

Your social security rights

in Norway

Employment, Social Affairs and Inclusion



The information provided in this guide has been drafted and updated in close collaboration with the national correspondents of the Mutual Information System on Social Protection (MISSOC). More information on the MISSOC network is available at: http://ec.europa.eu/social/main.jsp?langId=en&catId=815

This guide provides a general description of the social security arrangements in the respective countries. Further information can be obtained through other MISSOC publications, all available at the abovementioned link. You may also contact the competent authorities and institutions listed in annex to this guide.

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European Commission

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Chapter I: Introduction, organisation and financing

Introduction

The main general social insurance schemes in Norway are the National Insurance Scheme, the Family Allowance Scheme and the Scheme providing a cash benefit for families with small children.

Who is covered by social security in Norway?

In general, anyone who either resides or is employed in Norway or on permanent or movable installation on the Norwegian continental shelf is compulsorily insured under the National Insurance Scheme. Certain categories of Norwegian citizens working abroad (public service, etc.) are also compulsorily insured.

Sailors who are citizens of the European Economic Area (EEA) and who are working aboard ships flagged in Norway are insured under the National Insurance Scheme for all contingencies regardless of place of residence.

Uninsured people who reside in Norway, or who do not reside in Norway but fulfil certain conditions with regard to previous periods of insurance, etc., may apply for voluntary insurance.

The Basic Amount

Many benefits from the National Insurance Scheme are determined in relation to a basic amount. This amount is adjusted annually by royal decree with effect from 1 May, to take account of changes in the general income level. The basic amount stood at NOK 85,245 (\in 10,763) on 1 May 2013.

Organisation of social protection

The delivery of benefits of all branches (family allowances and cash benefit for parents with small children included), with the exception of healthcare, is administered by the Labour and Welfare Administration (*Arbeids- og velferdsetaten*), a State run public administration, headed by the Labour and Welfare Directorate (*Arbeids- og velferdsdirektoratet*). The Labour and Welfare Administration also handles the area of child support payments.

At regional level, there are 19 NAV County Offices (*NAV fylkeskontorer*) including Workplace Centres (*NAV Arbeidslivssentre*) set up to help reduce sick leave absence and promote the working life inclusion of older workers and the disabled. At a local level, the NAV Office (*NAV-kontoret*) (457 units), a front-line service, provides the whole range of integrated social security services and also social financial assistance. The NAV National Office for Social Insurance Abroad (*NAV Internasjonalt*) handles individual cases concerning insured persons and beneficiaries abroad, except individual cases concerning old-age pensions and survivor's pensions which are handled by NAV Pensions Oslo (*NAV Pensjon Oslo*).



Reimbursement of costs related to healthcare is administered by the Directorate of Health (*Helsedirektoratet*) under the Ministry of Health and Care Services. The Health Economics Administration (*Helseøkonomiforvaltningen (HELFO)*) handles the individual cases related to healthcare. HELFO is organised with a main office and six regional offices, and its Oslo office includes a department (*HELFO Utland*) that handles cases originating from abroad.

The Ministry of Labour (Arbeidsdepartementet) is responsible for the overall functioning of the Labour and Welfare Administration and for most of the branches of security, the Ministry of Health and Care Services social (Helse- og omsorgsdepartementet) is responsible for health services, and the Ministry of Children, Equality and Social Inclusion (Barne-, likestillingsoq inkluderingsdepartementet) is responsible for family allowances, cash benefits for care of small children, cash maternity benefits and the area of child support payments (except payment recovery).

The provision of healthcare outside of hospitals is mostly a municipal responsibility, whereas hospital treatment generally is the responsibility of the State through four Regional Health Enterprises. Both are for the most part financed by taxes.

Social assistance does not fall within the scope of National Insurance. Centrally, it comes within the responsibility of the Ministry of Labour, but its financial burden falls on the municipalities. The provision of subsistence allowance *(stønad til livsopphold)* is an integrated part of the whole range of services provided by the NAV Offices.

Financing

The National Insurance Scheme is partly financed by social security contributions, both from employers and the insured, and partly by taxes.

Contributions from employees and self-employed persons are calculated on the basis of gross income from employment.

The contribution rate for employees is 7.8% of pensionable income (gross wage income). The contribution rate for the self-employed is 11.0% of pensionable income (from self-employment). The contribution rate for other kinds of personal income (pensions, etc.) is 4.7%.

The employer's contributions are assessed as a percentage of wages paid. As a general rule, the employers' contribution rate is 14.1%. However, lower rates apply if the enterprises are established in certain parts of the country or are within certain branches.

Social assistance is financed through tax.



Chapter II: Healthcare

When are you entitled to healthcare?

All residents are entitled to healthcare. Entitlement is not subject to a qualifying period.

What is covered?

Hospital care

There are no cost-sharing charges for patients admitted to the hospital. This also applies to medicines.

For outpatients' departments at hospitals, the normal cost-sharing charges apply, see below ("Other medical care").

For treatment in a private clinic which does not have an arrangement with the public health system, the full cost falls on the patient him- or herself.

Other medical care

Doctor's consultation

For a standard GP consultation, NOK 140 (\in 18) is paid by the patient, and for a specialist consultation NOK 315 (\in 40).

Pharmaceuticals

For less important medicines, the patient pays the full cost, even when they are prescribed by a doctor. A 90% refund of annual costs exceeding NOK 1,667 (\in 210) is possible under certain conditions.

For prescribed medicines on the important medicines list, the patient pays 38% of the cost up to a ceiling of NOK 520 (\in 66) for each 3-month period of usage.

Dental care

Children up to 20 years of age are entitled to public basic dental care which is free of charge up to 18 and with a limited charge for the remaining 2 years. Orthodontic treatment can be paid for fully or partially according to the gravity of the condition. For adults, the dental care coverage is very limited.

Cost-sharing ceilings and exemptions

Parliament sets a ceiling for cost-sharing by patients every year (NOK 2,040 (€ 258) in 2013). This personal contribution applies to all money spent on treatment by physicians and psychologists, important or expensive drugs and transportation expenses related to examination and treatment. Once the ceiling has been reached, the patient is issued a card entitling them to free treatment and benefits for the rest of the calendar year.



A second cost-sharing ceiling applies to physiotherapy, dental treatment that is eligible for reimbursement, fees for accommodation at rehabilitation centres, and treatment abroad. This ceiling is also set every year by Parliament (NOK 2,620 (€ 331) in 2013).

Children under 16 are exempt from charges altogether. Special exemptions from costsharing charges apply to a limited number of diseases and groups of patients. No charges are due in the case of occupational injury or disease.

How is healthcare accessed?

All residents are individually linked to a regular primary doctor of their own choice, where possible. One can change this regular primary doctor up to twice per year.

Access to specialist care is subject to referral by the regular primary doctor. If you consult a specialist directly, you must pay higher cost-sharing charges, and the specialist may get a lower refund.

The patient pays cost-sharing charges directly to the doctor. For private practitioners, the part covered by National Insurance is paid through the direct settlement arrangement.



Chapter III: Sickness cash benefits

When are you entitled to sickness cash benefits?

The active population (employees and self-employed) are compulsorily insured for sickness cash benefits.

An insured person who has an annual income of at least half of the basic amount (NOK 42,623 (\in 5,382)) is entitled to sickness cash benefits if he or she is incapable of working due to sickness (the income limit does not apply for the period during which benefits are paid by the employer). As a general rule the occupational activity must have lasted for at least 4 weeks.

For rehabilitation benefits, see part on invalidity.

What is covered?

If you are employed, the daily cash benefit is calculated on the basis of your income before you fell ill. If you are self-employed, the daily cash benefit is calculated on the basis of income from self-employment.

Cash benefits for employees amount to 100% of the pensionable income, and are paid from the first day of sickness for a period of 260 days (52 weeks). Any income exceeding six times the basic amount (NOK 511,470 (\in 64,580)) is not taken into account.

Cash benefits in the case of sickness are paid by the employer for the first 16 days, and by the National Insurance Scheme thereafter. During the period where daily cash benefits are paid by the employer, no minimum income level is required.

Self-employed persons get sickness benefits corresponding to 65% of the pensionable income from the 17th day of sickness for a period of 248 days. By voluntarily paying a higher rate of contributions, self-employed persons may receive sickness benefits corresponding to either 65% of the pensionable income from the first day of sickness, or 100% from the 17th day, or 100% from the first day of sickness.

How are sickness cash benefits accessed?

Application is made directly to the employer who is responsible for paying the sickness cash benefit *(sykepenger)* for up to 16 days. Where the employer continues to pay the salary beyond this period, the sickness cash benefit is paid to the employer.

Any incapacity for work must be certified by a doctor. Employees have a right to give their employer notice of incapacity due to sickness for up to three calendar days at a time.



Chapter IV: Maternity and paternity benefits

When are you entitled to maternity or paternity benefits?

Benefits in kind

All residents are entitled to free maternity services and hospital care (there is an exemption of cost-sharing charges where they otherwise exist: see part on healthcare). Entitlement is not subject to a qualifying period.

Parental benefit

When a child is about to be born, insured parents who have been in paid employment for six out of the ten months preceding the commencement of the period of paid leave are entitled to daily cash benefits.

Cash pregnancy benefit

Female employees and self-employed women who are legally required to cease working before giving birth because of hazardous working conditions or a dangerous environment, are entitled to paid leave from the time they have to stop working, without reducing the entitlement to paid leave after confinement.

Maternity grant

Resident non-active mothers are entitled to a Maternity grant.

Adoption benefits

Benefits similar to Parental benefit and Maternity grant are payable to parents who adopt a child.

What is covered?

Parental benefit

Parental benefit is equal to sickness cash benefits (100% of covered earnings) and is paid for 49 weeks. If the parents so desire, they may opt for a longer period of paid leave of 59 weeks, but at a lower rate of benefit (80% of covered earnings).

Three weeks of the benefit period must be used by the mother before the birth. Benefits are payable from 12 weeks before birth.

The mother must take at least six weeks leave immediately after giving birth. 14 weeks of the total daily cash benefit period are reserved for the father (the father's quota). The condition that there must have been a preceding work period must also be



fulfilled by the father. 14 weeks of the benefit period are reserved for the mother (the mother's quota). The first six weeks after the delivery are included in the mother's quota. A period of 18 or 28 weeks, depending on the compensation rate, is to be divided upon the parents' request. If the father wants to make use of these weeks, the mother must take up work or education after the birth of the child, or the mother must be unable to care for the child for health reasons.

Insured fathers are also entitled to daily cash benefits when a child is born based on their own earnings, regardless of whether the mother qualifies, provided that she takes up work or education after birth and the father takes over the daily care of the child, or the mother is unable to care for the child for health reasons. In such cases, the period of paid leave is 40 or 50 weeks respectively. If the mother receives disability benefits, the father may receive 14 weeks of daily cash benefits regardless of the mother's health, work or educational status.

In the case of multiple births, the parents are entitled to full daily cash benefits for five additional weeks (or seven weeks at a reduced rate) for each additional child.

Cash pregnancy benefit

The amount of Cash Pregnancy Benefit (*svangerskapspenger*) is equal to that of sickness cash benefit.

Maternity grant

The Maternity grant is paid as a lump sum of NOK 35,263 (€ 4,452).

Should the Parental Benefit for the full period be lower than the Maternity Grant, the Parental Benefit will be topped up with the difference.

Adoption

Parents who adopt a child under the age of 15 are entitled to daily cash benefits for 46 weeks. These will be worth the same amount and be granted under the same conditions as the sickness cash benefit. The period may be extended to 56 weeks at a reduced rate (80% of covered earnings).

An adoption grant is payable at the same rate as a Maternity grant.

Special part-time scheme

Parents who give birth or adopt children are able to draw partial parental/adoption benefits combined with reduced work hours.

How are maternity and paternity benefits accessed?

Claims for benefits should be submitted to the NAV Office in your place of residence, stay or work.

For benefits in kind, see part on healthcare.



Chapter V: Invalidity benefits

When are you entitled to invalidity benefits?

Invalidity pension

The invalidity pension consists of a basic pension and a supplementary pension (as the old-age pension (old rules)), and/or a special supplement *(Særtillegg)* that is granted if you are insured, but have either no or a very low supplementary pension.

A person between 18 and 67, whose income capacity is permanently reduced by at least 50% due to illness, injury or disability, is entitled to an invalidity pension if he or she has been insured for at least three years immediately prior to the disability.

The three-year qualifying period does not apply under specific circumstances, e.g. an insured disabled person may obtain the right to a pension a year after s/he last became insured, provided s/he has not been out of the scheme for more than a total of five years after the age of 16.

As an additional condition for the supplementary pension, a person must have been credited pension points for three years.

Work Assessment Allowance

Work Assessment Allowance (*Arbeidsavklaringspenger*) (replacing rehabilitation allowance, benefits during vocational rehabilitation and temporary disability benefit) is granted to insured persons whose working capacity is reduced by at least 50% due to illness, injury or defect.

An insured person between the age of 18 and 67 is entitled to Work Assessment Allowance if he or she is resident in Norway and has been insured for three years immediately prior to claiming the benefit. An insurance period of one year is sufficient if the claimant has been physically and mentally capable of performing normal work during that year.

The Work Assessment Allowance is designed to compensate one's income during the rehabilitation period after the period of entitlement to sickness cash benefits has expired. The benefit is granted if the insured person is undergoing active treatment or vocational measures, or if he or she has tried such measures, is still considered to have a chance of becoming employed and is being followed up by the NAV Office. It is also granted, for example, during waiting periods before treatment/rehabilitation measures commence, and after completed treatment/rehabilitation before suitable work is found.

Provided that the benefit is necessary to enable the person to return to work, it may be granted for a period of up to four years. Extension is possible under specific circumstances.

Supplementary allowances may be granted in order to compensate fully or partially for expenses incurred in relation to vocational measures.



Basic benefit

Basic benefit (*Grunnstønad*) is aimed at covering extra expenses due to permanent illness, injury or deformity.

Attendance benefit

Attendance *benefit (Hjelpestønad)* is aimed at covering the need for special attention or nursing by an informal caregiver.

What is covered?

Invalidity pension

Future insurance periods and future pension points until the year in which the person reaches 66 years of age are taken into account. Limitations apply in the case of previous periods abroad. Future pension points are calculated on the basis of income before the disability occurred. Otherwise, the basic and supplementary pensions are calculated in the same way as old-age pensions under the old rules. For an unmarried pensioner, or a pensioner whose spouse is not a National Insurance pensioner, the special supplement equals the basic amount.

Special, more favourable rules apply to the calculation of supplementary pension for persons born disabled or who become disabled before the age of 26. These benefits are non-contributory benefits financed by state grants.

In the case of partial disability, the pension is reduced proportionally.

A supplement of up to 50% of the pensioner's basic pension is, on certain conditions, granted for a dependent spouse. A supplement of up to 40% of the basic amount can be granted under certain conditions for each dependent child under the age of 18.

Work Assessment Allowance

The allowance is paid at a minimum rate of twice the basic amount, or at a rate of 66% of the income from work, up to six times the basic amount of the previous year. When the result is more favourable, an average of the three previous years' income is taken instead. In addition, a child supplement of NOK 27 (\in 3.40) is granted for each dependent child under the age of 18. The supplement is paid five days a week.

Basic benefit

Basic benefit is paid at six different rates according to the level of extra expenses, ranging from NOK 7,716 (\in 974) to NOK 38,580 (\in 4,871) per year.



Attendance benefit

The standard rate for attendance benefit is NOK 13,836 (\in 1,747). For disabled children under 18, the benefit can be paid at three different higher rates, up to NOK 83,016 (\in 10,482).

How are invalidity benefits accessed?

Claims for benefits should be submitted to the NAV Office in your place of residence, stay or work.



Chapter VI: Old-age pensions and benefits

When are you entitled to old-age benefits?

The rules on old-age pensions have been revised. Flexible drawing of old-age pensions from the age of 62 years (specific requirements concerning the level of pension savings) and life expectancy adjustments have been introduced for all new old-age pensioners as of 1 January 2011, irrespective of the old or new rules. The pension may be drawn fully or partially (20%, 40%, 50%, 60% or 80%) and work and pensions may be combined without deductions being made in the pension.

The old-age pension consists of a residence-based basic pension, an earnings-related supplementary pension, and a minimum pension (old rules for persons born before 1954), and an earnings-related pension and a guarantee pension (new rules for persons born in 1963 and later). Persons born between 1954 and 1962 will receive a pension calculated proportionally according to the old and new rules.

Basic pension

People who have been insured for a total period of three years between the age of 16 and the year of their 66th birthday are entitled to a basic pension.

The basic pension (*Grunnpensjon*) is granted regardless of the amount of previous income or contributions paid. However, to receive it at the full rate, you must have been insured for 40 years (i.e. resident). For shorter periods, the pension is reduced proportionally.

Supplementary pension

For a supplementary pension (*Tilleggspensjon*), pension points must be credited for three calendar years, and full supplementary pension requires pension points to be credited for 40 calendar years. If the number of pension-earning years is fewer than 40, the pension is reduced proportionally.

Pension points are credited from the year the insured person reaches 17 to the year s/he reaches 75. No pension points are credited for the occupationally active with an annual income below the Basic Amount of NOK 85,245 (\in 10,763).

Minimum pension

If you are insured, but have either no or a very low supplementary pension, you are entitled to a minimum pension *(Minste pensjonsnivå)* from the National Insurance Scheme. A full minimum pension is payable if the insurance period is at least 40 years. The minimum pension is reduced proportionally if the period is shorter.



Earnings-related pension

The earnings-related pension *(Inntektspensjon)* is based on accrued pension savings reflecting lifetime earnings.

Guarantee pension

People who have been insured for a total period of three years between the age of 16 and the year of their 66th birthday are entitled to a guarantee pension. A pensioner who has 40 years of insurance is entitled to a full guarantee pension. The guaranteed pension is reduced proportionally in the case of a shorter period.

What is covered?

Basic pension

For an unmarried pensioner, or a pensioner whose spouse is not a National Insurance pensioner, the full basic pension equals the basic amount for that year (NOK 85,245 (\in 10,763) on 1 May 2013).

A supplement of up to 25% of the minimum pension is, on certain conditions, granted for a dependent spouse. A supplement of up to 20% of the minimum pension can be granted under certain conditions for each dependent child under the age of 18.

If both spouses are pensioners, the full basic pension is 85% of the basic amount for each of them. The same applies to cohabitants who were previously married to each other or have children together.

Supplementary pension

The supplementary pension is calculated using the 20 years with the highest pension points. The amount depends on the number of pension-earning years and on the yearly pension points. The highest possible pension at the age of 67 years for a single pensioner with all his/her earnings periods in the system as it is since 1992 (and given the basic amount as of 1 May 2013) is NOK 335,865 (\in 42,407) per year prior to life expectancy adjustment.

Minimum pension

For an unmarried pensioner, who has at least 40 years of insurance based only on residence, the annual minimum pension is NOK 167,963 (\in 21,207) per 1 May 2013. The minimum pension is determined with several rates, depending on marital status and the income of the spouse/cohabitant.

Earnings-related pension

Pension savings are built up by 18.1% of the annual pensionable income up to a maximum of 7.1 times the average basic amount from the year the insured reaches



13 years of age to the year s/he reaches 75 years of age. The earnings-related pension is determined on the basis of the pension savings at the time of drawing, the age and the remaining life expectancy when pension drawing starts.

Guarantee pension

The guaranteed pension is granted at two different rates, depending on marital status and the income of the spouse/cohabitant. The guaranteed pension is determined on the basis of the insurance period, and is independent from both previous income and paid contributions.

How are old-age benefits accessed?

Claims for benefits should be submitted to the NAV Office in your place of residence, stay or work.



Chapter VII: Survivors' benefits

When are you entitled to survivors' benefits?

Widow's/Widower's benefits

A surviving spouse (or cohabitant who was previously married to or has children with the deceased, or surviving registered partner) under the age of 67 is entitled to pension benefits if he or she is insured, and the deceased was insured and able to work for at least three years immediately prior to death. The surviving spouse is also entitled to benefits if the deceased had been drawing a pension for a period of at least three years prior to his or her death. If the deceased was receiving a supplementary pension, the surviving spouse is not required to be insured. In this case, a corresponding basic pension is also granted. If either the survivor or the deceased has been resident in Norway for at least 20 years, the condition that the survivor must be insured for a basic pension to be granted is also waived.

The survivor's pension is granted to a surviving spouse, etc., if the marriage lasted for five years or the survivor has or previously had children with the deceased or is taking care of the children of the deceased and the duration of the marriage in addition to the period of care after the death is at least five years.

A divorced spouse, etc., who has not remarried at the time of the death of the former spouse, is entitled to benefits according to the same rules provided that the death occurs within five years after the divorce, and the marriage lasted for at least 25 years, or 15 years if children were born in the marriage. The benefits terminate if the beneficiary remarries.

Children's pension

A child under 18 who is insured and entitled to pension benefits will be paid a children's pension (*barnepensjon*) if one or both parents are deceased and the deceased was able to work and was insured for three years immediately prior to the death. The surviving child is also entitled to benefits if the deceased had been drawing a pension for a period of at least three years immediately prior to his or her death. The insurance condition is disregarded if the deceased had acquired entitlement to a supplementary pension or one (or both) parents had been residing in Norway for 20 years. Children in education receive the pension up to the age of 20 if both parents are deceased.

What is covered?

Widow's/Widower's benefits

The survivor's pension consists of a basic pension and a supplementary pension. The supplementary pension corresponds to 55% of the deceased's rights for old age or disability supplementary pension. A special supplement is granted as for disability pensions.



If the deceased, due to the length of the insurance period, would have got or had a reduced basic pension, the survivor's basic pension is reduced proportionally.

The survivor's pension is income-tested. If the surviving spouse, etc., already has, or may be expected to have an annual income exceeding 50% of the basic amount, the pension will be equal to the difference between a full pension and 40% of the excess income.

A transitional benefit is granted to a surviving spouse etc. who is not entitled to a survivors' pension, and who is temporarily incapable of supporting him- or herself by working. The transitional benefit is determined according to the same rules as a survivors' pension.

A surviving spouse may also be entitled to child care benefit.

When a surviving spouse etc. must move to find work, grants are made to cover removal expenses.

Education benefit, child care benefit and grants to cover removal expenses may be granted even if the deceased did not fulfil the requirement of three years of insurance immediately prior to the contingency, provided that the survivor is insured and entitled to pension benefits.

Children's pension

If one parent is deceased, the full annual children's pension for the first child equals 40% of the basic amount, and 25% of the basic amount for each subsequent child.

If both parents are deceased, the first child receives a children's pension equal to the survivor's pension which would have been paid to the parent who was entitled to the highest pension. The full children's pension for the second child equals 40% of the basic amount, and 25% of the basic amount for each subsequent child.

When there are two or more children, the pensions are added together and divided equally among the children.

A children's pension is granted at a reduced rate in accordance with the reduction to which a possible basic pension to a surviving spouse would be subject because of incomplete insurance periods.

Death grant

A means-tested lump sum of maximum NOK 21,336 (\in 2,694) may be granted by the National Insurance Scheme in case of death, to cover funeral-related expenses. This benefit is not means-tested if the deceased was under 18 years of age.

How are survivors' benefits accessed?

Claims for benefits should be submitted to the NAV Office in your place of residence, stay or work.



Chapter VIII: Benefits in respect of accidents at work and occupational diseases

When are you entitled to benefits in respect of accidents at work and occupational diseases?

All employees are covered by full compensation for loss of earnings and expenses through a two-tier system:

- the full range of benefits of the National Insurance Scheme (*folketrygden*) with more favourable provisions in certain respects. In addition to employees, this scheme also applies to fishermen (even when self-employed), conscripts, students and trainees;
- a mandatory Occupational Injury Insurance (*yrkesskadeforsikring*) administered by private insurance companies, with individual compensations and/or lump sum indemnities to cover loss of earnings and expenses not compensated by the National Insurance Scheme.

Both tiers offer compensation for non-economic loss (*ménerstatning*).

Self-employed persons may take out voluntary insurance with the National insurance Scheme, if they do not have compulsory insurance in accordance with the provisions applying to specific groups of self-employed persons.

What is covered?

National insurance scheme

The general rules applicable to medical treatment, cash sickness benefits, disability benefits/pensions, survivors' benefits/pensions, etc. may also apply. The beneficiary is entitled to such benefits, though under more favourable terms, as indicated below.

As regards pensions, benefits are not reduced due to lack of insurance periods (insufficient earnings, or unfulfilled waiting periods), but are always granted at full rates.

An invalidity pension may be granted even if earning ability has not been reduced by more than 30% (as opposed to the general rule of a minimum reduction of 50 percent), etc.

A widow's/widower's pension is granted regardless of the duration of marriage and may also be granted to a person who was not married to or cohabiting with the deceased, provided that he or she was supported by the deceased and is taking care of the deceased's children. A children's pension may be awarded until the child reaches 21 if still in education (normally the pension is awarded until the age of 18, or 20 if the child has lost both parents).

Furthermore, the beneficiary does not have to contribute to the costs of healthcare, drugs or medical supplies.



With regard to entitlement to sickness cash benefits, no waiting period applies for accidents at work. Benefits shall also generally be calculated in the most favourable way, corresponding at least to the income level of the beneficiary at the time the injury occurred.

The beneficiary may also be granted a compensation for non-economic loss, at a maximum of 75% of the basic amount per year. The beneficiary may choose to have this compensation paid out as a lump sum.

Occupational injury insurance

In case of temporary and permanent incapacity, the Occupational injury insurance tops up National Insurance benefits as necessary to ensure full compensation.

In case the occupational injury resulted in the death of the insured person, lump-sum indemnities are payable to surviving spouses/cohabitants and to orphans, depending on the age of the deceased or of the child respectively.

How are benefits in respect of accidents at work and occupational diseases accessed?

Under the National Insurance Scheme, employers are required to notify the Labour and Welfare Administration as soon as possible of events that may constitute an occupational injury. The occupational character of the injury must be recognised by the Labour and Welfare Administration.

Claims for compensation from the Occupational Injury Insurance (*yrkesskadeforsikring*) must be made to the insurance company within three years of the end of the calendar year in which the insured person became aware of his/her claim and was able to present it.



Chapter IX: Family benefits

When are you entitled to family benefits?

Child benefit

Child benefit *(barnetrygd)* is granted for children resident in Norway under the age of 18.

Cash benefit for families with small children

Cash benefit (*kontantstøtte*) is granted for children resident in Norway between the ages of one and two. The most important condition for receiving the full rate of the cash benefit is that the child must not be in a day care centre that receives a public grant.

What is covered?

Child benefit

Child benefit is equal to NOK 970 (\in 122) per month and per child. In the northernmost areas including Svalbard, an additional supplement *(finnmarkstillegg/Svalbardtillegg)* of NOK 320 (\in 40) for each child is paid.

Single parents are entitled to child benefit for one more child than they actually have.

In addition to normal child benefits, supplements are available for unemployed persons, pensioners (means-tested) and orphans.

Cash benefit for families with small children

The rate of the cash benefit for families with small children varies according to the agreed time a child is cared for in a subsidised day-care centre, and the child's age. The full rate is paid if the child is not in such a day-care centre. Full rate for children aged 13-18 months is NOK 5,000 (\in 631) per month, and for children aged 19-23 months NOK 3,303 (\in 417) per month. 50% of the full rate is granted when the child is in a subsidised day-care centre less than 20 hours per week. If the agreed time in a day-care centre receiving a public grant exceeds 20 hours a week, there is no entitlement.

Other benefits

Child care benefit is granted when the child must be looked after by someone else during working hours or training courses. The benefit amount is set at 64% of actual child care expenses up to a certain annual ceiling. When income from work exceeds six times the basic amount, there is no right to child care benefit.



For parental benefit and maternity grant, see part on family benefits.

How are family benefits accessed?

Claims for benefits should be submitted to the NAV Office in your place of residence, stay or work.



Chapter X: Unemployment

When are you entitled to unemployment benefits?

If you are unemployed, you may receive daily cash benefits to compensate for the loss of income due to unemployment. Working hours must have been reduced by at least 50% compared to previous working hours.

Previously earned income is a condition for entitlement to daily cash benefits. You must have had income from work of at least 1.5 times the basic amount during the preceding calendar year, or income from work at least equal to three times the basic amount over the three preceding calendar years.

The insured person must be a bona fide applicant for work, i.e. capable of work and registered at the NAV Office. They must also be available at short notice and for any type of part- or full-time work or labour market measure in any part of Norway that they are physically and mentally capable of doing.

People who do not fully meet the availability requirement due to circumstances such as age, health or obligations arising as a result of dependents may also be entitled to unemployment benefits. A prolonged waiting period may be imposed, or benefits may temporarily be suspended if the person concerned is considered to be unemployed by their own choice, i.e. if they have given notice voluntarily, refused to take a suitable job, refused to participate in labour market measures or failed to go to the NAV Office when summoned.

What is covered?

Daily cash benefits are granted if you have been unemployed for three of the last fifteen days and were registered at the NAV Office.

Daily cash benefits are calculated on the basis of income from work and income from daily cash benefits during unemployment, sickness, maternity and adoption. Unemployment compensation is usually equal to about two-thirds of previous income. The calculation basis is the income in the preceding calendar year or, when more favourable, the average income in the three preceding calendar years. The maximal benefit basis is six times the basic amount (NOK 511,470 (\in 64,580)). The benefit rate is 0.24% of the calculation basis per day and is paid five days a week. This will normally give an annual compensation of 62.4% of the calculation basis.

A supplement of NOK 17 (\in 2.15) per day is granted for each dependent child under the age of 18.

A holiday supplement is granted to beneficiaries who received benefits for more than eight weeks during the preceding calendar year. It is equal to 9.5% of unemployment benefits received that year.

The period during which you may receive benefits depends on earlier income from work. If your income from work amounts to at least twice the basic amount, the benefit period will last 104 weeks (two years).



Income amounting to less than twice the basic amount results in a benefit period of 52 weeks (1 year). Once the initial benefit period expires, a subsequent benefit period may immediately be granted provided that the requirements concerning previous income are again met.

How are unemployment benefits accessed?

Claims for unemployment benefits should be submitted to the NAV Office.



Chapter XI: Minimum resources

When are you entitled to benefits regarding minimum resources?

Social financial assistance

Social financial assistance is aimed at securing the subsistence of persons who do not have sufficient financial means to cover basic needs through work or by filing financial claims.

There are no nationality requirements but legal residence in Norway is required, and there are no age conditions. In practice, however, allowance is seldom given individually to children under 18 years of age as they are assumed to be the responsibility of their parents.

Social financial assistance is means-tested; its amount is reduced by all types of income from work or income support that you might receive. You may be asked to sell assets or real estate that is not necessary for your or your family's subsistence. If housing expenses are disproportionately high and higher than you can afford on a long-term basis, the condition of reducing housing expenses by changing to a more moderate flat/house can be imposed.

Furthermore, you must to look for work or participate in work-oriented activities (e.g. training courses) that are appropriate to your situation.

Supplementary allowance scheme

Anyone who has reached the retirement age and who is a permanent resident of Norway is eligible under the supplementary allowance scheme. The purpose of this scheme is to provide financial support for elderly persons with reduced periods of insurance under the general National Insurance Scheme.

As a rule, the general social insurance scheme covers all residents of Norway. However, because 40 years of residence before the age of 67 are required to acquire a full residence-based pension, those who have lived in Norway for a shorter period may not qualify for a pension that is adequate to live on. The scheme is intended to guarantee a minimum income (necessary means of subsistence) for people who have reached the age of 67 and find themselves without sufficient pension or other financial means because they have lived in Norway for less than 40 years.

The allowance is subject to a strict means test and will be reduced if the person or spouse/cohabitant has other income from work or from capital assets or Norwegian or foreign pensions. What is more, capital assets themselves and other property may in principle be taken into account.



What is covered?

Social financial assistance

There is no fixed amount for the minimum level of the benefit. The benefit has to be set, however, at a level which secures the claimant "a dignified life" or a "decent minimum".

Government guidelines identify the expenses for which support should be given and establish reasonable amounts for subsistence allowance. Attention is paid to the most ordinary expenses found in daily life: food and drink, clothing and shoes, hygiene articles, television licences, daily newspapers, telephone and internet expenses, expenses related to participation in leisure activities and transportation costs. Costs for housing, heating/electricity and furniture are not included but are considered on a case-by-case basis.

The actual benefit amount varies according to the family composition, family income and individual discretion.

Social financial assistance is granted for an unlimited period, as long as the entitlement conditions are fulfilled.

Supplementary allowance scheme

The maximum amount of the allowance is set at the level of the minimum social insurance pension rate.

How are minimum resources benefits accessed?

Social financial assistance is administered by the NAV Office to whom an application should be made. Each case has to be examined individually. Entitlement is established on the basis of a written application and accompanying documentation.

Recipients of the supplementary allowance are required to re-apply once a year in person at the NAV Office.



Chapter XII: Long-term care

When are you entitled to long-term care?

Long-term care benefits are available for all residents whose need for long-term care has been established. It is not subject to means-testing, age conditions or qualifying periods.

In order to receive long-term healthcare services, the patient must have a need for "required healthcare" beyond immediate help.

In order to receive long-term social services, the client must have a special need for help because of sickness, disability, age etc. The client must also be totally dependent on practical or personal help to manage ordinary activities of daily living.

Cash benefits are available for disabled persons in need of care (Basic benefit and Attendance benefit) and for certain informal carers (Discretionary cash benefit).

What is covered?

Benefits in kind

Long-term healthcare services are provided either at home or in the form of a place in a nursing home or day and night service flat.

Long-term social services include personal and practical assistance at home, shortterm stays in nursing homes as a relief measure for the family of patients cared for at home and residential care for elderly and disabled persons.

Cash benefits

Cash benefits are provided as a supplement to benefits in kind.

Discretionary cash benefit is paid by the municipality to an informal carer who has a particularly burdensome level of care. It is for the local authorities to decide on an individual basis if the caregiver has "a particularly burdensome level of care". The local authorities also determine the amount of the benefit.

Basic benefit and attendance benefit

See part on invalidity.



How is long-term care accessed?

An application should be made to the local municipality. The municipality usually makes decisions as regards long-term care based upon assessment from doctors or/and other qualified personnel (e.g. physiotherapists) about the need for services.

Home nursing and personal assistance are free of charge. Limited cost-sharing charges exist for other home services. For long-term nursing home care, the patient must pay 75% of income between NOK 7,000 (\in 884) and NOK 85,245 (\in 10,763) and 85% of any exceeding income up to the full cost of a nursing home place.



Annex: Useful addresses and websites

More detailed information on qualifying conditions and individual social security benefits in Norway can be obtained from the public institutes managing social protection system.

For social security issues concerning more than one EU country, you may search for a contact institution on the Institutions' directory maintained by the European Commission and available at: http://ec.europa.eu/social-security-directory.

Enquiries concerning the effect on benefits of insurance in two or more Member States should be addressed to:

Ministry of Labour: Arbeidsdepartementet PB 8019 Dep. 0030 OSLO http://www.ad.dep.no

Ministry of Health and Care Services: Helse- og Omsorgsdepartementet PB 8011 Dep. 0030 OSLO http://www.hod.dep.no

Ministry of Children, Equality and Social Inclusion: Barne-, Likestillings- og Inkluderingsdepartmentet PB 8036 Dep. 0030 OSLO http://www.bld.dep.no

Directorate of Labour and Welfare: Arbeids- og Velferdsdirektoratet PB 5 St. Olavs plass 0130 OSLO Tel.: +47 21 07 00 00 http://www.nav.no

Directorate of Health: Helsedirektoratet PB 7000 St. Olavs plass 0130 OSLO http://www.helsedirektoratet.no

NAV National Office for Social Insurance Abroad: NAV Internasjonalt PB 8138 Dep. 0033 OSLO Tel.: +47 23 31 13 00 Fax: +47 23 31 13 01 E-mail: nav.internasjonalt@nav.no http://www.nav.no **Employment, Social Affairs & Inclusion** Your social security rights in Norway



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