## SECRETARIAT GENERAL

Directorate general I - Human Rights and Rule of Law / Direction generale I - droits de l'homme et Etat de Droit

DIRECTORATE OF HUMAN RIGHTS / DIRECTION DES DROITS DE L'HOMME

DEPARTMENT OF THE EUROPEAN SOCIAL CHARTER SERVICE DE LA CHARTE SOCIALE EUROPEENNE

Strasbourg, 1 October 2021

MISSCEO (2021) 4

## MUTUAL INFORMATION SYSTEM ON SOCIAL PROTECTION OF THE COUNCIL OF EUROPE (MISSCEO)

## 22<sup>nd</sup> Meeting

23 June 2021 (online)

**MEETING REPORT** 



## I. OPENING OF THE MEETING

Ms Amaya Ubeda, Administrator, Department of the European Social Charter, opened the meeting and welcomed participants. She provided an update of developments following the meeting of the Governmental Committee of the European Social Charter and European Code of Social Security (10-12 May 2021), during which Conclusions 2020 of the European Committee of Social Rights (ECSR) were discussed relating to "Employment, training and equal opportunities".

## II. ADOPTION OF THE AGENDA

MISSCEO(2021)1

The agenda (see Appendix I) was adopted.

## III. INFORMATION FROM THE SECRETARIAT

Ms Sheila Hirschinger, Coordinator of MISSCEO, also welcomed participants, in particular the new correspondents for Georgia and Turkey (see list of participants, Appendix II). Ms Hirschinger presented additional information on recent developments, referring to a statement on COVID-19 and social rights, issued by the ECSR, which highlights the rights under the European Social Charter that are particularly affected by the pandemic.

## IV. DEVELOPMENTS IN MISSOC

Ms Loredana Sementini, Coordinator of MISSOC, presented information on recent developments in MISSOC. Explanations were provided concerning revised Guidelines relating to Table 1 (Financing), Table II (Healthcare), Table VIII (Accidents at work and occupational diseases) and Table XII (Long-term care), as well as a revision of the template for information on the social protection of self-employed. The main aim of the revision was to improve clarity and consistency. Ms Sementini's powerpoint presentation appears in Appendix III.

The Secretariat thanked Ms Sementini for the very interesting presentation.

## V. GENERAL COMMENTS CONCERNING THE MISSCEO TABLES

Mr Lauri Leppik, Consultant, provided general comments concerning the update of the MISSCEO tables:

- The general aim is to enable a broad comparison of social protection systems between countries, rather than to provide an exhaustive, detailed description of the national legislation. The text should therefore be updated taking a generalised approach to present the broad picture, to enable a good comparison between countries;
- The information in the tables should provide the general principles and rules. Although exceptions to the general rules can be referred to, it is not necessary to provide all the technical details;
- A key challenge is to ensure consistency between the chapters of the tables as well as between information provided by countries;
- When updating the entries in tables, correspondents were reminded to indicate significant changes in the legislation, update values (eg benefit amounts, thresholds, etc) and to delete outdated information;
- with regard to currencies, it is preferable to use ISO codes, eg AMD, AZN, RUB, GEL, MDL, UAH, etc) and to harmonise the way in which the national currency is presented throughout the text.

Mr Leppik referred to the four appendices to the tables which also require periodic updating (the introductions to the social security systems; charts/descriptions of organisation; social protection of self-

employed; and coordination instruments). Ms Hirschinger explained that the appendices are reviewed periodically by the network and that correspondents may indicate changes at any time.

Mr Leppik presented the document on the evolution of social protection systems ("MISSCEO Info"), prepared in 2020 and published online <u>www.coe.int/socialcharter/missceo</u>. Many measures were in response to the COVID-19 pandemic (eg financial and social assistance, healthcare, unemployment benefits), whilst other measures concerned regular developments, such as those relating to adjustments to pension systems, health care, sickness, family and unemployment benefits, guaranteed minimum resources and long-term care.

The Secretariat thanked Mr Leppik for his very useful comments and for his valuable work as consultant to the network.

## VI. EVOLUTION OF NATIONAL SOCIAL PROTECTION SYSTEMS

Correspondents were invited to give a brief overview of recent developments in social protection in their respective countries. The information provided concerned further measures in response to the COVID-19 pandemic as well as changes of a more regular nature. The Secretariat thanked the correspondents for their presentations and requested them to send all the information by e-mail to enable the consultant to prepare this year's document on the evolution of social protection systems.

## VII. PLANNING OF THE 2021 AND 2022 EDITIONS

MISSCEO(2021)3

The following time schedule shall apply to the remaining work for the 2021 edition:

By end June 2021:	Submission of remaining updated tables by correspondents				
By end July 2021:	Submission of remaining information on evolution of social protection systems by correspondents				
By end September 20	21: Finalisation of the updated tables after review by the consultant				
By end December 20	21: Translation of tables, Updating of MISSCEO database				
	Provisional planning of the 2022 Edition				
January 2022:	Secretariat sends comparative tables for updating				
Mid-May - Mid-June 2022: Correspondents submit updated tables					
23 June 2022: 23 <sup>rd</sup> MISSCEO meeting, Strasbourg (date and place to be confirmed					
September 2022:	Finalisation of the updated tables after review by the consultant				
December 2022 Translation of tables and updating of MISSCEO database					

## **VIII. DATE AND PLACE OF THE NEXT MEETING**

The 23<sup>rd</sup> meeting of MISSCEO was scheduled for 23 June 2022 in Strasbourg (to be confirmed).

## APPENDIX I

## AGENDA

- I. OPENING OF THE MEETING
- II. ADOPTION OF THE AGENDA
- III. INFORMATION FROM THE SECRETARIAT
- IV. DEVELOPMENTS IN MISSOC
- V. GENERAL COMMENTS CONCERNING THE MISSCEO TABLES
- VI. EVOLUTION OF NATIONAL SOCIAL PROTECTION SYSTEMS
- VII. PLANNING OF FUTURE WORK
- VIII. ANY OTHER BUSINESS
- IX. DATE AND PLACE OF THE NEXT MEETING

## APPENDIX II

## LIST OF PARTICIPANTS

#### **ALBANIA**

Former correspondent changed post (Apologised for absence)

## <u>ARMENIA</u>

#### **Ms Gayane VASILYAN**

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## **CONSULTANT**

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#### **Implemented in January 2020**

#### Structure revised

- All risks
- Risk-specific principles

#### 1-01 General principles

- Added simplified question on regional or local authorities financing > Please indicate whether state, regional or local authorities are involved or not in the financing of social protection. And If so, how they are involved (e.g. have responsibility for levying own taxes).
- Added question on financing mix > Is the social protection system as a whole financed predominantly by social contributions or taxation or more even mix of the two? In particular, is the system funded essentially through social contributions with the government providing a minor part of the financing or only covering deficits when they arise? Or is the system largely tax-financed with social contributions providing a minor part of funding?



New question > In the case of social contributions, is a single overall set of rates applied or are rates set for each risk separately? Please give only summary information here and indicate the rates in the relevant sections below.



#### Separate questions on:

- I-02 Earmarked taxes > If earmarked taxes apply to social protection, please indicate whether they are applied generally or to specific risks. If applied generally, please give the tax base on which they are levied and the rate applied. If they are applied to specific risks, please provide information under each of the risks concerned.
- I-03 Earnings base > How is the earnings base on which contributions are levied defined for employers and employees? In particular, does it include all earnings from employment or only basic wages and salaries, excluding supplements, such as bonuses or payment for overtime working? Is the base the same for employers and employees?
- I-04 Minimum and maximum > Is there a minimum level of earnings, or hours of work, for contributions to be payable? If so, please indicate what this is. Is there a maximum level of earnings above which contributions are not payable or a maximum level of contribution which is payable? If so, please give details.

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- I-05 Credited contributions > Are people unable to work for specific reasons, such as being unemployed, sick, in education or caring for children:
  - > exempt from paying contributions

> have contribution paid on their behalf or credited to them?

If so, please indicate what these reasons are.

- I-06 Overall social contributions > If there is a single overall set of contribution rates, whether flat-rate or a percentage of earnings, please give summary details of these general rates in respect of:
  - Employers
  - > Employees
  - > Self-employed
  - Other insured persons (e.g. benefit recipients, all residents under universal schemes, those voluntarily insured). If rates vary for different groups of "other insured person", simply state Rates vary.

If there is no single overall set of contribution rates and rates differ for different risks, please give the information for each risk separately in the relevant section below and state: No single set of contribution rates.



#### \* Risk-specific questions

Duplicated question on risk-specific principles with explicit indication that *If the financing principle is the same as for the overall social protection system, please state: Same as general principle.* 

**MISSOC** 

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#### **Implemented in January 2021**

#### Introduction

 Introduction much extended to give more explanation on information to include in the Table

#### Structure of Table

- Structure revised substantially in order to reduce repetition and for consistency with other Tables (mainly Tables III Sickness and V Invalidity)
- Focus on information specifically relating to accidents at work and occupational diseases – information relating to other risks should be reported in relevant Tables with a cross-ref to these in this Table.

pecif	ic points
	II-03 and VIII-04 Definition – Accidents at work and cupational diseases
	Old VIII-05 'Risk covered: Definition – accidents at work' and VIII-06 'Travel between home and work' merged and question broadened to get indication of what is covered
	II-07 – Conditions for accidents at work and occupational seases
	Minimum duration of risk exposure before there is a presumption that a disease or ailment is related to working
	Specific time-limit within which the occupational disease must be diagnosed after a person has stopped working in the occupation or situation concerned for benefit to be payable
> VI	II-08 – Time-limit for claiming
	Time-limit for claiming benefit in respect of an accident at work or an occupational disease

- VIII-10 to VIII-13 Assessment criteria / Evaluators / Review: new categories for consistency with other Tables
- VIII-14 Benefit in-kind Healthcare: new category about any specific provisions which extend coverage further than in the general healthcare system
- VIII-18 Minimum and maximum benefits and VIII-19 Maximum duration: new categories for consistency with other Tables

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## Specific points

- VIII-24 Return to active working life Vocational training and work-related rehabilitation: Substantially revised
- VIII-25 Sanctions: Added question on sanctions towards employers with dangerous/unhealthy workplaces causing too many accidents
- VIII-26 Death Surviving spouse, children and other persons: Previous three categories merged to avoid repetition and to make the information requested clearer



#### Implementation in January 2022

#### Introduction

- Introduction much extended to give more explanation on information to include in the Table
- II-08 Duration of benefits: new sub-question on whether there is a certain (maximum) period of time after which medical care is transferred (in terms of competences) from healthcare to long-term care
- II-10 Doctors' Remuneration: agreement to change the question to refer to general principles, i.e. the main basis for setting the fee or the level of capitation payment (e.g. based upon agreements between the doctors' association and the insurance fund; based upon decisions by public bodies, etc.)?



Principles, i.e. what are the main principles on which hospital financing is based (e.g. closed envelope, previous (average) spending, diagnosis-related groups, occupation of beds). Give indication of whether principles are different for public and private (but contracted by the social system) hospitals.

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- II-22 Other benefits: Question redrafted by focussing on key items for better consistency across countries, i.e. which healthcare or healthcare related benefits listed are provided under the social protection system and whether costs are fully or partially covered by the system.
  - Preventive care
  - Rehabilitation, e.g. physiotherapy, ergotherapy, logopedics, phoniatric and audiological therapy
  - Psychological therapy/treatment
  - > Home medical care (short- or long-term)
  - Costs of travelling to access to services
  - Other (please specify, e.g. ostheopathy, alternative medicine, therapeutic massage).
- II-23 Taxation: New question on whether patient charges or fees paid are tax-deductible, either fully or partly.

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- Revised first time in 2015
- Expected to be implemented in June 2021
- (Commission initiative on LTC in 2022 preparatory work in second half of 2021)

### \* XII-01 Applicable statutory basis

- > Suggestions to include secondary legislation
- > Include web link to legislation database if existing

#### \* XII-02 Basic principles

- > Two additional questions:
  - means-testing (to see whether LTC benefits are means-tested)
  - voluntary insurance (to see whether voluntary social insurance is possible)

#### Main points on revised Guidelines

#### \* XII-08 Organisation (Evaluators and procedure)

Additional questions (on how assessment procedure is carried out, what the criteria are, the existence of the right to appeal) for coherence with other tables

#### \* XII-11 Providers (professional providers)

Included questions on quality assurance procedure, i.e. whether there is a procedure in place; what the main features are (e.g. whether it applies to residential, home and community care, whether it applies to public and private providers); which organisation is responsible for it.

#### \* XII-12 Informal carers

Two additional questions on national definition and on conditions to be fulfilled by informal carers



#### \* XII-17 Cost sharing for benefits in kind

Text changed/added for coherence with other tables (i.e. on the frequency of payment, on whether there is a cost threshold below or above which costs must be borne by those receiving care)

#### \* XII-18 Cash benefits

Text added to indicate the amount paid to those in need of LTC or to the person who provided care

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## Revised for improved clarity and consistency across countries Implemented in January 2021

- > Information provided not always consistent across countries.
- > As for main tables, level of detail differed greatly.
- Information reported sometimes relevant but related to a different question.
- A few questions appeared to be unclear as the information provided implied that what was asked has been misinterpreted.
- In section corresponding to Table IV Maternity and paternity, information in virtually all cases provided only for maternity and should be for paternity as well.
- > In section on Sickness benefits, no information on waiting period.



# Thank you for your attention

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