discharged from service because of invalidity.

Public Sector

Not applicable.

PART X - SURVIVORS' BENEFIT

Article 60of ECSS

The surviving spouse who works or is a pensioner receives 70% of the survivor's pension for the first 3 years of receiving the survivor's pension. After the first three (3) years the awarded pension is reduced by 50% if the spouse works or receives another pension.

The survivor's benefit is incometested only for the divorced spouse (the personal average monthly taxable income should not exceed twice the amount of the Social Solidarity Benefit for uninsured Elders paid by OPEKA, i.e., 2* €360=€720 per month).

The amount of pension for the divorced spouse depends on the length of the marriage before the divorce. The amount entitled is between 25% of the amount granted to the survivor, up to maximum 50% for a marriage period of more than 35 years.

Article 61of ECSS

- A. Use of sub-paragraph (a) is made
- **B.** The family members of the employees insured in e-EFKA

The employees of the private sector, public sector and banks. Also, those who are recruited for the public sector from 01.01.2011 and onwards as permanent

administrative officers, the military personnel and officers of local administrative bodies.

C. Statistical data (Article 74)

Table 11: Survivors' Pension

Year	2016	2017	2018	2019	2020	May 21
Number of survivors' pensions for private sector	302,47	308,46 8	294,39	290,55 7	301,40	294,2 05
Number of survivors' pensions for public sector	na	na	91,191	91,883	91,904	na

Source: e-EFKA

Note: The data for the private sector for 2021 and for the public sector for 2020 are estimated.

Article 62of ECSS

For the calculation of the benefit recourse is had to the provisions of article 65 of ECSS.

Type of beneficiary: widow of a skilled, manual, with 2 children and 15 years of insurance.

Percentage of the reference salary: 40%

Monthly Salary Reference: €1,428.22

40% of the Reference 571.29

Years of Insura nce	Pensionable salary	National Pension	Contributory Pension	Main Pensio n	Supplem entary Pension	Sum	Gross Pensi on Repla ceme nt Rate	Retireme nt replacem ent rate (accordin g to ECSS)
15	€1.370,16		€720	€720	€73,81	€793,81	57,94	55,58%

Article 63of ECSS

Minimum period of insurance of the deceased, for their protected members to be eligible for survivors' pension: Contributions paid for at least 4,500 days or 1,500 insured days, 300 of which during the 5 years before the date of death.

Surviving spouse, under certain conditions:

Length of marriage must be at least 3 years, unless:

- the deceased died from an accident at work or homicide.
- children are born or adopted during the marriage.
- there is an ongoing pregnancy at the time of death which results in a living birth.
- the couple remarries in which case, the length of both marriages needs to be 5 years or more and the second marriage must have lasted at least 6 months at the time of death.

No age restrictions. The conditions are the same for men and women.

The Divorced spouse.

The surviving divorced spouse receives a pension if the following conditions are fulfilled:

- The former spouse, before the death was paying alimony as a result of a court decision.
- 10 years of marriage were completed before the divorce occurred.
- If the former spouse was not responsible for the divorce.
- The surviving divorced spouse is not remarried or is not in a civil partnership

Surviving partners in a civil partnership. The partners in a civil partnership have the same rights in terms of social insurance and benefits as married couples.

Legitimate children, recognized children, adopted children and those considered as such, must be less than 24 years old and not married. In addition, if they are incapable of any gainful activity due to a disability that started before the age of 24, the pension continues to be paid after the 24thyear of age. The pension is suspended if they get married. Men and women are treated equally.

Article 64of ECSS

- 1. The survivor's pension is granted throughout the contingency.
- 2. Spouse: The pension ceases if the surviving spouse or partner remarries or enters into a new partnership.

3. Children: The survivor's pensionceases after the 24thyear of age. The above age limit does not apply to children incapable of any gainful activity, if their incapacity occurred before reaching the age of 24.

PART XII - STANDARDS TO BE COMPLIED WITH BY PERIODICAL PAYMENTS

Article 65of ECSS

Answer provided under each ratified part.

Article 69of ECSS

The insured of e-EFKA has the right to appeal in the event of granting an allowance, ofrejection or of a dispute over the amount paid. In particular, the insured has the right to make an appeal against the decision of the Director of the local branch of e-EFKA that will be examined before the Local Administrative Committee; set up and operating in each local branch of e-EFKA with the participation of a representative of the insured. In case where the Local Administrative Committee overrules the objection of the insured, the latter has the right of appeal to the Administrative Courts. The directors of local branches of e-EFKA also have the right to appeal before the Administrative Courts, in case they consider that the decision taken by the Local Administrative Committee, which may be partially or fully in favor of the insured, contravenes the Law.

Article 70of ECSS

- 1. According to article 56 of Law 4387/2016, as supplemented with article 14 of Law4455/2017:
- a. Resources of the e-EFKA shall constitute:
- i. The revenues from the insurance contributions of insured persons and employers, the annuities of property, the return on capital and reserves, as well as any other income and resources established in its favor.
- ii. The revenue from the contributions provided for in favor of the entities, sectors, branches and accounts incorporated in e- E.F.K.A., in accordance with Article 53 of Law 4387/2016, the annuities of property, as well as the return on such funds and reserves and any other income and resources provided for by a provision of Law.
- 2. Contributions and all kinds of resources received from the entities, sectors and accounts referred to in Article 53 hereof and attributed to third parties, sectors and accounts shall continue to be collected by e-E.F.K.A. and attributed by it to the beneficiary bodies, sectors, sectors and accounts, in accordance with applicable Law.

3. The subsidy from the State Budget according to paragraphs 2 and 5 of article 2 of Law 4387/2016. The subsidy is provided for the national part of the pension which is covered directly from the state budget and not from social security contributions.

For the year 2020 the subsidy from the state budget to e-EFKA amounted to €13,373 billion. (Source: Directorate of Financial Supervision and Inspection of Legal Entities of the Ministry of Labour and Social Affairs).

- a) The benefits of part VI are not provided by a specific branch
- **b)** Rates of insurance contributions to e-EFKA

Table 12: Rates of insurance contributions

Insurance Branch	Employee	Employer	Total
Medical care benefits in			
cash and in kind	2.55	4.55	7.10
Pension	6.67	13.33	20.00
Supplementary pension	3.25	3.25	6.50
Arduous and unhealthy			
occupations	2.20	1.40	3.60
Occupational risk	-	1	1
Total	14.67	23.53	38.20

The above-mentioned contribution rates are the same for those insured until 31.12.1992 and for those insured for the first time after 01.01.1993.

Accepted Parts	Resources allocated for the protection of employees, their spouses and their children (employer's contribution and state participation) (A)	Insurance contributions paid by the protected persons (B)
Part II	7.10 %	2.55%
Part III	0.65%	0.40%
PartV	20.00%	6.67%
Part VI*	Covered by the contribution of Part V	
Part VIII	Covered by the contribution of Part III	
Part IX	Covered by the contribution of Part V	
Part X	Covered by the contribution of Part V	
Total	27.75 %	9.62%

The total of column B represents about 35% of the column A.

4. Social security in Greece is constitutionally established (art. 22, par. 5 of Constitution). The social security system operates throughthe self-governed fund e-EFKA and covers all employees in the Greek territory. The insurance undere-EFKA is compulsory.

5. Changes

1) The increase in retirement age: The provisions of sub-paragraph E3 of paragraph E, article 2 Law. 4336/2015 (Government Gazette A' 94) and the Ministerial Decree (F11321 / oik.47523 / 1570 / 26.10.2015) (Government Gazette B 2311) set an increase in the retirement age for the full and reduced amount of pension. In particular, from 01.01.2022 the retirement age for full retirement pension for all insured in all Social Security Funds incorporated into e-EFKA, including employees in the Bank of Greece, will be 62 years of age (12,000 insurance days or 40 years) and 67 years of age (4,500 days or 15 years or of insurance), subject to the provisions of par. 3 of article 11 of Law 3863/2010 (Government Gazette A' 115). Moreover, from the above-mentioned date the retirement age for a reduced old-age pension, where is applicable according to general, special or statutory provisions, for all Social Security Funds incorporated into e-EFKA, including the Bank of Greece, will be 62 years of age with 4,500 days or 15 years of insurance. In cases, where a right to a full or reduced pension is not established, the retirement age gradually increases until 01.01.2022, according to the provisions of the above paragraphs 1a and 1b, subject to the provisions of paragraph 3 of Article 11 of the Law 3863/2010 and the relevant the tables. These arrangements exclude arduous and unhealthy professions, as well as the mothers and widowed fathers of children incapable for any gainful activity. Acquired (mature) pension rights of insured with Social Security Funds, including the Bank of Greece, that meet the retirement conditions of the insurance period and age limit, where provided, are not affected and can be exercised at any time.

2) The calculation method of the pension:

The main pension is composed of:

a) the national pension, which is not financed by contributions, but directly from the State budget. It is based on the years of residence in Greece (€384 per month if the pensioner has 40 years of residence from the age of 15 up to the age for receiving the pension and at least 20 years of insurance).

This amount is reduced by 2% for every year which falls short from 20 to 15 years of insurance (i.e., the amount of national pension for 15 years of insurance is €345.60 per month).

- b) the contributory pension which is calculated depending:
 - on the years of insurance considered by applying replacement rates per year which start from 0.77% for 15 years of insurance gradually increasing to 2.55% for 40 years of insurance and 0.50% for every year over 40.01 years of insurance, and
 - on the average pensionable earnings of the insured from the insurance year 2002 until the day the person applies for pension.

It is granted monthly.

In addition, contributions paid during the same period in different insurance funds incorporated in e-EFKA (parallel insurance) are considered in the amount of the contributory pension as follows: for every year of parallel or extra contributions, the annual percentage of replacement is 0.075% for every 1% of additional contributions paid.

The contributory pension is based on the average pensionable earnings of the insured from year 2002 until the day of the application for pension. The average is calculated as the quotient of dividing the total monthly remuneration of the insured by the total insurance period. The sum of monthly salaries received by the insured is the sum of the monthly remuneration subject to contributions throughout the insurance life. The calculation of pensionable earnings takes into account the insured's earnings for each tax year, increased by the change in the average annual Consumer Price Index of the Hellenic Statistical Authority for the period until the end of 2024, and from 2025 onwards by the Wage change index, calculated by the Hellenic Statistical Authority.

Ceiling on pensionable earnings: €6,500 per month on which contributions have been paid.

Article 71 of ECSS

Article 4 of Law 4670/2020 replaced Article 57 of Law 4387/2016 as follows:

- 1. e-E.F.K.A. management bodies are: (a) the Governor and (b) the Governing Council.
- 2. In e-E.F.K.A. one (1) position of Governor is constituted. The Governor must hold a degree from national university or an equivalent degree from the rest of the world, with experience and training in administrative or economic matters or in matters of social security or social policy and is full-time job. Its choice is in accordance with the procedure laid down in article 49A of the Rules of Procedure of the Parliament, as in force, after a proposal from the Minister of Labour and Social Affairs. It is appointed by a Decision of the Minister of Labour and Social Affairs for a four-year term, with the possibility of equal renewal once following the above procedure.
- 3. Four (4) positions of Deputy Governors are constituted in e- EFKA, of the same qualifications as the Governor, as full-time jobs, appointed by Decisions of the Minister of Labour and Social Affairs for a four-year term. The appointment decisions of the Deputy Governors shall also rule who shall replace the Governor in case of absence or busy in all his duties, as Governor and Chairman of the Governing Council, in the order of replacement provided for in them.
- 4. The Governing Council of e-E.F.K.A. consists of eleven (11) members, set up by Decision of the Minister of Labour and Social Affairs, published in the Government Gazette, by way of derogation from the provisions of paragraphs 1 and 2 of article 3 of Law 1778/1951 (A' 118) and paragraphs 1 and 2 of article 37 of Law 2676/1999 (A' 1), and consists of:
 - a. The Governor, as President, who shall be replaced in accordance with paragraph 3.
 - b. The first two (2) in the order of replacement Deputy Governors, with the other two (2) Deputy Governors as their replacements.
 - c. Two (2) representatives of the insured persons proposed by the Advisory Committees referred to in Article 58 of this Law, with their deputies.
 - d. One (1) representative of pensioners co-designated by the Supreme General Confederation of Pensioners of Greece (A.G.S.E.E.), the Pan-Hellenic Federation of Pensioners of OAEE (P.O.S.O.A.E.), the Federation of IKA Pensioners of Greece and Supplementary Funds of Employees and the Pan-Hellenic Federation of Civil Pensioners (P.O.P.S.), with his deputy. If a joint representative is not appointed within thirty (30) days of the relevant written invitation from the Minister of Labour and Social Affairs, the Minister shall choose from among those proposed by the collective bodies of pensioners.
 - e. One (1) representative of the National Confederation of Persons with Disabilities (ESAMEA), with his deputy.

- f. One (1) representative of the employees of the e-E.F.K.A., who is elected by the employees of the e-E.F.K.A., with his deputy. The selection of the representative of employees shall be made by all officials by universal, direct and secret election procedure. By decision of the Minister of Labour and Social Affairs, the voting procedures are laid down in accordance with the spirit of the provisions of Law 1264/1982 (A' 79). During the first establishment of the Board of Directors of e-EFKA and until the election of the representative of the employees of the Organization, the representative is appointed by the Pan-Hellenic Federation of IKA Workers' Associations (P.O.S.E.-I.K.A.).
- g. One (1) employee, head of Directorate from the General Secretariat for Social Security of the Ministry of Labour and Social Affairs, with his deputy.
- h. One (1) employee of the Ministry of Finance, Head of Department or Directorate, with his deputy.
- i. One (1) special scientist, specialized in social security and protection issues appointed by the Minister of Labour and Social Affairs with his deputy, of the same qualifications as him".

Article 74of ECSS

Answered under each ratified part.