



Seniors of the European Public Service  
Seniors de la Fonction Publique Européenne

# Bulletin

**Information bulletin for members of the Association**

**December 2017**

**January 2018**

## **SEPS secretariat can be reached**

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### **Bulletin editorial team**

Nicole Caby; Serge Crutzen; Mitsou Entringer; Brigitte Pretzenbacher; Hendrik Smets; Yasmin Soezen; Rosalyn Tanguy

*Most of the articles of the Bulletin were written in French. Translations are mainly from Yasmin Sözen*

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### **Changes of address**

Many members forget to inform us of their change of postal address. A telephone call to +32 (0)2 475 472 470, or e-mail or note to our secretariat would avoid several weeks' gap in receiving news.

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## **Information Meeting**

*Location :Au Repos des Chasseurs\*\**

*Avenue Charle-Albert, 11 1170 Bruxelles (Boitsfort) +32(0)26604672*

**Tuesday 13 March 2018 10:30 a.m. to 4:30 p.m.**

### **According to the traditional pattern:**

- Information about SEPS-SFPE
- The Sequoia network
- **Christmas Lunch**
- Pension and JSI information – Participation of the Head of the JSI Settlement Office.
- Problems encountered by members
- Questions

### **Don't forget to contact the secretariat**

- **To reserve your lunch (€35)**
- **To indicate the number of accompanying persons as well as their name**

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**Decided at the GM of 13 December 2013 !**

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## **I. Letter from the Editor**

The SEPS/SFPE administrative board would like to wish all the members of the Association and their families a happy New Year and, above all, good health.

The year which has just begun will without question be very important for the European institutions and consequently also for our lives as pensioners or similar: BREXIT will influence the operational budget, the discussions foreseen on the new multiannual financial framework, initial preparations for the European Elections of 2019, the review by our Commissioner of all the aspects of staff representation...

The first phase of negotiations between the United Kingdom and the European Union in the framework of BREXIT<sup>1</sup> permits the hope that Great Britain will honour at least part of its commitments relative to the Union budget and more particularly to that of the pension fund. But is this enough? During the discussions of the multiannual financial framework 2021 – 2027, the pensions' budget will most certainly be discussed, the Commission having already received the order to think about savings.

Commissioner OETTINGER had declared to the staff unions that the time of reductions in staffing levels and in expenditure was now over and that to continue on this path would mean imposing restrictions that would endanger the very ability of the European Civil Service to function. The Commissioner added that where expenditure is legitimate, it needs to be made.

We therefore fervently hope that the Commission will maintain the staff, already very limited, who assist pensioners and that it can guarantee its obligation for solicitude towards all the pensioners and similar of the European institutions.

In any event, SEPS/SFPE maintains and hopes even to extend the support it provides to its members. This is not about substituting for PMO or for the Social Services, but very often colleagues just want to know what to do, how urgently to do it, which forms to fill in, where to find them, .. and all this under the stress of a health problem or other which occurs all too often outside of normal office hours. This offer of assistance is based on the experience made on the use of the mobile phone number +32(0)475472470, as the only number by which to call SEPS-SFPE, 7 days a week, 24hrs<sup>2</sup> a day to respond to pensioners.

Serge Crutzen

## **II. Annual adaptation of pensions and correction coefficients**

### **1. Adaptation of salaries and pensions**

In April 2017 Eurostat communicated to the GTR that the adjustment of salaries and pensions of the European officials, which is necessary to maintain the equivalence of purchasing power with that of national civil servants of the Member States, could reach +1.9%. However, at that point, not all the Member States had yet submitted their data.

In September 2017, the exact data showed that inflation had been lower than foreseen, but that the statistics on the salaries in the Member States gave a higher value. This led to the December 2017 salary adjustment being lower than forecast. It came down to 1.5%.

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<sup>1</sup> European Summit of 19 and 20 October 2017 in Brussels

<sup>2</sup> If there is no response, it is important to leave a message. SEPS-SFPE will not call back a number that has called without leaving a message, since often it is a masked number or a commercial publicity call.

The adjustment was applied on 15 December with retroactive effect from 1 July 2017.

### **Statement relative to the automatic annual salary and pension adaptation.**

DG HR requests that this information remain confidential until the official communication to the EP and the Council had been made ; therefore, in practice, at the start of December every year. It is opportune to avoid press comments before our institutions are officially informed, even if this is an automatic method (which we might lose).

### **Remark**

This adaptation, whatever it is, is not a gift, but a simple catching up on what we have lost since July 2017!

### **Some details**

In September 2017<sup>3</sup> the exact data demonstrated that the inflation was only 1.1% and that the GSI (evolution of the salaries of national civil servants) was +0.4%. Consequently:

- The joint indicator Brussels-Luxemburg (JBLI) was equal to 101.1 (+1.1%)
- The "global specific indicator" (GSI) equals 100.4 (+0.4%)

Calculation:  $(101.1 \times 100.04)/100 - 100 = 1.5\%$

Since the GSI is lower than 2% (0.4%) the moderation clause does not apply.

The evolution foreseen of GDP is not negative so that the exception clause<sup>4</sup> does not apply.

## **2. Correction coefficients for salaries and pensions: Annex 1**

The new correction coefficients have been calculated by Eurostat and are applied retroactively from 1 July 2017. They are over all slightly higher.

**For pensioners, these coefficients need to be considered only on pension rights acquired before 1 May 2004.**

## **3. The court case submitted to the Tribunal of the EU for the years 2011 and 2012**

SEPS/SFPE (plaintiff: Serge Crutzen) joined the staff unions of the Institutions and AIACE (plaintiffs: Ludwig Schubert, Pierre Blanchard) for the court case against the Council decisions on the salary adaptations for 2011 and 2012, which had been limited to 0% for 2011 and 0.8% for 2012, instead of 1.7% for the two years combined.

This case has been delayed by the fusion of the European Civil Service Tribunal and the Tribunal of the European Union and was suspended pending a similar legal action by one staff union. The case was resumed at the end of the year and the audience has been set for 21 February 2018.

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<sup>3</sup> Eurostat report Doc.A6465/18/02 – October 2017 – available on request from SEPS or through CIRCA

<sup>4</sup> Delay of the application of a portion of the adjustment until April 2018 – This is not the case SEPS/SFPE

### **III. Report of the General Assembly of 7 December 2017**

#### **1. Budget for 2018**

The proposed budget established by Georges Distexhe is based on the accounts of 2017. If the assistance of a lawyer is required and approved by the Administrative Board for an important activity, an extraordinary budget will be considered on the basis of the available reserves of more than €55,000. The proposed budget is available on request.

**The proposed budget has been approved unanimously.**

#### **Remarks:**

**a. The line for postal costs** which concerns the expedition of various useful documents specifically requested by members (vade-mecum, comparative information on insurances, legal brochure, etc) rather represents activities of direct and individual benefit to members. These are activities of SEPS-SFPE in favour of members and cannot be considered as operational costs.

**b. The “proposed” balance** is 0 ! The expenditure for 2018 will be greatly influenced by the opening of “antennae” and it will probably be necessary to introduce a modified budget during the course of the year.

**c. The line “membership fees” is under-valued** as the secretariat sends out fee payment reminders only once a year. This results in delayed payment of membership fees by an average of almost 6 months for something like 150-200 members, which corresponds to some €2-3,000 as yet unpaid.

#### **2. Development of a SEPS/SFPE antenna in Luxembourg**

Jean-Louis COUGNON, pensioner from the European Parliament in Luxembourg, has volunteered to manage the Afiliatys section of Luxembourg. Given the collaboration between Afiliatys and SEPS, Jean-Louis would also like to manage the SEPS antenna in Luxembourg.

Initially there will be an office presence for SEPS during one full day or two half-days per week, with a limited timetable, in the Konrad Adenauer building (KAD): office 01GO24. Mrs Marie-Andrée RICHARD-MOTCH has volunteered for this task.

The objectives of the SEPS/SFPE Antenna in Luxembourg:

Office presence; distribution of SEPS-SFPE documents; recruitment of new members and contact with members of the Institutions in Luxembourg : the European Parliament, the Court of Justice, the Commission, the EIB, ...

Ultimately, the creation of a real SEPS/SFPE section in Luxembourg?

Proposed participation of SEPS/SFPE at the retirement seminars at the EP in Luxembourg and Brussels. Proposed collaboration agreement with the EP similar to that already established with the Council of the EU.

### **The General Assembly approved the creation of this antenna in Luxembourg**

The Administrative Board and the Assembly approved the financial implications connected with the creation and the operation of this antenna in Luxembourg.

## **3. Nomination of two administrators**

**Jean-Louis COUGNON**, responsible for the SEPS/SFPE antenna (and the Afiliatys section) has been co-opted to the Administrative Board by written procedure of 28 September 2017.

**This nomination was approved by the General Assembly**

**Annie LOVINFOSSE**, effective member of SEPS/SFPE and formerly member of the Administrative Board, has proposed her nomination to the new Administrative Board. She did not offer her candidacy in December 2016 as she knew that for personal reasons she would be unable to attend any meetings during 2017. This situation has changed so she will be available during 2018 and asked to be reinstated as a member of the Administrative Board. **The General Assembly accepted this new nomination**, knowing that the AB can consist of up to 20 members, whereas there are currently only 16.

## **4. Confirmation of the verifiers of the accounts**

As a result of a meeting on the checking of the accounts in 2015 it was decided that three persons would be invited to undertake this verification in order to ensure that at least two persons would be present: Tine Schmale, Filomena Paolone, Nadine Froment

## **5. Call for more effective members**

The effective members decide the overall operating orientations of SEPS. These are official electors for all matters concerning the statutes and the finances of the Association.

### *Article 7 – Membership categories*

*Effective members are the founding members, honorary members, the members of the Administrative Board, and those members nominated as effective members by the General Assembly at the behest of the Administrative Board.*

*The effective members commit to participating at the general assemblies (or to delegate their voting rights) and to participate in written procedures.*

*They declare that they are interested in the management of the Association. ...*

So as to better represent the diversity of our members, a greater number of effective members would be desirable. There are currently only 34 effective members. Whoever can



and would be willing to devote a few hours per year to general assemblies is invited to make this known to the secretariat.

The commitment of effective members is therefore simple and limited: keep abreast of the life of SEPS in order to be able to vote in full cognisance; participation at the general assemblies or sub-delegate voting rights to another effective member present at the meeting.

## **6. Call for more volunteers**

**Office presence at the Council:** Nicole Caby, Anna Giovanelli, Serge Crutzen

**Office presence at the offices at Avenue des Nerviens (N 105):** Patrizia De Palma and Giustina Canu (Tuesdays); Helen James and Nadine Froment (Thursdays)

**Presence on the phone +32 474472470:** Nadine Froment, Helen James, Brigitte Pretzenbacher, Serge Crutzen

It would be desirable to be able to rely on more volunteers for the office presences and in particular to man the telephone.

## **7. Dates proposed for the General Assemblies – information meetings**

**Information meetings: 13 March, 11 October**

**General Assembly + Information meeting: 28 June, 6 December**

NB: It appears that AIACE will hold a GA on 15 March. Many of our members are also members of AIACE BE. The information meeting of SEPS/SFPE originally foreseen on 15 March has been advanced to 13 March 2017. No alternative date appeared possible given the meetings and seminars which are occurring between early March and the eve of Easter.

# **IV. Meeting of the CGAM of November 2017**

## **Report by Monique Breton<sup>5</sup>**

### **1. Action to safeguard the financial equilibrium of JSIS**

a) Recognition of our system by the Netherlands

Discussions are running between DG HR of the Commission and the Minister of Health of the Netherlands in order to obtain an improvement in the conditions applied to the affiliates of JSIS. We would like to have access to the normal Netherlands tariffs. The modalities still need to be defined. Will it be necessary to pay contributions to the Netherland's Health insurance scheme?

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<sup>5</sup> Monique Breton, member of the AB of SEPS/SFPE and of the CGAM  
SEPS/SFPE

b) The idea to create an extranet file which can serve as personal medical file is slowly taking shape.

c) The over-billing in Luxemburg is regularly mentioned without tangible results. Mrs Gerikaite, Head of the Reimbursement Service in Luxemburg, is trying, for the first time, to put into being the technical commission foreseen in the 1996 agreement on the subject of hospital tariffs in Luxemburg. She found in December an excellent French expert who will be able to carry out the cost analysis of hospitals.

d) The president of the CGAM, Mr Singelsma, underlined the importance of maintaining solidarity among the generations and to improve the coverage for dependency, no doubt by separating the heading “handicap” from the heading “dependency”. As explained in earlier Bulletins of 2017, there is a need to address the issue of creating a system for covering long term care, whose impact on the expenditure of JSIS will increase even as income is diminishing. It is probable that JSIS will not be able, in the current circumstances, to cover this dependency chapter, which nonetheless needs to be developed further.

e) The adaptation of the informatics system of JSIS to current technological developments, leading to the ultimate elimination of paper, is presenting PMO with increasingly difficult challenges, as the choice made to create JSIS on-line based on paper documents which have been scanned is increasingly out of phase with national systems. PMO would like to make use of more resources in informatics.

## **2. Psycho-social issues: Protecting against psycho-social risks**

For about two years now there has been an attempt to try and measure the impact on JSIS of the costs of psycho-social risks. The Institutions are very guarded about admitting the existence of this phenomenon and hide behind “medical secrecy” and the absence of reliable data, since they do not collect any.

It should be pointed out that our system does not recognise the notion of burnout as a pathology. Consequently, contrary to the World Health Organisation, the Institutions do not recognise burnout as a professional illness, or even as a pathology.

## **3. Screening and preventive medicine**

This dossier is progressing well. The ‘Conseil Médical’ has prepared alternatives drafts which have not yet been adopted to the screening programmes. The idea put forward consists of a visit to the general practitioner (GP) to select the pertinent measures from the limited list proposed, then to undertake the examinations and a follow-up visit to the GP for debriefing and recommendations.

Some questions remain in abeyance:

- Should these programmes be made available to second level beneficiaries?

- How should these programmes be organised? Bruno Fetelian, Head of PMO3-JSIS has discovered that many agreements with medical centres lead to higher costs than those applied to individual patients. He has asked the CGAM whether it was opportune to maintain these costly agreements. This argument will be considered at the next meeting in January.
- In the present circumstances, children and pregnant women do not have access to a specific programme. Medical advisers deny the existence of such preventive medicine programs at the national level.

#### **4. Psychotherapy**

The list of the various psychotherapy practices eligible for reimbursement is currently being established.

PMO continues its pursuit against anything that might remotely resemble psychoanalysis or Gestalt therapy or any form of support therapy. The situation remains fluid and imprecise. Refusal decisions are never based on a concrete analysis of the situation of the person concerned. Affiliates continue to experience difficulties linked to the therapeutic methods that are rejected, the refusal to reimburse treatments by a psychologist accredited in another Member State than where the treatment occurs, the refusal to acknowledge the link between the treatment and serious illness, most notably cancer.

#### **5. Delay in the reimbursement of Belgian hospital bills**

(This issue has already been explained in the October 2017 Bulletin)

In summer 2016, during the preparations for the move of the Brussels Reimbursement Service, PMO had resumed the processing of 9000<sup>6</sup> delayed bills, which are related only to bills from hospitals in Brussels. Analysis of the processing of these bills has highlighted weaknesses in the registration process of the accounts. This is being rectified. The process of rectification has not yet been completed.

The CGAM has had to place the JSIS 2016 activity report in abeyance, pending the final figures that need to be inserted. These delayed bills represent a value of almost €20 million. In agreement with DG BUDG it has been agreed not to reopen the accounts of 2016, but to create a dedicated line under the 2017 account.

It will be necessary to review the system of provisions in the accounts, to put in place higher provisions for direct billing since more than 90% of the bill represents costs to JSIS (less than 10% is charged to the affiliate).

Moreover, the bills are received in PDF form. They then need to be recopied into the ASSMAL2 programme, which represents a considerable loss of time and a permanent

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<sup>6</sup> It is important to realise that 25,000 bills are dealt with by PMO/JSIS every year.

source of errors. The receipt of electronic bills from hospitals with which PMO works most frequently would save a lot of man-hours and allow for more reliable control.

In the context of this chapter, Bruno Fetelian announced the creation of a 'Committee for piloting the audit' and asked the CGAM whether it would be ready to participate in it on a bilateral basis. The staff representatives agreed in principle, but wanted more details as to the role of this committee and the extent of its mandate.

## **6. Verification of bills by the affiliate**

Another long-awaited measure will be mailing of the bills, received by the Settlement Office in the case of direct billing, to the affiliate before payment. Affiliates will need to indicate whether they have indeed been hospitalised, what category of hospital room they chose and will be invited to verify whether the bill is generally correct. Affiliates are not asked to verify each code of the bill, simply that they read the bill, agree to it and make known any comments or questions they may have about it. This is very important, since the current practice for PMO to simply pay very elevated bills and then to recuperate 15% and the excessiveness from the affiliate continues to create problems.

## **7. Reimbursement under Article 72 §3**

PMO has abandoned, since a long time in Brussels, but also in Luxemburg and in Ispra, the periodic calculation of the special reimbursements eligible under Article 72 §3.

***It is therefore up to each affiliate who has had big bills, of which a portion had to be paid by the affiliate him/herself, to introduce a request to the Settlement Office to make the final calculation.***

This message will be systematically reprised in each bulletin of the Association.

## **8. Electronic prescriptions in Belgium**

(Already announced in the October 2017 Bulletin)

In the spring of 2018 doctors in Belgium will progressively be abandoning paper prescriptions. JSIS affiliates who have a Belgian ID card or a "foreigner" ID card will be able to use the electronic chip on their ID cards. Other patients will continue to receive a paper prescription.

It is advisable for holders of a special ID card to exchange this at their local Town hall for a 'foreigner' ID card.

## **9. Access to a speech therapist in Belgium, not registered with the Belgian authorities.**

Affiliates frequently need the services of a speech therapist (orthophonist) for their children in another language than French or Dutch. Currently the JSIS refuses to reimburse the services provided by practitioners registered in their own country but who work in another

Member State. However, PMO should accept the free exercise of services underwritten by EU law. This question remains unresolved.

## 10. Recognition of a handicap in Belgium

It is useful to remember that there exists the possibility for handicapped persons, children or adults, living in Belgium to benefit from a range of assistance measures financed by the regional and national communities, even for those who are not insured by a Belgian health scheme. In Luxemburg there is also a wide range of assistance measures accessible to handicapped staff, pensioners, and children, which can be taken in conjunction with those foreseen under social services and under health insurance.

**The next meeting of the CGAM:** 17 and 18 January 2018

## **V. BREXIT and the pension fund!**

### **Follow up of articles in the June 2017 and October 2017 Bulletins**

The April 2016, June 2017 and October 2017 Bulletins have already alerted you to the possible revision of our pension scheme in the near future.

Article 83 of the Staff Regulations guarantees our pensions<sup>7</sup> as a debt of the Member States. The system is based on a notional fund recalculated every year.

As this debt is part of the EU budget, its weight is distributed between the 28 Member States, through their contribution to this budget.

The notional fund for our pensions has been valued at more than €67 billion on 1 January 2017. If one applies the percentage Britain pays into the EU budget, approximately 12%<sup>8</sup>, the United Kingdom, would on leaving have to pay €8 billion, just for pensions! If this amount is not paid, the pensions budget of the Union will be in difficulty and this difficulty will very likely have repercussions on the pension scheme itself.

The first phase of negotiations between the United Kingdom and the European Union in the context of BREXIT<sup>9</sup> permits the hope that Great Britain will honour at least a part of its commitments towards the Union budget and that of the pensions more particularly.

The newspaper “The Times”<sup>10</sup> confirms the level of the pensions fund for retired civil servants (€67.2 billion) but exaggerates “a little” when declaring that “the average age for

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<sup>7</sup> Art. 83: The payment of pensions foreseen under the present pension scheme constitute a charge against the budget.

The Member States collectively guarantee the payment of these pensions according to the share each of them makes to the EU Budget

<sup>8</sup> 12% UK, 20% DE, 18% FR, 14% IT, 9% NL, 3% BE, ...

<sup>9</sup> European Summit of 19 and 20 October 2017

retiring is 62 years and that the pension is the equivalent of 70% of the last salary of more than €155,000 per year”!! The newspaper evaluates the percentage due by the United Kingdom to these pensions as being close to €10 billion.

Often, however, the newspapers are wrong about the principles and the figures. For example, “le Monde” declares “*London had made commitments for 2014-2020 and also needs to pay the retirement of European civil servants of British nationality (not only the British), in other words around €30 billion (very exaggerated) more*”.

At the conclusion of the first round of BREXIT negotiations (8 December 17) the British have accepted to pay the total, estimated to be around €45 billion, phased over several years.

What will be the proportion of these €45 billion dedicated to pensions? In addition, Michel BARNIER stated “We cannot calculate the amounts in question with exactitude, all figures will change”.

The announcement of an agreement with the European Union on 15 December 2017, the first real breakthrough on BREXIT, has heightened the prestige of the Prime Minister. But a few days later the British Parliament voted an amendment which obliges any agreement on BREXIT to be ratified by the parliamentarians. “*The Parliament has retaken control of the process of leaving the EU*”, which has introduced a new difficulty to the negotiations and uncertainty.

This means therefore that we should remain ready to defend ourselves. We should profit of the calm before the storm to try and put in place an effective framework for an inter-institutional social dialogue worthy of its name before the start of the negotiations.

## **VI. Letter to Commissioner Oettinger**

As explained in the October 2017 Bulletin, for Commissioner OETTINGER<sup>11</sup> the time for staff reductions and expenditure constraints are over. To continue to impose such restrictions would put in danger the very functioning of the European civil service itself. The Commissioner added that when expenditure is legitimate, it should be carried out.

With the desire to profit of this apparent openness, the Administrative Board of SEPS/SFPE decided to send a letter to the Commissioner in charge of Personnel and the Budget to inform him of the difficulties we are experiencing to officially take part at the dialogue meetings and in the social dialogue process itself.

Although our Association is recognised by the Commission, it is not considered to be representative according to the criteria established in 2005, which required that the number

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<sup>10</sup> The Times, 27.09.2017

<sup>11</sup> Meeting of the Commissioner with the staff unions and communication SEPS/SFPE

of members be over 20% of the retired staff (and others) population, namely, near 5000 members.

This means that SEPS/SFPE is not automatically invited to all the social and dialogue meetings. It becomes necessary for us to ask to be invited or that our participation be requested by one of the staff unions.

Additionally, the Commissioner has decided to review the organisation and functioning of the social dialogue process, in particular the composition and operations of the Central Staff Committee, the framework agreement between the Commission and the Staff Unions, the revision of the bilateral committees (Action 56) and the rules of representation. This is therefore the occasion to request that this discrimination between active and retired officials be ended; the latter do not have the right to participate with voting rights or the right of expression at discussions and modifications of the rules which concern them. This is true for SEPS/SFPE but also for AIACE, who, when it is represented, participates only with observer status.

The letter to Commissioner Oettinger is meant to inform him of this discriminatory situation and to ask him to put an end to it.

## **VII. The SEQUOIA network**

In 2017 there were many departures from working life before the age of retirement

In Belgium the average age for commencing retirement is 59 years, well before the legal age still fixed at 65 years. 80% of those that leave the labour market do so other than through retirement: pre-retirement, illness-invalidity, unemployment, etc.

Whether it is voluntary or not, this departure from the labour force weighs heavily on the persons concerned, especially when this happens suddenly.

Moreover, when leaving 'active employment', on average, one loses about 80% of one's social network and a whole series of skills and competencies, acquired during the course of one's career, are suddenly redundant. At the same time, for those who are still actively employed, it is from the age of about 50 years onwards that they start to have a little more free time; children have left the nest and/or they have rearranged their timetables.

On the basis of this awareness, Sequoia Ways has, since July 2017, developed the Sequoia Network, the first network destined for the 50+ age group in Belgium.

### **The purpose of the Sequoia Network**

The Sequoia Network gives value to and awakens interests and the capabilities of its members and accompanies them in their projects. It is intended for those persons who wish to enrich their relations and who have decided to be the masters over their choices and over their own time.

### **How members become involved**

This is the innovative aspect of the project, the organisation of the network is based on co-creation. Those members who so desire, take an active part in its animation and its management. They are the ambassadors. They organise activities which reflect their interests (culture, sport, health, finances, personal development, etc.)

They also make available to the members of the network their various skills and competences, acquired over the course of their career: support in the creation of a professional activity, training, various workshops, management of the network. There is no typical profile to be an ambassador. Everyone is free to devote the time he/she wants to the Sequoia Network. In the Tournai area, our active ambassador is André Robberechts.

### **A platform for services to the 50+**

The Sequoia Network is also a platform where partners can propose services, volunteer work, employment offers, etc.

### **Geographic coverage of the Network**

Since last summer, the Network has established itself in Wallonia and in Brussels. Since October 2017 information and exchanges sessions have been organised in the main cities of Wallonia and in Brussels. During 2018 the network will spread to Flanders.

The Sequoia Network is an initiative of Sequoia Ways

Since 2015 Sequoia Ways offers conferences and workshops on preparing for retirement. These sources of inspiration for the 50+ are aimed at companies and at private individuals and are given in French, Dutch and English. They are addressed to persons within two years of their retirement or those recently retired. The aim is to accompany these persons in developing a project for their retirement and to provide them with information on the important themes: social life, health, finances, etc. During 2017 more than 800 persons took part in such conferences and training sessions.

**Contact:** Pierre Degand, +32497/59.13.26, [Pierre-Degand@sequoiaways.be](mailto:Pierre-Degand@sequoiaways.be) ,  
[www.reseausequoia.be](http://www.reseausequoia.be)

## **VIII. Clarification: Afiliatys, AIACE and the Hospi-Safe insurance policy**



## Follow up on the article seen in VOX n° 108 of December 2017

There is a certain degree of competition between the complementary health insurances to JSIS:

- **Hospi Safe** offered to active staff and valid for life, consequently also for pensioners, introduced to the Institutions by Afiliatys, offered by Allianz BE and managed by Cigna
- **Major Risks** offered to pensioners, introduced to the Institutions by AIACE, offered by Allianz BE and managed by Cigna.

“Hospi Safe” and “Major Risks” (with its accident option) offer the complementary reimbursement to JSIS for hospitalisation following an illness and after an accident. An accident insurance is also available, thereby creating a trio which is generally poorly understood by colleagues.

- **Specific Accidents** offered to pensioners, introduced to the Institutions by AIACE, offered by Cigna and managed by Cigna.

In its article in the VOX magazine N° 108 of December 2017, page 23, AIACE insists that those who retire will lose their “accident and professional illness” (Art 73 of the Staff Regulations for active staff) coverage on retirement: “*There is no longer any coverage in case of an accident, no compensation in case of invalidity...no capital on death...for pensioners*”.

In an exaggerated fashion, retirees are therefore encouraged to subscribe a specific accident insurance.

### Three remarks are necessary

#### 1. The loss of Article 73 of the Staff Regulations implies that the pensioner will lose:

- the possibility of a capital sum in case of total or partial invalidity in the event of an accident
- the possibility of a capital sum in the event of death resulting from an accident
- the complementary reimbursement of medical expenses to JSIS following an accident (15-20%)

***However, JSIS continues to reimburse 80 or 85% of the medical costs resulting from an illness or an accident. Those who retire do not lose this cover of 80-85% of their treatment costs following an accident. (Beware of ceilings!)***

*The “Specific Accidents” insurance of AIACE is a valid option for those who wish to cover the eventuality of invalidity or death with a substantial capital sum in addition to the additional coverage of JSIS’s reimbursement of medical expenses.*

2. The transfer from “Hospi Safe” to “Major Risks” without the accident option would generate a saving of €50 per year after the age of 67, but this entails three disadvantages:

- The dues for the “Major Risks” insurance can increase substantially from time to time (e.g. 16% in 2016). Those of “Hospi Safe” are fixed for 10 years (except for what concerns the Eurostat index, e.g. 1.3% in 2018)
- “Major Risks” covers only pensioners, whereas “Hospi Safe” is inter-generational (less than 25% are pensioners) and therefore remains stable.
- “Major Risks” has an intrinsic ceiling: this insurance will never reimburse more than that which has been reimbursed by JSIS

In addition, the transition from "Hospi Safe" to "Major Risks" is justified primarily for who takes the specific insurance policy "Accident" but the latter costs from 20 to 90 € per month. The saving of 50 € per year does not represent much.

3. The VOX article states that AIACE does not receive a commission for the “Major Risks” and the “Specific Accidents” insurances. Several colleagues deduce therefrom that Afiliatys receives a commission for the insurances which are subscribed to by its members, in particular for the “Hospi Safe” insurance. This is true.

The commissions received for the “Hospi Safe” contracts and paid to Afiliatys by Cigna are directed towards benevolent activities of Afiliatys, such as: the feast of St Nicholas (2500 participants in December 2017), support to the EU CAN AID, to Give Eur Hope, to the Schuman Trophy, to the European Schools, to several medical research initiatives (UCL – St Luc), to the Foundation against Cancer, to CAP 48 – Viva for Life, ...

The destination of these ‘subsidies’ is decided by the Administrative Board and the General Assembly of Afiliatys ASBL (non profit association). Members of DG HR, of PMO and of voluntary associations sit at this Administrative Board.

## **IX. Training in Informatics**

SEPS has organised training for the use of simple informatics tools such as tablets and smartphones so as to remain in contact, to be better informed, to overcome loneliness, to have access to My IntraComm, to request medical expenses on-line....

This training is provided by Mrs Edith GUETTA “Easy Seniors – digital at the service of seniors”. Contact:

- By phone: Edith Guetta, 0487 63 16 45 or
- By email: [easy.seniors@gmail.com](mailto:easy.seniors@gmail.com) or [edith.guetta@gmail.com](mailto:edith.guetta@gmail.com)
- Cost by group: €30 for 2 hours of training
- Cost of private tuition: €60 for 2 hours of training

As a follow-up to this training, or independently, demonstrations will be organised during 2018 in the offices of SEPS/SFPE for access to My IntraComm and JSIS on-line (currently no WIFI availability at the SEPS/SFPE – Afiliatys offices) In the meanwhile:

Initiation courses and demonstrations for the attribution of an EULogin (formerly ECAS) account can be undertaken from home (in the Brussels area) through private lessons (€60 for 2 hours).

The initiation courses and demonstrations for the attribution of an EULogin (formerly ECAS) account for groups of 2 people can take place at the home of Mrs GUETTA (€30 per person for 2 hours)

To constitute groups, those who are interested should contact Mrs GUETTA in order to let her know what you wish to learn, your current level of knowledge and the informatics tools you wish to work with.

## **X. Important Information**

The majority of the information under this heading of the Bulletin is sent to you as a result of the experiences of those members of SEPS/SFPE who man the telephonic help line.

**The requests for assistance justify this transcription of several texts taken from My IntraComm, knowing that a good number of members do not or no longer access My IntraComm.**

This information is adapted by SEPS/SFPE for those members of the Association who prefer to receive a document by post rather than to have to search for the information on line.

This information can also duplicate information given in previous SEPS/SFPE Bulletins. It is however essential to insist on certain rules and to repeat them.

### **1. JSIS Reception area at the PMO**

The permanence of PMO/3 "Medical insurance" is at the disposal of pensioners on the ground floor of the MERO building – Bur. 00/P026 every day, without appointment, for questions about JSIS (reimbursement of medical expenses, direct billing, prior authorisation, etc)

MERO / 41, avenue de Tervuren, 1040 Bruxelles / Metro exit : Mérode

You can access on presentation of the pensioner's badge at the reception of the building:

***from Monday to Friday : from 9h30 to 13h00***

As before, this reception area is equipped with a printer and a letterbox for any correspondence relating to the sickness insurance.

Do not forget that SEPS/SFPE can help to you solve certain problems

## **2. A pensioner living in Belgium recently had a misadventure**

A pensioner living in Belgium has recently experienced a disagreeable misadventure which resulted in her losing several thousands of Euros. She was contacted by a person purporting to be of the “Financial Directorate” of the European Commission. This person wanted to reimburse costs relating to a purchase, so as to avoid paying taxes. Well informed about the pensioner (namely her date of birth and other personal data) this person succeeded in obtaining banking information which permitted him to draw from the bank account of the pensioner.

This serves as a lesson for being vigilant! This kind of swindle is occurring more and more frequently and no one is safe from it. The swindlers use any and every means at their disposal and succeed in being so “credible” that their “victims” provide their bank information in all trust. If this kind of situation happens to you and you have the slightest suspicion about the identity of your interlocutor, do not hesitate to contact the Security Services of your former Institution.

Recommended viewing: a clip from the RTBT programme “On n’est pas des pigeons” of 30 November 2016 devoted to this subject via the link <https://www.rtf.be/auvio/emissions> .

## **3. Physiotherapy and similar treatments, such as medical massage, hydrotherapy, electrotherapy, mecanotherapy, etc.**

### **Conditions for reimbursement**

In order to be reimbursed, these medical treatments need

- To be prescribed by a medical doctor
- May be subject to prior authorisation (such as Ultraviolet Radiation, speech therapy, psychology, occupational therapy, revalidation, ...)
- Must be delivered by a practitioner who is authorised to provide such treatment and legally registered (physiotherapist, osteopath, acupuncturist, etc.)

### **The medical prescriptions must**

- Be established before the treatment begins
- Be less than 6 months old
- Mention the name of the patient
- Provide justification for the treatment

- Define the nature of the treatment and the number of sessions required  
(**Beware:** a medical prescription for physiotherapy is not valid for osteopathic sessions or for chiropractics or vice versa)
- Cannot exceed the maximum number of sessions permitted during one calendar year (60 for physiotherapy)

## Reimbursement rates

Treatments by physiotherapists and the like are reimbursed up to 80% with a ceiling of €25 per session, for a maximum of 60 sessions per year.

## Non reimbursed treatments

- Aesthetic treatments
- Subscriptions to a swimming pool

## **4. Agreements and conventions:** **benefit of fixed prices**

The joint sickness insurance scheme (JSIS) has established agreements with hospitals in order to regulate the costs of medical services.

The joint sickness insurance scheme (JSIS) has established agreements with hospitals (Annex 2 ) in order to regulate in particular the maximum fees charged by doctors, surgeons and in some establishments, room prices; you can also benefit of fixed prices from medical providers who have answered positively to the Commission's call for providers of medical and paramedical services.

To benefit from these agreements, the admission desk of the hospital or the doctor should be informed of the status of the beneficiary by mean of a letter of direct billing, staff service card, special identity card or a membership certificate.

N.B. They do not modify the procedures to be followed (prior authorisation, letter of direct billing in case of hospitalisation) nor the conditions or rate of reimbursement laid down in the Rules. Therefore they do not always guarantee a reimbursement of 80 or 85%. You have the free choice of hospital or clinic and practitioner.

For more information please contact :

<b>Brussels settlements office</b> Direct billing Office MERO Tel. : (+32) 2 295 98 56	<b>Luxembourg settlements office</b> Ms Palgen et M. Friederes Office DRB B1/073 Tel. : (+352) 4301 36103 (or 36406) Fax : (+352) 4301 36019	<b>Ispra settlements office</b> PMO/06 Ufficio liquidatore Blv. 48c TP843 Tel. : (+39) 0332 78 57 57 Fax : (+39) 0332 78 94 23
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## **5. Direct billing: complete file**

### **Extract from My IntraComm**

**When you face big medical expenses, you can apply for direct billing from the joint sickness insurance scheme (JSIS).**

*With "direct billing", the invoice is addressed to the JSIS which pays the total amount. The acceptance of direct billing by the JSIS does not in any way constitute a guarantee that the amounts invoiced by the care provider will be covered. Direct billing is a commitment that the JSIS makes to pay the bills.*

*Direct billing is a facility offered to members and is not an automatic right.*

The JSIS then calculates the amount which remains at your charge according to the rate of reimbursement (80%, 85%, 100% and with application of relevant ceilings). This amount can be substantial. Finally, the amount which remains at your charge is recuperated from future reimbursements, and possibly from your salary, pension or any other sum owed to you by your Institution.

#### **a. For whom can you request direct billing?**

As long as the eligibility criteria are met (see below), you can submit a request for direct billing for:

- JSIS beneficiaries with primary cover
- Beneficiaries with complementary cover if the member provides proof that the primary scheme will not grant any reimbursement for the treatments concerned.

#### **b. What are the criteria for direct billing?**

Direct billing can be agreed according to the following criteria:

- in the case of hospitalization, even for one day, if the hospitalization is aimed at:
  - the treatment of medical conditions or surgical operations or for giving birth
  - revalidation or functional re-education following a medical condition or debilitating surgical operation
  - treatment of psychiatric conditions
  - palliative care
- in the case of heavy outpatient treatments, in the context of a serious illness
- if the monthly cost of treatments exceeds 20% of the member's pension or basic salary, in the case of recurrent purchases of expensive medicines, of recurrent use of an ambulance or a light-duty health vehicle or expensive examinations.

•

### c. When to request direct billing?

**General rule:** we advise you to request direct billing in good time, between 60 days and approximately 10 days before the foreseen expense in order to ensure satisfactory processing and no delay.

**Emergency:** in the case of same-day hospitalization or any other case of force majeure, direct billing should be requested as soon as possible. The request will be processed as a retroactive direct billing.

### d. How to request direct billing?

#### ***Via JSIS Online***

You can make the direct billing request via the JSIS Online application, to which you can connect with the aid of your EU Login password.

In the application, click on the button "Create a direct billing request", then follow the instructions on the screen.

We suggest that you download and attach the documents that you have already received (prescription, report, estimate) in order to optimise the processing of your request and to avoid requests for supplementary information by the JSIS which can slow down the procedure.

Furthermore, an estimate (cost of the operation and the hospital stay) is obligatory for hospitals not covered by agreements. This estimate also allows a calculation of the cost and therefore the part which will remain at your charge, where appropriate.

JSIS Online allows you to submit your request whenever you wish, **24h/24**. Once the request has been processed, you will receive, again via JSIS Online, a copy of the direct billing letter which the service will have sent to the care provider.

If you submit your request on line, in order to avoid any confusion or unnecessary delay, **do not also send it by post and/or via a PMO CONTACT request.**

#### ***By post/fax***

If you do not have access to the JSIS Online application, use the traditional paper method following these steps:

Print and complete the direct billing request form. You can download this form:

- with an EU account login: on [My IntraComm](#)
- without an EU account login: either send a message to [PMO CONTACT](#), or contact your pension manager.
- Asking the SEPS/SFPE secretariat to send you the form (+32(0)475472470).

Please ensure you **complete all sections** of the form. Select the check box that corresponds to your case: hospitalization, heavy outpatient treatment (for those who suffer

from a serious illness), or recurrent medical expenses for which the monthly cost exceeds 20% of the salary or pension.

Indicate the contact details of the hospital or the care provider; it is important so that the JSIS can send them the direct billing request.

We suggest that you attach the documents that you have already received (prescription, report, estimate), in order to optimise the processing of your request and to avoid requests for supplementary information by the JSIS which can slow down the procedure.

**Furthermore, an estimate (cost of the operation and the hospital stay) is obligatory for hospitals not covered by agreements. This estimate also allows you to calculate the cost and therefore the part which will remain at your charge, where appropriate.**

**Sign and date** the form in order to validate it.

### **e. Send the request to the settlements office**

In the case of an urgent hospitalization, send the direct billing request as soon as possible.

Once the request has been processed, you will receive by post a copy of the direct billing letter which our services will have sent to the clinic.

### **f. What to do with additional invoices and/or advances?**

When direct billing is agreed by the JSIS, the latter undertakes to pay the invoice. Consequently, the invoices related to the direct billing will be addressed by the care provider to the JSIS. If the member receives an invoice or an order for payment linked to a direct billing treatment, s/he should not pay it but should instead remind the care provider that the invoices need to be addressed to the JSIS.

From the moment direct billing is accepted, no advance should be requested from the member by the care provider.

### **g. The account sheet**

The settlements office will send you an account sheet of expenses.

The direct billing covered the full amount of the invoices. However, a part can remain at your charge, in accordance with the rate of reimbursement and the ceilings. Any amount that you have to repay to the JSIS appears on the line: "balance of advances after recovery". It can be quite substantial.

This amount is automatically deducted from future reimbursements, and possibly from your salary, pension or any other sum owed to you by your Institution. You need to settle this advance in principle **within three years from the granting of the advance** (art. 30§3 of the common rules).



If you don't have any medical expense claims to process, you can spontaneously reimburse these supplementary costs by directly crediting the bank account of the European Commission:

BNP PARIBAS FORTIS    IBAN : BE70 0016 7694 8225    BIC/SWIFT : GEBABEBB

Indicate as reference: "RCAM/AVA/" and your personnel number.

## **h. Estimate the cost at your charge**

It is important to be aware that the amount which may remain at your charge can be quite substantial, in particular in the event of a hospitalization. For this it is useful (though not obligatory) to know the fees charged before the planned expenditure. Two cases are possible:

- **Hospitals not covered by agreements**  
An estimate (cost of the operation and the hospital stay) is obligatory for these hospitals.
- **Hospitals covered by agreements**  
An estimate is not obligatory but is recommended. Indeed, the members who choose to be treated and/or hospitalized in the hospitals which have signed a convention with the JSIS are exempt from the obligation to obtain a price estimate (see point above "What are the criteria for direct billing? 1st indent"). The JSIS nonetheless advises members to ask for the price of the room and, as far as possible, an estimate of the operation. The hospital will thus need to be transparent with respect to its fees, as this will allow the member to assess the amount which will remain at his/her charge.

This estimate allows you to evaluate the cost and therefore the part which will remain at your charge, where applicable.

## **i. Two alternatives to direct billing**

- **Countries outside the EU and/or with "expensive medicine"**

Please note that in the countries outside the European Union and/or with "expensive medicine" (Switzerland, USA, Norway, United Kingdom, Greece ...), other forms of advances can be applied. In these countries, rather than issuing a direct billing letter, it is preferable to pay an advance. It is in your interest to apply in this case as "self-payer", since this allows you to request – and often to obtain – large discounts (sometimes of 50-80%) on hospital invoices. This is why we recommend that you contact your settlements office and provide it with an estimate, in order to enable the JSIS to assess the situation and possibly pay you an advance up to the amount reimbursable. Of course, in this case it is up to the member to pay his/her bills and then submit them for reimbursement

- **Advance on high medical expenses**

The JSIS proposes an alternative, under certain conditions, to help you deal with high costs. This is the advance for "high medical costs".

Exceptionally, you can request an advance (only available to members with primary cover under the JSIS) when you encounter significant expenditure, if:

- your basic salary (or pension) is equal or inferior to that of an official of grade AST2/1  
and
- your expected medical expenditure for the month exceeds 20% of your salary (or pension).  
In this case, fill in **the advance request form** and send it to the settlements office on which you depend, to the address indicated on the form.

Please note! You have three months after receiving an advance to submit the reimbursement claim for your costs; failing this, the advance will be automatically recovered.

#### **j. Litigation with the provider**

##### **The principle of freedom of choice !**

As you know, our joint sickness insurance scheme (JSIS) is based, inter alia, on the principle of free choice of hospital, doctor, etc. by the member.

***Under this same principle of free choice, you, the Member, must where appropriate address and settle any conflicts, disagreements or disputes with the hospitals, clinics and doctors by whom you have chosen to be treated.***

Our services cannot intervene in this regard.

## **6. Non transfer of pension rights.**

### **Cumulating a Community pension and a national pension**

I would like to draw the attention of readers to my article on the same subject, which appeared in a previous edition of our Bulletin<sup>12</sup>.

*The European officials who have not transferred their pension rights to the Community system and who are entitled to a Community pension can now submit a request for a pension for the years worked for a national employer.*

<sup>12</sup> SEPS Bulletin of June 2016, p. 10  
SEPS/SFPE

This is equally valid for those who have already submitted such a request and to whom such a pension was denied.

I am at their disposal for guiding them in their (new) submission.

Hendrik Smets  
Vice President responsible for legal questions

## **XI. Annexes**

### **Annex 1**

#### **Correction Coefficients for salaries and pensions**

See French version overleaf – Annex 1

### **Annexe 2**

#### **Agreements with medical care providers**

See French version overleaf – Annex 2

### **Annex 3**

#### **In memoriam**

Name	Birth	Death	Instit	Name	Birth	Death	Instit
GLINGANI Emmarosa	21-04-36	22-07-17	PE	LAURIJSENS Philomena	01-04-52	02-11-17	CM
WEIR Henry Alan	03-06-48	31-07-17	COM	CROSS David	12-09-39	03-11-17	COM
VAN DE VONDER René	22-01-23	17-08-17	COM	HENDRICKX Paula	27-02-32	05-11-17	PE
BAILLET Claude	25-12-27	25-08-17	COM	BREAS Olivier	30-12-65	06-11-17	COM
VEIGA DA CUNHA Rita	11-10-37	15-09-17	COM	CAMARLINGHI Daniela	12-09-48	07-11-17	PE
LEMOINE Bernard	19-08-33	16-09-17	COM	RASIMUS Antti	30-04-65	08-11-17	PE
MEYNAERT Frederic	16-06-26	19-09-17	CM	VAANE Johannes	31-01-19	10-11-17	COM
NESTORIDI Alexandra	24-07-54	21-09-17	CM	MINGUEZ LARA Pedro	17-06-52	10-11-17	COM

KAGEL Roswitha	05-09-54	21-09-17	COM	LACROIX Alain	07-01-29	11-11-17	COM
DE MEESTER DE TILBOURG Marie	02-02-26	24-09-17	COM	MARTINHO DOS SANTOS Helena	17-11-50	11-11-17	CM
HERRERO Santiago	14-03-54	25-09-17	COM	VAN DAMME Michel	01-05-48	11-11-17	PE
DIETRICH Gunther	05-10-47	27-09-17	CDR	VAN HULLE René	03-07-43	12-11-17	COM
FRANCESCHELLI Rina	09-12-44	29-09-17	PE	JULLET Robert	06-05-41	12-11-17	COM
MINNECI Romano	09-09-36	30-09-17	CES	LUYTEN Paul	06-12-30	14-11-17	COM
DE BUCK-FRIEDRICH Anna	02-09-33	30-09-17	COM	VERGUCHT Aline	14-10-22	17-11-17	CM
VERPLOEG Elias	03-03-26	01-10-17	COM	RAIAH Malika	26-08-65	19-11-17	COM
MEISEN Ingeborg	12-05-43	03-10-17	COM	COPEP Alfred	26-01-23	21-11-17	COM
BERODES Jean-Louis	01-07-51	03-10-17	COM	PANE-ELAZAR Stefania	21-09-32	22-11-17	CM
FACCO Lino	31-10-30	04-10-17	COM	JANSSEN Anne	27-06-46	23-11-17	CM
CAPITANIO Alberto	05-04-31	05-10-17	COM	HOWARD John	04-01-47	24-11-17	CES
VANDERHAEGEN Willy	31-05-31	06-10-17	CM	THILMANY Jean	03-04-30	25-11-17	COM
SUBIRATS Josep	01-05-20	06-10-17	CC	BEECH Susan Denise	28-04-51	18-10-17	COM
SCHROEDER Erich	23-10-27	07-10-17	COM	LUTZ Gerlinde	13-10-35	08-11-17	PE
BREGANI Edo	18-08-23	16-10-17	COM	DITTERICH Kuno	23-07-27	13-11-17	COM
DAVIES David	28-03-29	16-10-17	COM	CRIJNS Leonardus	27-07-23	18-11-17	COM
GORMEZANO Claude	02-12-39	17-10-17	COM	BRIMEYER Nicolas	05-05-20	22-11-17	COM
MINES Guy	06-11-23	21-10-17	COM	DUPONT René	29-01-44	26-11-17	COM
MORETTI Maria-Piera	20-06-38	21-10-17	COM	MEEUS Sabine	28-09-33	27-11-17	COM
KOVACIC Jean-Pierre	27-08-40	21-10-17	COM	BRUNS-WUSTEFELD Ulrich	25-05-21	29-11-17	COM
GRIFFITHS Herbert	09-09-41	21-10-17	COM	OBERT Mechtild	17-03-35	30-11-17	COM
PANOTOPOULOS Georgios	07-01-43	24-10-17	CC	SEMERARO Francesco	16-07-54	03-12-17	COM
VAN CAPPELLEN Maria	24-06-30	25-10-17	COM	MARIN GONZALEZ Manuel	21-10-49	04-12-17	COM
LAUWAARS Margreet	16-01-47	13-10-17	COM	GENARD Marie-Thérèse	16-02-23	05-12-17	COM
SCHOEDER Fritz	31-07-39	17-10-17	COM	BECKER Winfried	19-10-28	05-12-17	COM
DESEURE-VILAIN Anita	21-01-50	21-10-17	PE	COPELAND Charles	29-02-48	05-12-17	COM
RAVASIO Giovanni	02-04-39	23-10-17	COM	VERDUYCKT Franciscus	01-02-30	06-12-17	CM
BAILLEUX Mireille	09-06-46	24-10-17	COM	ROSSI Guglielmo	18-06-32	06-12-17	COM

**Files and documents available.  
Order form**

**Please send this reply slip to the secretariat**

I should like to receive the English edition of the following documents

by Post/Email

**SEPS Vade-mecum**

Part 1 (Procedures – edition august 2015 FR only) O / O

Part 2 (forms /pers. data) O / O

**Part 3 (addresses PMO – ADMIN. ...)** Ed. June 2017 O / O

Part 4 (reimbursement forms – RCAM/JSIS) (April 2015) O / O

**Supplementary health insurances** Edition May 2017 O / O

**Invlidity allowance and survival pension (Hendrik Smets)** O / O

**Orphan survivor's pensions (Hendrik Smets)** O / O

**EU Officials and taxation (Me. J Buekenhoudt)** O / O

**Inheritance (Me. J Buekenhoudt)** (April 2016) O / O

**JSIS Guide (was sent by poste to all pensioners)** O / O

Please send these documents (by Post or by Email) to :

Surname.....

First name .....

Address :  
.....  
.....

Email address: .....

Date : ..... Signature : .....

To be sent to

**SFPE – SEPS**  
175 rue de la Loi,  
Bureau JL 02 40 CG39,  
**BE-1048 Bruxelles**

**Fax: +32(0)2 2818378**

GSM: +32 (0)475 472470

Email:

[info@sfpe-seps.be](mailto:info@sfpe-seps.be)

**APPLICATION FORM**

I, THE UNDERSIGNED: .....

HOME ADDRESS: .....

HOME Tel: ..... GSM: .....Email: .....

FORMER OFFICIAL OF (Institution + DG or Dep.): .....

IF still active: date of birth and number of years of service: .....

HEREBY APPLY FOR MEMBERSHIP OF THE "ASSOCIATION OF SENIORS OF THE EUROPEAN PUBLIC SERVICE " (S.E.P.S).

NATIONALITY: .....DATE:..... SIGNATURE: .....

*The annual subscription is €30, payable every year on the date of joining.*

Bank account No. of SEPS: **363-0507977-28** **ING bank** Brussels  
**IBAN BE37 3630 5079 7728** **BIC BBRUBEBB**  
Communication: **Annual subscription + 1<sup>st</sup> and 2<sup>nd</sup> names**

*Please return this application form to:* SEPS - SFPE  
Office 02 40 CG39  
175, rue de la Loi,  
B-1048 BRUSSELS

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*If you choose to pay by standing order (see below), please send the slip YOURSELF direct to your bank.*

---

**STANDING ORDER**

(Please send direct to your bank)

I, the undersigned, .....

HEREBY INSTRUCT .....(Name of bank)

to pay on .....(date) and on the same date each year, until further notice, by

debit of account N° ..... the sum of : € **30** to:

**SEPS - SFPEJL Office 0240CG39,  
rue de la Loi 175  
B 1048 Brussels**

Account N° **363-0507977-28** **ING Bank** Brussels  
**IBAN BE37 3630 5079 7728** **BIC BBRUBEBB**  
**Reference : Annual subscription (+ first name and surname)**

DATE : ..... SIGNATURE : .....

To be sent to

**SFPE – SEPS**  
175 rue de la Loi,  
Bureau JL 02 40 CG39,  
**BE-1048 Bruxelles**

**Fax: +32(0)2 2818378**

GSM: +32 (0)475 472470

Email: [info@sfpe-seps.be](mailto:info@sfpe-seps.be)

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