

Bulletin

Information bulletin for members of the Association

March 2019

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

Membership fees : in 2019, they will have to be paid in January

and not anymore at the anniversary date of your registration to SEPS/SFPE

Annual fees : €30

IBAN: BE 37 3630 5079 7728

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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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Dear Member

We take the protection of personal information very seriously and we commit ourselves to respect the General Regulation on the Protection of Data (GRPD).

Our contact information is used exclusively to ensure our responsibility towards you, as a member, for frank and transparent information on the activities of the Association and the decisions taken by the Administrative Board.

The information you have confided to us is used entirely for internal purposes; it is not made available to third parties (PMO, DG HR, ...) without your express permission.

The Association commits itself to protect this information against any form of dissemination and not to make it available to anyone, except where obliged to under the law or when undertaking an act at your request, within the limits of the social objectives of the Association.

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Serge Crutzen
For the SEPS/SFPE Management

General Meeting and Information Meeting

*Location :Au Repos des Chasseurs***

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

Tuesday 6 june 2019 10:30 a.m. to 4:30 p.m.

On the basis of the traditional programme, from 10h30 to 16h30

- ✓ General meeting SEPS/SFPE
- ✓ Congenial lunch
- ✓ Health Insurance – Pensions – Participation of PMO
- ✓ Problems encountered by members
- ✓ Questions

Do not forget to contact the Secretariat

- ✓ **To make a reservation for lunch and choose your lunch**
- ✓ **To indicate the number of persons who are accompanying you**

Financial contribution: €35 per person

Payment should ideally be made to the ING account of SEPS

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(Participants can also pay on the spot, well before 10h30, please)

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I. Letter from the Editor

Here is the 50th edition of the SEPS/SFPE Bulletin! It is true that the Association was registered in 2008. Remember that this Bulletin is meant to be simple and informative for the members of the association on the subject of discussions concerning regulations, which have an impact on them. Before being able to defend the interests of pensioners, SEPS/SFPE must be aware of their stance on the potential changes concerning the pensions system, health insurance and allowances, ... It is necessary that the pensioners' positions are clearly expressed in good time. Pensioners must therefore be informed continually about potential changes to their acquired rights and to the regulations which concern them! This is the sole purpose of this Bulletin.

This Bulletin can also encourage pensioners to adopt certain positions and stand firmly behind certain actions. In fact, very soon, we will be going to vote for the members of the European Parliament. We should be able to go and vote, in the full knowledge what the issues are.

Indeed, beyond our regulations, and our Staff Regulations, very shortly there will be potentially important changes at the European Parliament. It is our representatives within this Parliament who can influence the attitude of the Council and orientate the activities of the Commission in favour of pensioners. In line with the proposal of the European network "AGE", this is the moment to ask our future MEPs to strengthen the rights of older persons by exerting more pressure on the Council and on our governments.

Let us hope the European Parliament may become a central forum for discussing questions about equal rights for all ages and about inter-generational solidarity.

II. Manifesto for the European Elections of 2019

AGE 7 key recommendations help enforce 'older persons' equal rights to take an active part in society and to live and age in dignity.

AGE Platform Europe

As a founding member of the "AGE Platform Europe" network, SEPS / SFPE suggests you to read the manifesto hereafter, written by the active members of this AGE network.

In 2017, nearly one fifth (19%) of the EU population was aged 65 and more. Moreover, the importance of the very old (aged 80 years or above) is growing at a faster pace than any other age segment of the EU's population. Their share in the EU28 was projected to more than double between 2017 and 2080, from 5.5% to 12.7%.

Many older women and men are making significant contributions to society, for example as workers, through mentoring young people, caring for grandchildren or relatives. Yet ageism still restricts the autonomy and poses barriers to the full and equal participation of older people in different areas of individual and community life.

Respect for dignity and autonomy are universal human rights that apply to persons of all ages and central prerequisites to effective and meaningful participation in society. The United Nations 2030 Agenda and Sustainable Development Goals fulfil the pledge to leave no one behind.

At EU level, the solemnly proclaimed European Pillar of Social Rights and the European Semester together with other EU strategies, such as the Digital Single Market provide an adequate framework for Member States to take action to protect older persons' rights and gender equality in old age.

The future EU budget should help to deliver on EU post 2020 social and non-discrimination objectives, while a renewed political impulse is needed to unblock the proposed horizontal nondiscrimination directive.

The European Parliament has been the champion in advocating for social justice and equality. The 2019 EP elections come at a turning point for the European Union which urgently needs to reconnect with its citizens and represent their interest. We wish a forward-looking EU where not only economy and growth matter, but where concrete action is taken to ensure that everyone is valued and empowered to lead an active and autonomous life regardless of age, gender, race or ethnic origin, religion, disability, or sexual orientation.

Pursuing our aim of an age-friendly European Union and supporting the reflection on an international Convention on the rights of older persons taking place at the UN Open Ended Working Group on Ageing, we call on candidate MEPs to ensure that elimination of age discrimination will become an identified EU priority on equal foot to all other grounds of discrimination in EU treaties, and to take action to:

- 1. Enhance older persons' rights** through combating ageism and age discrimination
- 2. Ensure a life-course perspective on work** and create inclusive labour markets
- 3. Ensure adequate pension** and old-age income for both women and men
- 4. Protect the right to live** and age in dignity through adequate person centered health and long-term care accessible to all
- 5. Ensure healthy lives** and promote well-being for all ages
- 6. Enable universal access to goods and services** in today's digitalized society including for older persons

7. Empower older citizens to **fully participate** in the social and democratic life.

As future MEP, AGE calls on you to push for the EU to support member states to develop national strategies on ageing with the active involvement of older persons and their organizations. Finally we count on your commitment to re-establish in the European Parliament the Intergroup on Ageing and Solidarity between Generations to keep ageing issues high on the EP's agenda.

AGE Platform Europe is the largest network of older people in Europe. We work in the interest of the 200 million older adults of today - and those of tomorrow.

https://www.age-platform.eu/sites/default/files/AGE_2019_Manifesto_EN_long.pdf

III. JSIS – Revision of the General Implementation Provisions (GIP) of 2007

The June 2018 Bulletin noted that during its last plenary meeting the CGAM had decided, in principle, to revise certain provisions of the GIP.

A working group was set up to set the priorities and the timetable; the CGAM should set up the sub-groups to examine the various chapters fairly soon.

The working group consists of:

Monique Breton and Costas Popotas (President and Vice-president of the CGAM-Court of Justice)

For the administrations :

M. Feddersen (EMA) ; Massimo Babich (Commission) ; Mrs. Tejedor (Cour des Comptes) ; Alexandre Jacobs (Commission)

For the staff :

Bernd Loescher et Emanuele Rebasti (Conseil de l'UE) ; Niels Bracke (SEAE) as substitute of Bernd Loescher ; Kim Slama (Commission-U4U) ; Lukasz Wardyn (Commission-CLP Brux.) ; Eva Dudzinska (AIACE).

Preventive health care (reminder)

It is imperative to offer to the non-active population, who no longer has access to the yearly preventive medical examinations, a screening programme adapted to their situation.

The various components of the **programmes**¹ are offered as a function of the age and gender of the beneficiaries. They are based on the most recent studies on screening², which makes it possible to select between recommended and non-recommended examinations.

The importance of the family doctor³

The main novelty relative to current practice is to place the family doctor at the heart of the process. In fact, despite attempts to standardise the approach to screening, reference to the patient's medical history is indispensable in the initial stages to identify certain risk factors and to define which examinations are indispensable and which need to be avoided. A full debriefing at the end of the process is also necessary to explain the final test results and to advise the patient on potential follow-up to be undertaken.

Agreement with recognised medical centres

Case by case negotiations are taking place with health centres that are interested, on the basis of a grid of maximum prices for every type of service agreed to, but subject to the application of the excessiveness clause. The negotiations are led by the Payment offices on the basis of fixed geographic rates.

According to the report made by the CGAM on 20 March 2019 the negotiations with the medical centres are going well. Mr Fetelian has decided to up the negotiation stakes, so that real competition takes place.

In Greece pensioners have provided considerable assistance for contacts with hospital groups and laboratories. PMO invites pensioners to make known to it (through Mr Roberto Rotter, via info@sfpe-seps.be) useful contacts information to enlarge the network of screening services.

If PMO succeeds in controlling expenditure on preventive medicine, then it should be possible to strengthen the programmes and expand them in age-related ways.

Recommendation: wait for the new, more expanded programmes.

Free choice

It remains possible to undertake one of the programmes, on the basis of 100% reimbursement (within the limits of the ceilings set by the GIP) for screening by entering the corresponding code on the JSIS on-line website. A special code will be reserved for the anamnesis and the debriefing visits with your family doctor as these visits will be more complete and take longer than a simple routine consultation: it is envisaged to adopt a ceiling equivalent to a double 'generalist' consultation. Free choice therefore remains possible: your choice of service provider and 100% reimbursement of the programme you have chosen.

¹ Details given in Annex 1 of the December 2018/January 2019 Bulletin

² European study – Report on cancer screening in Europe (May 2017), American studies- Preventive Services US Preventive Task Force (updated on 01/10/2017) – American Academy of Family Physicians; Summary of recommendations for Clinical Preventive Services (updated July 2017)

³ Or the doctor designated by the person concerned

Note:

Attention! Reimbursement is subject to the limits of excessiveness and ceilings. In addition to the JSIS on-line procedure, the “paper” process remains accepted.

Expected role out date: possibly April 2019

Dependency/Long term care (Reminder)

The predominant idea is currently to improve the coverage of dependency and handicaps, in order to reach the standards imposed by the United Nations Convention on the rights of handicapped persons. This Convention is fully legally supported by EU law, including within statutory rights.

It is certain that expenditure will grow significantly during the years to come. It is therefore necessary to think of introducing a statutory contribution from future pensioners as well as from current pensioners to provide strengthened coverage for dependency (intergenerational solidarity).

It is necessary to take greater account of the means available to the person concerned to meet his/her needs. It would therefore be equitable, on the one hand, to improve the coverage of costs faced by people of modest means, who otherwise would be unable to meet them, and on the other hand, to reduce the level of assistance for the more well-to-do pensioners. It is not enough to consider only the pension obtained from the EU; it would be more realistic to consider the assistance needs related to the level of dependency and the global economic situation of the person concerned, taking account of all revenues and all expenditure, in order to calculate how much he/she can contribute to cover his/her needs. This kind of system exists in various Member States who offer a high degree of social protection.

Discussions on taking account of real income and expenditure of colleagues who need to resort to long term assistance have been presented in the March and June 2018 Bulletins.

IV. Situation of hospital billing in Luxembourg

The convention of 1996, reviewed in 1999, which controlled the billing of hospital services in Luxembourg, is no longer correctly applied as the Luxembourg system is no longer based on a schedule of prices but on direct services. For several years now PMO is no longer in a position to check prices as the schedule has vanished. Mrs Gerikaite, Head of the Luxembourg payment office, who has become a member of the central office, started dealing with this problem in 2016, when she realised that she was not obtaining any information from the Luxembourg Hospital Federation (LHF). The technical commission, which should have met each year since 1997, was set up for the first time in 2017 at the initiative of Mrs Gaffey, Director of PMO⁴. It met once in January 2018 with representatives from LHF and the National Health Office (CNS). Representatives from the EIB and an expert selected by the EIB, Mr

⁴ Mrs Gaffey left the position of Director of PMO on 16 March 2019.
SEPS/SFPE

Joseph Ifergan, specialist on analytical hospital accountancy, were at Mrs Gerikaite's side. The CGAM is represented by Mr Daniel Karzel and Mrs Monique Breton.

Since the attempts by Mrs Gerikaite to obtain the necessary accounting data to undertake a calculation of the net cost prices did not succeed, Mr Georges Bingen, Adviser at DG HR, Head of the European Commission's administration in Luxemburg, was given the mandate, by CALUX, the college of heads of administration of the European Institutions in Luxemburg, to lead the negotiations with the Luxemburg authorities on the billing for health care services.

Mr Bingen succeeded in mobilising the Ministry of Foreign Affairs, which suggested the appointment of a mediator, in the person of Mr Dominique, Director of the General Inspection of Social Security in Luxemburg. (GISS).

A meeting was organised by the mediator on 17 December 2018, in the presence of the financial directors of the hospitals. This meeting succeeded in re-establishing mutual dialogue. An agenda has been fixed, with a view to reaching an agreement by June 2019. On that date, in the absence of an agreement which satisfies the JSIS, the agreement could be rescinded and negotiations outside the framework of the convention could be envisaged.

At the present time, on the one hand the CNS and the Ministry of Health claim that they do not possess an analytical account which would allow PMO to know the effective costs in order to establish the best price, whereas in reality the hospitals maintain such accounts. The managers admitted that they have the elements requested by the expert, Mr Ifergan. According to them, the prices indicated in the convention have been established on the basis of the average costs and fixed prices.

The Ministry of Health has enjoined the hospitals to make the hospital documentation available. This data concerns each hospitalisation, its related costs relative to each patient, including patients outside the CNS, and the pathology being treated. However, the Luxemburg interlocutors claim that this data cannot be used before three to five years. Once it becomes operational, a convention will no longer be necessary. The current negotiations are designed to put in place solutions for the next three, four years to come.

The Commission, in the name of the JSIS, has concluded five proposals:

1. Accounting data:

The hospitals should, through the CNS, provide PMO with the information which would permit the recalculation of the fixed prices and tariffs. Currently PMO receives new tariffs each year, without being able to establish on what they are based. The hospitals continue to be reticent about providing information they consider to be internal and not public, despite the recent meeting with Mr Bingen. This information should include the real costs and the number of visits.

2. Hospital costs

There are currently some 40 odd categories (as polyclinics, operation theatres and medical imaging). For some of these categories the difference between two types of fixed costs is too stark. For example, in a polyclinic the lowest fixed cost is less than €100 and that of the category above is as high as €350. Equally, for the operating theatre, one of the categories of fixed costs reaches €1,500, whereas the following one is €17,000! A more linear

progression would be desirable, as some affiliates pay too much, whereas others do not perhaps pay enough. It has been agreed that JSIS would propose a modification of these fixed costs, both with respect to the number of categories (40 actually) as the level of their respective amounts.

3. Day care

In the case of day care (that is a visit to a polyclinic), when a treatment is identical to one offered by a medical practitioner in town, without the assistance of a nurse or a technician, the hospital should not charge a fixed cost. Mrs Gerikaite adds that an expert medical practitioner, selected with the help of the EIB, will undertake an up-dating of the classification of activities established in 1996 and never up-dated since, despite the evolution of the medical profession. His contribution should become available during March 2019.

4. Billing rules

In certain cases, hospitals charge several fixed costs for the same medical consultation. In fact there are certain affiliates who pay two times the rate of €350, which is not normal.

5. Expensive services

PMO has also proposed the removal of expensive services from the nomenclature of fixed costs (for example chemotherapy). Only the real costs should be billed

Mr Bingen hopes to reach an agreement by June 2019. He announced last January that the Luxemburg authorities had taken the initiative of organising a meeting between the new government and Commissioner Oettinger, during which the problem of medical overcharging in Luxemburg would be raised. Mr Bingen considers that the very rudimentary billing system used by the hospitals needs to be corrected to eliminate certain injustices and to be more in line with economic reality.

Mrs Gerikaite indicated that the CNS has committed itself to supply the required figures for the JSIS to calculate the effective tariffs by end February, but this promise has not been kept. The nature of the figures which have been submitted remains nebulous, even though PMO has specified, on several occasions, the kind of data it wishes to receive.

The next meeting of the technical commission will likely take place end March – early April 2019.

Mrs Gerikaite considers that the objective of the current negotiations is, within the next three years, to eliminate all conventions between JSIS and Luxemburg and that the tariffs applied to the affiliates of JSIS will be established within Luxemburg's social security policy.

Despite the efforts of Mr Bingen, Mrs Gerikaite, the representatives of the EIB and Mr Ifergan, not only have the hospital managers not communicated all the data that was requested, but there is no agreement as yet on the structure of the costs which should be paid by the affiliates of JSIS and of the EIB. Nevertheless, a consensus is emerging to abandon the surcharge of 15%, which has no reason to be. At the time of the Ferlini case (C-411/98) which resulted in a judgement on 3 October 2000, the Luxemburg government did not even attempt to mention it, or give it a justification.

Mr Bingen mentioned that the JSIS affiliates resident in Luxemburg paid an average of 57% of the taxes, with the exception of taxes on revenue. The state pays for the buildings and a

part of the equipment and 40% of the CNS's budget. In these circumstances it should be acknowledged that we participate in the State's budget and therefore in the financing of the CNS, which provides hospitals with a global budgetary amount, and even more so given that the convention with the LHF stipulates the deduction of state subsidies.

In the meanwhile, here are the recommendations:

- Before going to see a doctor or a dentist, ask what price will be applied, state your refusal to pay the surcharges for personal staff classified CP8, unless you have already given your agreement on earlier treatment;
- Avoid going for external consultations at the hospitals so as not to pay the fixed cost for the polyclinic, otherwise apply only the cost on the price list of the CNS and nothing more. In any case the hospitals no longer dare to launch procedures for recuperation of debt, for fear of being confronted with another procedure as that of Mr Angelo Ferlini;
- In order to avoid painful disputes, avoid going to a doctor, a dentist or one of the Luxemburg hospitals where you might have a doubt;
- Remember that if you pay too expensively, you will not be able to recoup the difference.

Monique Breton
President of the CGAM

V. Steps taken with the Netherlands

The principles of the system which will be applied to the affiliates of JSIS to be able to access health services and pay the same price as the national population are beginning to be defined.

One of the mutual benefit insurance companies of the Netherlands is ready to sign a convention with the Commission. The draft contract will be carefully examined by the Legal Service. PMO will pay a small amount so that its affiliates, resident in the Netherlands, may obtain a health insurance card from the mutual benefit company, which will be recognised elsewhere as a European Health Insurance card.

With this card, the affiliate can obtain health care on the principle of direct payment by the insurance company.

The Dutch payment office will send a monthly statement to PMO with the details of the health services dispensed. PMO will pay the mutual benefit company the amounts it has advanced. The Commission's payments office will then apply the rates of payment according to the rules of the JSIS. Affiliates may possibly have to reimburse PMO some of the costs.

PMO would like to conclude an agreement within the next month's so that this system can be launched during 2019.

This agreement should serve as model for other countries, starting with Belgium, given that almost 60% of expenditure occurs in this country.

VI. Negative ruling by the European Court of Justice on the 2011 and 2012 adaptation of salaries case

The Bulletins of December 2017 and June 2018 provided information on the situation as it evolved: SEPS/SFPE (plaintiff: Serge Crutzen)⁵ joined the staff unions of the Institutions and AIACE for the appeal against the decisions of the EU Council on the adaptation of salaries in 2011 and 2012, which were limited to 0% for 2011 and to 0.8% for 2012, instead of 1.7% for each of those years, as the officially accepted 'method' of the Staff Regulations produced them.

The fusion of the Civil Service Tribunal with the EU Tribunal delayed the consideration of this appeal. An appeal introduced by one of the Staff Unions on the same subject delayed our appeal for several months.

The Court considered our appeal at the end of 2017.

On 26 February 2018 there occurred a singular audience: Ludwig Schubert was invited to present his arguments and his data to the Court, in relation to the "exception" clause⁶ invoked by the Council. The judges appeared receptive and they were convinced by several of the arguments put forward by the plaintiffs.

The economic arguments for the periods under consideration, given by Ludwig Schubert, demonstrated that the Council should not have invoked a degradation of the economic and financial situation in order to modify or refuse the application of the method: there was no case of serious and sudden deterioration of the economic and social situation, whether during 2011 or 2012, merely a classic adjustment after the recession of 2009⁷.

However, the Court issued a negative ruling for the staff on 13 December 2018.

It would seem the Council has the right to not apply the method as it is stipulated in our Staff Regulations!!!

What will happen in future if the Member States feel that they will have the support of the Court of Justice when taking decisions that are not in accordance with the accepted rules?

⁵ Plaintiffs: Ludwig SCHUBERT, pensionner of the Commission, Pierre BLANCHARD, pensionner of the Commission, Serge CRUTZEN, pensionner of the Commission, Franco COZZANI, official of the Commission, Jean-Pierre PETILLON, temporary agent of the Commission, Domenico ROSATO, official of the Commission, Meryem SADANI, official of the Commission, represented by Mr Christoph Bernard-Glanz, Ms Nathalie Flandin et Mr Stéphane Rodrigues, lawyers at the bar of Brussels (Law firm Lallemand & Legros)

⁶ The Council cannot decide alone to apply Article 10: it has to justify such a decision on the strength of objective data provided by the Commission: It needs to be demonstrated that for the period under reference there was a *serious and sudden degradation of the economic and social situation in the EU*.

⁷ The elements presented by Ludwig Schubert are reproduced in their entirety in VOX 109.

Since 2014, however, Article 10, the exception clause, no longer appears in the Staff Regulations. It is replaced by a clause⁸ on moderation and exception which is based on objectively verifiable data. Additionally, the Council and the European Parliament no longer intervene directly in the decisional process on the annual adaptation of salaries and pensions, but are informed of the Commission's proposal, based on a report from EUROSTAT (discussed by the GTR). The Commission takes the final decision on the basis of the devolved authority it has been given.

The lawyer Christophe Bernard-Glanz considers that there are no grounds for an appeal.

VII. Recouping pension rights transferred to the Commission

The special case in Belgium for transfers of non-Community pension rights to the Commission, undertaken before 1 January 2002.

Article 77 of the Staff Regulations states. "An official who has completed at least 10 years' service shall be entitled to a retirement pension. He shall, however, be entitled to such pension irrespective of length of service if he is over 63 years, if it has not been possible to reinstate him during a period of non-active status or in the event of retirement in the interests of the service.

The maximum retirement pension shall be 70% of the final basic salary carried by the last grade in which the official was classified for at least one year."

In order to obtain this maximum, it is necessary to have worked for 35, 37 or 39 years (taking account of the Staff Regulations reforms of 2004 and 2014).

Article 11§2 of Annex VIII of the Staff Regulations states "An official who enters the service of the Communities after leaving the service of a government administration or of a national or international organisation; or pursuing an activity in an employed or self-employed capacity shall be entitled, after establishment but before becoming eligible for payment of a retirement pension within the meaning of Article 77 of the Staff Regulations, to have paid to the Communities the **capital value**, updated to the date of the actual transfer, of pension rights acquired by virtue of such service or activities. In general, this right is acquired after 10 years of service at an EU institution." The administrative practice of both the Member States and of the Union requires for this transfer to be made within the 6 months from the date on which it becomes possible.

Some officials have obtained these 70% without needing to transfer their pension rights, acquired through the Belgian retirement scheme for the years worked for an employer other than the EU in Belgium, to the Commission, but have nonetheless requested this transfer. This means the transfer was essentially baseless and that the Community budget has become its beneficiary.

⁸ Articles 10 to 12 of Annex XI to the Staff Regulations.

In principle, according to the jurisprudence of the European Union Court of Justice (EUCJ) the pension rights belong to its owner and their acquisition by a European Institution for the benefit of the Community budget **constitutes an undue enrichment**.

Consequently those pensioners who have needlessly transferred their national pension rights to the Community scheme have the right to recoup the capital value of these rights.

Article 11§2 of Annex VIII of the Staff Regulations provides that such a transfer takes the form of a capital value.

However Belgium, and this is where we encounter a serious problem, has decided to implement this legal right by the national law of 21 May 1991 which **subrogates the rights of the individual for the benefit of the European Commission**. This system allows for the liquidation of the Belgian pension of the beneficiary **by monthly payments to the Commission** as soon as the individual receives his/her first Community pension and until that right extinguishes. This amount is combined with the Community pension.

However, if the pensioner has obtained a full Community pension (70% of the last basic salary – pension rights acquired during his/her career within an EU Institution), the monthly payment of Belgium can no longer be integrated in the Community pension and it is the Community budget which benefits from these transfers and not the individual pensioner.

The Belgian authorities have justified this subrogation by the difficulties it encounters with the large number of Belgian officials working for the European Institutions and the long periods to regularise within a short space of time. In reality Belgium has refused to transfer the capital involved in these pension rights because of the huge amount it would need to pay, during a relatively short period of time, into the Community Pension Scheme.

It is however clear that, even if the EU has accepted this system, still applied for transfers requested before 1 January 2002, it violates the measures foreseen in Annex VIII of the Staff Regulations, which speak of the transfer of a capital value.

The Belgian law of 10 February 2003 – concerning the transfer of pension rights – put an end to this system and the law has conformed itself to the measures of Article 11 of Annex VIII, even though the Belgian authorities impose the option of repurchasing, though the text of the law itself allows the choice between repurchase and actualised equivalent. The latter is however imposed by the said Article 11 of Annex VIII of the Staff Regulations for the transfer undertaken by the EU.

Question: What do the pensioners, who wish to recoup the needlessly transferred rights to their pension prior to 1 January 2002 and in whose favour their Belgian pensions are being transferred to the Commission, do?

They invoke the jurisprudence of the Court of Justice:

Firstly, ask the Community pension services to reimburse the amounts paid in their name by Belgium for the benefit of the Commission from the date of the payment of the first EU pension.

At the same time, request the monthly sum paid by Belgium to the Commission to be paid to them at the same time as their Community pension.

By way of example, a pensioner retired since May 2018, having accomplished a full career of 38 years within the EU, received a document from PMO 4 which shows that since May 2018 and February 2019 (10 months) Belgium has transferred to the Commission an amount of €1 338.94 for the five years he worked for a Belgian company; in other words an average of €133.94 per month.

He has just sent a letter to the Commission services demanding the reimbursement of this amount and the payment of his complementary Belgian pension. According to an initial telephonic response obtained from the Commission, before the letter was sent, it insists on its position: the Belgian transfer was integrated into the Community pension which is blocked at 70%. It is clear such reasoning is incoherent.

However, it does not appear to be possible at the moment, without an appeal to the EU Court of Justice, to obtain the transfer of the capital value constituted by the Belgian pension rights for transfer requests predating 1 January 2002, as the Commission itself continues to apply the old system to these requests.

I am at your disposal for any assistance.

Hendrik Smets

Vice-President of SEPS/SFPE responsible for legal matters

Contact by email: hendriksmets@yahoo.fr

VIII. Combining a Community pension with a national pension – Reminder and some precisions

EU officials who have not transferred their entitlement to a national pension to the Community scheme and who receive a Community pension may apply for a pension for the years worked for a national employer up to the ceiling of the number of years required to obtain a pension for a full career.

Example: career in Belgium: 9 years — Complete career at the EU Institutions: 37 years.

The maximum Belgian pension in this case will be 8 years, as the maximum career taken into account in Belgium is 45 years.

The SEPS/SFPE won a case against the Federal Pension Service of Belgium following a ruling of the European Court of Justice in Case C-408/14 of 10 September 2015 (A. Wojciechowski v Belgium (ONP)).

This possibility also applies to individuals who have already submitted such a request, but have had it refused.

The article above appeared in the January-March 2019 Info-Senior pamphlet of DG HR D1.

About 10 pensioners replied to this article.

It appears however that some of these pensioners thought that the Wojciechowski case (C.408/10) of the European Union Court of Justice of 10 September 2015 allowed them as of now to transfer their pension rights, not so far transferred, to the Community scheme and thereby increase their Community pension.

I would like to clarify the issues:

The national pension rights cannot be transferred to the EU pension scheme before the official has worked for 10 years at one of the EU institutions and then only within the 6 months of having accomplished the 10 years.

The only thing which an EU pensioner can obtain is therefore a national pension for the years of worked in one of the Member States and the rights to which have not been transferred to the Community Scheme. All pensioners have the right to request this pension from the national authorities, even if they have reached the age of retirement. They can also, following the Wojciechowski ruling, resubmit their request for this national pension, even if such a request has been refused in the past.

I remain at the disposal of pensioners to assist them in their request to the national authorities.

Hendrik Smets

Vice-President of SEPS/SFPE – in charge of legal matters

Address: info@sfpe-seps.be or hendriksmets@yahoo.fr

IX. Invalidity benefits

Extract from the newsletter FP n° 4 – 2019 Lallemand & Legros

Laure Levi

This newsletter is devoted to invalidity benefits. Despite varying employment conditions, the international organisations are keen to offer their members of staff protection against the risks of accidents and professional illnesses as well as for unfitness for work (Articles 73 and 78 of the Staff Regulations for officials and agents of the EU).

These protection systems are very similar and are, of course, based predominantly on medical advice. The role of the administrative authority, the employer and if necessary the judge is marginal.

In fact, neither the administrative authority nor the judge are medical experts. Moreover the medical dimension is covered by medical confidentiality and is not immediately available. The medical records are however available to the official or the agent concerned and such access is often necessary to understand the advice of the college of medical practitioners.

Even if the administrative or judicial control is marginal, it is essential. This marginality is relative and depends on that which needs to be controlled (judicial concept, medical

appreciation, motivation, incoherence between the advice and the medical dossier, procedure followed ...)

Three jurisdictions – the EU Court of Justice, the Administrative Tribunal of NATO and the Administrative Tribunal of the ILO – despite a general shared tendency, can sometimes each adopt different approaches.

This is what emerges from the cases that are examined in this newsletter, available from the secretariat of SEPS/SFPE on request.

X. Important information

The majority of the information under this heading of the Bulletin is established on the basis of the experience of members of SEPS/SFPE who ensure the telephone assistance duties.

The requests for assistance justify the transcription into the Bulletin and the Vade-Mecum of several texts taken from My IntraComm, since a good number of members do not or no longer access My IntraComm.

This information has been adapted by SEPS/SFPE to the case of members of the association who prefer to receive a document in the post, rather than have to search for the information on the internet.

This information may also duplicate the information given in the Information Bulletin of DG HR D1 “Info SENIOR” as also information provided in earlier Bulletins of SEPS/SFPE. It is very important to insist on certain rules and to recall them: the services of PMO ask us to do this.

1. Legal aid

If you need legal advice for problems concerning your relations with the Commission services (application of the Staff Regulations) or in your private life (inheritance or fiscal problems) Hendrik SMETS, PhD in Law and licensed notary, Vice-President of SEPS responsible for legal matters is at your disposal to provide advice with all discretion and the probity of a former European official.

Hendrik SMETS is the legal adviser of SEPS/SFPE and he should be thanked for the work he is undertaking to manage questions and requests from members before possibly steering them towards a lawyer.

Hendrik SMET’s contribution sometimes involves several hours of research or takes the form of sustained exchanges which may lead to the courts (cf WOJCIECHOWSKI case, which now constitutes jurisprudence and has recently been cited in the Lokowicz case).

You can contact Hendrik SMETS by e-mail: hendriksmets@yahoo.fr or by telephone: +33.563.67.88.83 (France)

Hendrik will undertake an initial analysis of your question and will either propose a solution or an initial consultation with lawyer, which is free of charge for those who are paid-up members.

2. Medical expenses: excessiveness (message from PMO)

It is possible that you may one day find yourself confronted, for a reimbursement request, by the application of either “excessiveness” and/or the “reimbursement-level coefficient”. This situation will have a significant impact on the amount you will need to pay yourself. This is why we invite you to read these few lines of explanation very attentively.

What do the Regulations of the JSIS state?

“In application of Article 20 of the common regulations of the JSIS and in accordance with the General Implementation Provisions (GIP), where no reimbursement ceiling has been fixed, including for serious illness, the portion of the costs which significantly exceeds the average price practiced in the country where this treatment has been undertaken, may be excluded from reimbursement”.

This means it is important that you be aware of the average prices applied in the country where the treatment is being sought. In order to avoid unpleasant surprises, JSIS advises that adequate and appropriate research is made before admission to a hospital or before undertaking a costly medical intervention. It is here the request for an estimate takes on its true value.

The portion of the costs which is excessive is determined on a case by case basis by the Payment office on the basis of advice from the Medical Council. You may be asked for a detailed medical report.

Furthermore, if these costs (i.e. hospitalisation, costly medical intervention) are incurred in a country outside of the European Union which is identified as being a country “with expensive medical costs”, the reimbursement-level coefficient established for the country in question may be applied. This rule means that the amount that will be at your expense may be very high.

The United States, Norway and Switzerland are currently considered to be countries “with expensive medical costs”. The following reimbursement-level coefficients are applied for these countries since 1 July 2016:

USA	2.4966
Switzerland	1.8123
Norway	1.6797

By way of example, for a reimbursement request for a medical intervention in Switzerland and if it is a treatment without a fixed ceiling within the JSIS regulations, whose cost is the same or 25% higher than the average cost in the EU, the costs incurred will become subject to the reimbursement-level coefficient established for Switzerland. What happens is that the rates of reimbursement established by the JSIS regulations are applied to the sum of the medical costs incurred which have been rendered comparable to the average costs in the Member States of the EU. Concretely this means, the medical bill is divided by 1.8123 and the JSIS

reimbursement percentage applicable to the treatment in question (for example 85% or 100% in the case of serious illness) is applied to the result of this division.

In certain cases (pensioners living in one of these countries, emergency or if there is no comparable treatment possibility within the EU) there exists a safety clause which foresees that the amount reimbursed to an affiliate of JSIS cannot be less than 50% of the total cost incurred by him/her. It is nonetheless clear that a significant portion of the medical costs incurred may still have to be paid by the affiliate.

It needs to be pointed out that this rule applies even if these costs relate to an illness which is recognised as a “serious illness” by JSIS. In fact should these reimbursement-level coefficients not be applied to cases of serious illness, this can only happen if there is no equivalent option for the patient within the whole European Union to treat the illness in question (after consultation with the Medical Council). This means that a significant part of the costs remain to be covered by the affiliate, even in the case of serious illness.

We remind you that it is important to subscribe to a complementary insurance when travelling, even more so if you are travelling to one of these countries (travel insurance, assistance insurance...)

We also draw your attention to the fact that in certain countries there is a practice of surcharging when a letter of direct billing is granted (i.e. if JSIS pays the bills directly). This is the reason why, in case of hospitalisation in such a country, JSIS does not issue an authorisation of direct billing (except in exceptional cases). An advance is preferred.

Generally speaking, in order to avoid unpleasant surprises, it is recommended that an estimate of costs for such as hospitalisation (room and fees) be systematically requested, even when hospitalisation takes place in a Member State or in an authorised hospital.

For more information see <https://myintracomm.ec.europa.eu/retired> .

3. Travel assistance insurance

PMO insists: if you need to travel, subscribe to assistance insurance. This insurance will cover the costs that are not covered by JSIS (transport costs or repatriation to domicile) and such urgencies as would be difficult to cover within a limited period of time with PMO.

In certain cases repatriation can become very expensive; PMO 3 gives us examples of €100,000, €200,000 and more, which cannot be adequately reimbursed by JSIS.

4. Support documents in Belgium

More and more doctors are using an electronic application for their fees instead of a receipt for treatment given. The Reimbursement Offices have been instructed to accept this format of receipts with the signature of the doctor concerned.

5. The PMO informs us:

As you know, the tax certificates are established according to the language of the country of residence.

This year, due to a technical problem, the tax certificates concerning Belgium (D, FR, and NL versions), Luxembourg (D and FR versions) and Switzerland (D, FR, IT versions), were not sent at the same time. The first mailing was the German version. **You will receive the other language versions by post but not at the same time. However, in case it is needed more urgently, all the language versions are also available through Sysper Pensions.**

We thank you for your understanding and apologize for the inconvenience this may cause

6. Special reimbursement – Article 72§3 of the Staff Regulations

Your medical costs have already been reimbursed, but the cumulative costs that you have had to meet yourself (usually 15% or 20%) exceed half of your average basic monthly salary (or pension) over a 12-month period. Article 72(3) of the Staff Regulations provides for special reimbursement to cover this eventuality. The part of these costs, incurred by the affiliate over a period of 12 months, that is not reimbursed, can sometimes exceed the value of half a month's pension (more precisely: the average of basic monthly income for the same 12 month period).

In this case, JSIS reimburses up to 90% or 100% (depending on the family situation) those costs payable by the affiliate which exceed the average half of basic monthly income (in fact half of the monthly pension) over the selected 12 month period.

The calculation for this is quite complicated, so if, as an affiliate, you feel you are in this situation, PMO3/JSIS can be approached to obtain the information on the costs incurred and the total of those paid by the affiliate over a 12 month period of his/her choice (within a space of maximum 36 months).

The affiliate who, on the basis of this information, establishes that he/she has a right to reimbursement in accordance with Article 72§3 for the chosen 12 month period, needs to follow the given procedure (Request form).

The existence of a significant debt towards JSIS is a signal for the need to check on one's rights to reimbursement under Article 72§3.

7. Reimbursement at 100% of follow up treatment for serious illnesses no longer recognised as such by PMO3/JSIS

PMO3/JSIS confirms its agreement to reimburse at 100% those medical check-up consultations strictly limited to a serious illness which is no longer formally recognised after 5 or 10 years (refusal to extend the recognition of serious illness).

Given the absence of a legal basis until the next revision of the General Implementation Provisions, those affiliates concerned must obtain a declaration from their specialist consultant on the need for these examinations to prevent any recurrence of their illness and submit this to the Medical Council of JSIS for opinion and authorisation.

Once the authorisation for these examinations is given, it is necessary to introduce the requests for reimbursement of the said examinations under the heading of 100% reimbursement, quoting the authorisation of the Medical Council.

8. PMO Contact becomes STAFF Contact

From the 15th of May 2019, STAFF Contact will replace PMO Contact.

This tool will contain all the information for the retired people of the Institutions and will allow them to ask questions while offering greater level of security.

For your convenience, all the applications you need (online JSIS, SYSPER Pension, My IntraComm) are gathered in My Remote (Link: https://myremote.ec.europa.eu/dana-na/auth/url_default/welcome.cgi), a secure single space, to which access via a certified EU Login represents the best insurance for the protection of your personal data.

A printed document is being sent to all pensioners.

Please note that PMO services can be reached by telephone.

9. Definitive exoneration from the French CSG/CRDS

On 14 March 2019 the Court of Justice has issued a ruling which definitively ends the social deductions issue relative to France.

These deductions, which have been reallocated since 2016 to a solidarity fund, are themselves also linked to segments of social security and should be reimbursed to you.

To recap, since 1 January 2019 those persons who are not subject to the French social security system are definitively exonerated from the CSG/CRDS or related deductions, including therefore also officials of the European Union, whether active or retired.

However, the income from inheritance will be hit by a general solidarity levy of 7.5% to be paid to the budget of the State. This is therefore a tax without a direct or pertinent link with the segments of social security.

It will, of course, be necessary to introduce claims for the reimbursement of the deductions for 2017 and 2018.

Jacques BUEKENHOUD
Legal Adviser - Commission – DG HR
HR-BXL-LEGAL-ADVISER@ec.europa.eu

10. Information from Afiliatys for pensioners subscribed to the Hospi Safe complementary insurance to JSIS

Following the information provided in INFO SENIOR N° 21 of January 2019 numerous pensioners subscribed to the complementary insurance HOSPI SAFE (and HOSPI SAFE+) have contacted AFILIATYS to say that they are not receiving the periodic information addressed to its members.

After verification it appears that they are not registered as members of AFILIATYS.

To become a member and benefit from its information and advantages, you merely need to inscribe yourself via the website www.afiliatys.eu and click on the tab 'become a member' or alternatively come to our offices on Tuesday or Thursday between 10h00 and 15h00 and provide an e-mail address.

Membership (for life) is €5.

11. How to contact PMO services

➤ **Welcome area** (MERO Building – 41 avenue de Tervueren 1049 Bruxelles)
On presentation of your pensioner's laissez-passer at the building's reception, at the following hours: From Monday to Friday: from 09h00 to 13h00

➤ **PMO Contact online** (no need for EU Login)

<https://ec.europa.eu/pmo/contact/en>

Tel: +32 2 29 97777 + cf Vade-Mecum Part 3

➤ **Request assistance from SEPS/SFPE** (Ambassadors PMO 3) +32 475472470
Info@sfpe-seps.be

➤ With **EU Login** procedure : RCAM on line ; Sysper pensions ; My IntraComm ;

➤ **Contact with PMO 4 (pensions) REMINDER**

In view of continuing to improve the services it offers, the Pensions Unit of PMO (PMO 4) has created two functional e-mail boxes (which replace the personal e-mails of the administrators identified in the pensions slips):

PMO-PENSIONS@ec.europa.eu for old-age and invalidity pensions

PMO-SURVIVAL@ec.europa.eu for beneficiaries of a survivor's/orphan's pension

A single new telephone number (+32 (0)2-297 88 00) is available during weekdays, Monday to Friday from 09h30 to 12h30.

Postal address: PMO (3 or 4) MERO B-1049 Bruxelles

12. New form for dental care – Reminder

PMO has prepared a single new form for estimates and **dental** fees.

This form (in several languages) is available on My IntraComm and at the secretariat of SEPS/SFPE on request (as well as all the other RCAM forms).

XI. Annexes

Annex 1

THE ADMINISTRATOR OF HOSPI SAFE, A COMPLEMENTARY HEALTH INSURANCE TO JSIS OFFERED BY AFILIATYS, WILL CHANGE ON 1 JANUARY 2020

The management contract for the complementary health insurances to JSIS, offered by AFILIATYS, namely HOSPI SAFE and HOSPI SAFE+, concluded with CIGNA in January 2010, will end on 31 December 2019.

AFILIATYS launched a tender, in accordance with the rules and regulations, to identify the best management proposal possible, in financial and service terms, for these insurance policies.

Following a rigorous comparison of all the offers received, ALIANZ CARE has been selected. This company will therefore assume the management of HOSPI SAFE and HOSPI SAFE+ from 1 January 2020 onwards.

ALLIANZ CARE will take over the entirety of current insurance contracts with their beneficiaries, under the same terms and conditions as are currently in force, including possible existing exceptions.

As from 1 January 2020, the management of all the insurance files of affiliates to HOSPI SAFE and HOSPI SAFE+ will automatically be taken over by ALIANZ CARE, without the need for any formality on the part of the beneficiaries, except for those who would prefer to cancel their insurance policies rather than have them managed by ALLIANZ CARE; they will need to notify their decision formally.

As from 1 January 2020:

- The complementary health insurance policies to JSIS offered by AFILIATYS will remain unchanged, except for one additional option:
 - HOSPI SAFE: no change, complementary cover to JSIS to cover hospitalisation following illness or an accident
 - HOSPI SAFE ILLNESS: new option covering hospitalisation as a result of illness only
 - HOSPI SAFE+: no change
- The insurance premiums agreed for 10 years for these three options (Cf table hereunder) will remain unchanged after 61 years of age (instead of the current 67 years), apart from the annual indexation based on the EUROSTAT index or in the case of a technical (negotiated) amendment after 5 years.
- A medical questionnaire will no longer be required for new affiliates to any of the policies available (as is currently the case), except during the 6 months preceding retirement.
- Subscription to these policies can be undertaken until the date of retirement (and no longer, as is currently the case, no later than 6 months before retirement).
- The reimbursement procedures remain identical to those currently in force with strict parallelism between the rules of JSIS and the contractual rules of the complementary insurance. The complementary reimbursement that ALLIANZ CARE will make is based strictly on the reimbursement statement issued by JSIS.
- ALLIANZ CARE will set up a “single counter” which will provide a personalised processing of files, centralise the requests for reimbursement and any pertinent questions, whether these are submitted by letter or by email. ALLIANZ CARE will also answer any oral questions from affiliates, every working day at its offices located at 2 rue du Samedi, near the Place Sainte Catherine in Brussels and also periodically at the AFILIATYS offices in Luxembourg.
- ALLIANZ CARE will set up this information, management and operational system by calling on insurance brokers, duly specialised in these areas, to whom affiliates, as also those who would like to become affiliates of any of the HOSPI SAFE options, can address themselves directly.

The present manager, CIGNA, will remain in charge until 31 December 2019, when the ALLIANZ CARE contract will take effect, which means:

- The reimbursement requests for costs incurred until that date will be addressed to CIGNA
- The insurance premiums which become due during 2019 will continue to be paid to CIGNA

AFILIATYS, in permanent contact with ALLIANZ CARE and CIGNA will keep affiliates informed of the progress of this transition.

Taking into account the General Regulation on the Protection of Data (GRPD) n° 2015/679 which came into effect on 25 May 2018, for the good processing of your requests for complementary reimbursement, it will be your responsibility to provide ALLIANZ CARE with your personal data.

Annual premiums on 01.01.2020

HOSPI SAFE (Hospitalization illness/accident)

Age	0-2	3-18	19-35	36-50	51-60	61+
Premium (€)	0,00	72,33	86,78	130,15	173,56	242,99

HOSPI SAFE ILLNESS (Hospitalization due to illness only)

Age	0-2	3-18	19-35	36-50	51-60	61+
Premium (€)	0,00	52,51	64,21	96,15	128,32	178,41

HOSPI SAFE PLUS (Hospitalization and out-patient treatments)

Age	0-1	2-18	19-35	36-50	51-60	61+
Premium (€)	0,00	525,07	642,07	961,51	1283,20	1784,13

In memoriam

<i>Name</i>	<i>Birth</i>	<i>Death</i>	<i>Instit</i>	<i>Name</i>	<i>Birth</i>	<i>Death</i>	<i>Insti</i>
CASTELLI Fiorella	15-05-35	11-12-18	COM	BEALE John	03-05-43	01-02-19	COM
PATTYN Emile	14-07-24	13-12-18	COM	MOTEL Gerard	30-06-49	02-02-19	PE
SCHUETZ Guenther	20-12-28	14-12-18	COM	WELISCH Kurt	01-07-23	03-02-19	COM
VAN HEDENT Daniel	05-01-49	19-12-18	COM	D'ORAZIO Ernesto	21-05-40	05-02-19	PE
MONDAINI Vincenzo	28-08-37	21-12-18	COM	BAILLIE Laurie-Charles	14-01-28	06-02-19	COM
SCARSINI Argia	23-05-45	21-12-18	PE	GIANSANTI Angela	23-03-44	07-02-19	PE
STEFFGEN Edith	11-01-31	22-12-18	COM	POOL William	14-06-29	08-02-19	COM
MEIGNAN Germaine	11-10-12	23-12-18	COM	MATERS Johannes	10-09-38	08-02-19	COM
MAKRIS Georgios	02-04-41	24-12-18	COM	MAGLIO Giovanni	04-08-35	08-02-19	CM
TAPP Charles	15-06-25	26-12-18	COM	FLORENS Jean-Marie	29-11-33	09-02-19	CM
TERPSTRA Japik	28-08-32	27-12-18	COM	CHARLES Jean-Jacques	08-03-53	09-02-19	COM
VANOLST Josette	30-10-46	27-12-18	COM	HERZBERGER Peter	20-11-32	11-02-19	COM
KREMER Pierre	13-08-53	28-12-18	PE	MALAMATOU Maria	02-07-61	12-02-19	CM
BARRET André	21-10-32	28-12-18	COM	SANTOMAURO Giuseppe	01-08-49	13-02-19	PE
SCHUBERT Ludwig	01-05-35	28-12-18	COM	RODEN Hans	30-11-48	14-02-19	COM
VAN WESTEN Pieter	17-05-28	29-12-18	COM	RODEN Hans	30-11-48	14-02-19	COM
BILLERBECK Klaus	05-07-27	31-12-18	COM	MELO ANTUNES F.	22-03-43	14-02-19	CM
DE HEUG Nicole	16-07-26	01-01-19	COM	ROUVALIS Georges	17-10-49	15-02-19	COM
BEGHI Giorgio	01-08-27	01-01-19	COM	HOUNGBEDJI Dany	01-12-64	16-02-19	PE
DE GRUITER Cornelis	19-05-37	01-01-19	COM	TASCHNER Hans	16-05-31	17-02-19	COM
CHIOCCIOLI Enzo	19-05-31	02-01-19	CM	STAS Sylvia	04-02-43	17-02-19	COM
ROSSBACH-GEVENOIS M	09-08-36	02-01-19	COM	DE COOMAN Alain	05-03-67	17-02-19	PE
VANTUYCKOM François	08-03-48	02-01-19	COM	CULOT Jean-Luc	06-01-49	18-02-19	COM
OVEJAS Nadia	20-12-45	03-01-19	COM	FLORANCE André	29-04-20	21-02-19	COM
ALLEN John	21-06-52	04-01-19	COM	STERN Helmut	04-04-31	11-12-18	COM
BONNEAU Teresa	18-04-47	04-01-19	CJ	VAN KAMPEN Cornelis	25-08-46	23-01-19	COM
DE VOS Noel	22-12-44	04-01-19	COM	HUSSY Ingrid	23-02-48	24-01-19	PE
DIANA Emilio	21-05-31	06-01-19	COM	RUSSELL Alan	22-10-32	06-02-19	COM
PASETTI BOMBARDELLA F	25-12-24	06-01-19	PE	BUNEL Gaston	21-10-21	11-02-19	COM
LOSCH Antoinette	20-12-42	06-01-19	CJ	SABY Monique	22-02-51	13-02-19	COM
ARNOLL David	06-06-50	06-01-19	PE	SALMURRI TRINXET Joan	09-11-42	22-02-19	COM
WIJNAND George Jurriaan	05-07-25	07-01-19	COM	GENET François	31-03-31	23-02-19	COM
MASON Vincenzo	19-05-36	08-01-19	COM	DUFOUR Claude	14-06-29	23-02-19	COM
COURADES Gilbert	19-09-31	10-01-19	COM	VAN BELLE Marie-Jeanne	04-08-51	23-02-19	CM
REIF Gerlinda	10-09-42	11-01-19	PE	VON ENGELBRECHTEN L	18-08-37	24-02-19	COM
GIEGERICH Kurt	11-10-31	12-01-19	COM	DOLLFUS Monique	18-05-45	24-02-19	CM
BRAUNE Margarethe	27-10-36	12-01-19	COM	GRUSSENDORF Ott-Heinric	03-03-30	25-02-19	PE

KINNART François	12-06-51	14-01-19	COM	PORRINI Sandro	08-03-26	25-02-19	COM
PLEURDEAU Claude	17-05-33	16-01-19	COM	FORNI Valério	12-01-46	25-02-19	COM
NAINE Cyrill	25-11-30	16-01-19	COM	RICHONNIER Michel	02-04-43	25-02-19	COM
AUBINEAU Jean-Pierre	16-02-37	17-01-19	COM	ROBERTS Martin	20-06-44	26-02-19	CM
GIERDEN Mathilde	29-05-34	18-01-19	COM	EHRNSPERGER Karin	14-12-41	27-02-19	COM
RODRIGUES Antonio	11-08-39	18-01-19	COM	MACHEPY Roland	25-11-33	27-02-19	PE
GLUCKSTEIN Naomi	05-11-45	18-01-19	SAS	CAZZOLA Imerio	12-10-22	28-02-19	COM
CARISSIMO Lidia Adele	02-01-33	18-01-19	CES	STEEMAN Jozef	25-07-31	28-02-19	COM
SPRINGMANN Ewald	21-07-45	18-01-19	COM	KOHLHASE Norbert	24-09-27	01-03-19	COM
ENQVIST Mauritz	28-04-45	19-01-19	CM	CUERVO HERRAEZ M-C	18-09-37	01-03-19	COM
TYLER Patricia	09-08-52	20-01-19	MED	DEWOST Jean-Louis	06-09-37	02-03-19	COM
LOHAN Helmuth	10-11-47	24-01-19	COM	ROYEN MICHEL Françoise	30-05-45	02-03-19	COM
BAUDET André	10-09-21	25-01-19	COM	PELANDA Paola	08-10-62	03-03-19	PE
BASTREGHI Franco	06-03-22	26-01-19	CM	SCHROEDER Anne-Marie	18-06-37	06-03-19	COM
MILDON Russel	22-08-49	28-01-19	COM	SMIT HOUZE Ginette	15-02-51	06-03-19	COM
FISCHER-ZARNO Margret	29-01-29	14-09-18	COM	MUNTINGA Gerlof	24-08-27	08-03-19	COM
LUTHER Melanie	26-01-40	02-12-18	COM	REZETTE Marie-France	11-11-50	08-03-19	COM
HIROUX André	30-08-29	15-12-18	COM	KRIPLER Pierre	13-11-18	09-03-19	CJ
FANGMEYER Hermann	11-03-32	30-12-18	COM	MITCHELL Peter	09-12-47	10-03-19	CC
LISITANO Giuseppe	14-10-27	13-01-19	COM	VANDER HEYDEN Frans	01-03-38	11-03-19	COM
MATHYI Stanley	30-11-34	16-01-19	COM	BOTTIGLIONI Franco	11-10-35	13-03-19	COM
FRAILLON Claude	03-04-38	19-01-19	CC	DOSIO-BRESCHI IRMA L	02-10-24	15-03-19	COM
RUGE Annette	24-04-51	22-01-19	SAS	PIRLOT Franz	31-03-29	16-03-19	COM
BANET Roger	17-03-26	23-01-19	COM	EDER Christoph	29-03-29	17-03-19	COM
CARDELUS Kerstin	05-06-44	24-01-19	CM	SIMEONE Pierre	27-05-35	17-03-19	COM
HENRIQUES Fatima	25-05-66	25-01-19	COM	PETITBON Jean-François	29-12-28	18-03-19	COM
BERAUD René-Christian	29-06-25	27-01-19	COM	MOORE-RANSY Georgette	04-05-20	19-03-19	COM
DWYER Christopher	01-12-28	29-01-19	COM	BAAN Marinus	26-07-53	20-03-19	COM
CULIN Annibale	23-02-29	30-01-19	COM	ZAMPERINI Clara	12-03-29	21-03-19	COM
CARBERY John	24-01-39	30-01-19	CM	DISIVISCOUR-MAISCH M	01-06-41	22-03-19	COM
FERNANDEZ ROMERO E.	17-03-47	30-01-19	CM	DE LA FONTAINE Isabelle	31-10-53	23-03-19	COM
PIMENTA Antonio	02-08-57	31-01-19	PE	HETTINGER Karl-Heinz	10-02-30	25-03-19	COM
JENSEN Rita	25-02-23	01-02-19	COM	CHALOT Guy	29-07-35	26-03-19	COM

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I should like to receive the English edition of the following documents
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Part 3 (addresses PMO – ADMIN. ...) Ed. December 2018 /

Part 4 (reimbursement forms – RCAM/JSIS) (January 2018) /

Supplementary health insurances Edition May 2017 /

Invlidity allowance and survival pension (Hendrik Smets) /

Orphan survivor’s pensions (Hendrik Smets) /

EU Officials and taxation (Me. J Buekenhoudt) /

Inheritance (Me. J Buekenhoudt) (May 2018) /

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

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

Surname.....

First name

Address :
.....
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Email address:

Date : Signature :

To be sent to

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

GSM: +32 (0)475 472470

Email:

info@sfpe-seps.be

APPLICATION FORM

I, THE UNDERSIGNED (1)

Maiden name for married women (1).....

PERSONNEL / PENSION N°:DATE OF BIRTH (dd/mm/yy):

NATIONALITY: Language desired for documents (2): FR/EN

HOME ADDRESS (1).....

.....

HOME Tel:

GSM*:

E-mail:

FORMER STAFF MEMBER OF (Institution + DG or Dept.):

If still active: number of years' service:

HEREBY DECLARE MEMBERSHIP OF THE "ASSOCIATION OF SENIORS OF THE EUROPEAN PUBLIC SERVICE " (SEPS), by sending this completed form to SEPS and paying the membership fee..

HEREBY DECLARE THAT I AGREE TO SEPS REGISTERING AND STORING MY ABOVE PERSONAL DATA and to it being kept for the length of my membership.

The Association undertakes to protect your data and will prevent it being distributed, apart from when obliged by law or in response to a request to do so by you, within the limits of the social purpose of the Association.

DONE AT:

DATE: SIGNATURE:

The annual subscription of **€30** is payable on 1 January. New members joining after 30 June will not be required to pay their second subscription until the second January following their enrolment.

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Please return this application form to:

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Or info@sfpe-seps.be

(1) Capital letters please (2) Please cross out where appropriate (*) optional

*If you choose to pay by standing order, please send a request
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