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Commission

Your social security rights

in Poland

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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Table of Contents

Chapter I: Introduction, organisation and financing	5
Introduction	5
Organisation of social protection	5
Financing	6
Chapter II: Healthcare	7
When are you entitled to healthcare?	7
What is covered?	7
How is healthcare accessed?	8
Chapter III: Sickness cash benefits.....	9
When are you entitled to sickness cash benefits?.....	9
What is covered?	10
How are sickness cash benefits accessed?.....	11
Chapter IV: Maternity and paternity benefits.....	12
When are you entitled to maternity or paternity benefits?.....	12
What is covered?	12
How are maternity and paternity benefits accessed?	13
Chapter V: Invalidity benefits.....	14
When are you entitled to invalidity benefits?	14
What is covered?	15
How are invalidity benefits accessed?	16
Chapter VI: Old-age pensions and benefits	17
When are you entitled to old-age benefits?	17
What is covered?	18
How are old-age benefits accessed?	19
Chapter VII: Survivors' benefits	21
When are you entitled to survivors' benefits?	21
What is covered?	22
How are survivors' benefits accessed?	22
Chapter VIII: Benefits in respect of accidents at work and occupational diseases.....	23
When are you entitled to benefits in respect of accidents at work and occupational diseases?.....	23
What is covered?	24
How are benefits in respect of accidents at work and occupational diseases accessed?	24
Chapter IX: Family benefits	25
When are you entitled to family benefits?	25
What is covered?	25
How are family benefits accessed?	27
Chapter X: Unemployment.....	28
When are you entitled to unemployment benefits?	28
What is covered?	28
How are unemployment benefits accessed?.....	29
Chapter XI: Minimum resources	30
When are you entitled to benefits regarding minimum resources?.....	30
What is covered?	30
How are minimum resources benefits accessed?	30
Chapter XII: Long-term care.....	31
When are you entitled to long-term care?	31
What is covered?	31
How is long-term care accessed?	32

Annex: Useful addresses and websites33

Chapter I: Introduction, organisation and financing

Introduction

In Poland, social security consists of:

- old-age pension;
- invalidity pension;
- sickness and maternity insurance;
- insurance against accidents at work and occupational diseases;
- health insurance.

In addition to this, Poland has a system of family benefits, social assistance benefits and unemployment benefits.

The Polish social security system covers practically all people in active employment, i.e. employees, self-employed people and their family members.

Social insurance may be mandatory or voluntary. All people in active employment, that is, employees, the self-employed and farmers, are covered by mandatory insurance. Reporting these people to social insurance is the responsibility of either those who pay the contributions (employers), or, for the self-employed and clergy, of the individuals themselves.

Organisation of social protection

The social security system is contained within the general framework of the Ministry of Labour and Social Policy (*Ministerstwo Pracy i Polityki Społecznej*) and the Ministry of Health (*Ministerstwo Zdrowia*) but the system's legal, administrative and financial organisation is independent from that of these Ministries.

The following institutions administer the social security schemes:

- The Social Insurance Institute (*Zakład Ubezpieczeń Społecznych, ZUS*) and its regional services, which are responsible for sickness and maternity cash benefits and pensions for retirement, invalidity, survivors, employment injuries and occupational diseases. The Social Insurance Institute collects all social security contributions and transfers them to the appropriate organisations. At the same time, the general mandatory pension system in Poland also comprises open pension funds managed by private financial institutions. However these are subject to a strict monitoring and supervision of the State. The insured persons do not pay the contributions directly to pension funds but rather to ZUS, along with other social insurance contributions. ZUS is responsible for transferring the part of a pension insurance contribution to the pension fund chosen by the insured individual;
- Regional health funds, which are responsible for providing sickness and maternity healthcare benefits;
- Community Social Policy Centres, providing family benefits;
- Local and Regional Labour offices, providing unemployment benefits;
- The State Fund for the Rehabilitation of Disabled Persons (*Państwowy Fundusz Rehabilitacji Osób Niepełnosprawnych, PFRON*), which controls disabled persons' access to employment and rehabilitation. All rehabilitation and employment

programmes, including sheltered work, are financed from levies on employers not meeting the disability quota.

In Poland, the healthcare system is managed within the health insurance framework by the National Health Fund (*Narodowy Fundusz Zdrowia - NFZ*) and its local branches. The NFZ signs contracts with service providers to set up a network of bodies available to provide healthcare services. It finances healthcare benefits and pays the refunds of medicines from its own budget.

Financing

The Social Insurance Institute (*Zakład Ubezpieczeń Społecznych - ZUS*) is largely responsible for collecting contributions to social insurance (old-age pension, invalidity pension, sickness, accident and health insurance) for people employed outside agriculture. It is also in charge of paying benefits.

Contributions are the main source of financing for benefits. The rates of contributions are the same for all insured people and are as follows:

- 19.52% of the calculation basis for old-age pension;
- 8.00% of the calculation basis for invalidity pension;
- 2.45% of the calculation basis for sickness insurance;
- 0.67% to 3.86% of the calculation basis for accident insurance;
- 9.00% for health insurance;
- 2.45% for the Labour Fund.

Contributions to old-age pensions are financed in equal parts by the beneficiaries and employers, i.e. each of these two groups pays 9.76% of the calculation basis, totalling 19.52%. Contributions to invalidity pensions are financed by the beneficiaries (1.5% of the calculation basis) and by the employers (6.5% of the calculation basis). Contributions to sickness and health insurance are financed in full by the insured people themselves. Contributions to accident insurance and the Labour Fund are financed in full by the employers.

Employees' contributions are determined on the basis of income from employment, as defined in the provisions on personal income tax.

There are open pension funds managed by private financial institutions operating within the general and mandatory employee old-age pension system in Poland. ZUS is responsible for transferring a portion of the old-age pension contribution (i.e. 2.8% in 2013 increasing to 3.1% in 2014, 3.3% in 2015 and 3.8% in 2017) to the open pension fund selected by insured people. For insured people who have not joined any open pension fund, the entire old-age pension contribution is transferred to the ZUS, which covers old-age pension, invalidity pension, sickness and accident benefits.

Chapter II: Healthcare

When are you entitled to healthcare?

You are entitled to receive free healthcare benefits in Poland if:

- you are covered by general health insurance (either mandatory or voluntary);
- you are not directly insured, but you are a Polish citizen and meet the income criterion set by the Act on Social Assistance.

Access to healthcare during a temporary stay in Poland

Eligible people who are temporarily staying in Poland may receive healthcare benefits on equal terms with Polish citizens. During a temporary stay in Poland, any eligible person is entitled to health services in the following areas:

- primary healthcare,
- specialist out-patient care,
- hospital treatment,
- dental treatment,
- rescue and medical transport services.

What is covered?

Entitlement to free healthcare benefits entitles you to use the services of those providers who have concluded contracts with NFZ and who are therefore required to provide such services.

Healthcare providers include doctors who practise within the health insurance system (GPs, dentists), healthcare establishments (hospitals, first-aid services, dispensaries, health centres, out-patient clinics, etc.), and private surgeries (individual, individual specialist, group).

Primary healthcare

Primary healthcare includes examinations and advice provided by a general practitioner. GPs may then refer patients to a specialist or a hospital for diagnostic tests to confirm the preliminary diagnosis.

Dental care

Most fees for dental care provided by dentists who have concluded contracts with NFZ have to be paid directly by the patient.

Free dental benefits within the general health insurance system are very limited and are specified in a regulation issued by the Minister of Health. Any services and materials other than these are at the patient's own cost.

Hospital care

Throughout a stay in the hospital, all procedures, examinations and medicines are provided free of charge.

Medicines and medical devices

Beneficiaries or eligible people are entitled to the provision of medicines or medical devices on the basis of a prescription issued by a doctor who practises within the health insurance system or by a doctor who does not practise within this system, but has concluded a contract with NFZ authorising him/her to issue prescriptions.

The official list of medicines divides pharmaceuticals into three categories:

- for basic medicines, patients pay a fixed cost (PLN 3.25 (€ 0.75) or PLN 5.00 (€ 1.15)) determined by the Minister of Health (*Minister Zdrowia*), which cannot exceed 0.5% of the minimum wage;
- for special additional medicines, insured persons pay 30% to 50% of the cost;
- for other medicines, insured persons pay 100% of the cost.

Medicines are free of charge in hospitals.

How is healthcare accessed?

Patients can register with a general practitioner of their choice.

Out-patient clinics (dispensaries) are open Monday to Friday from 8 a.m. to 6 p.m. After 6 p.m. on weekdays, and on Saturdays, Sundays and holidays, 24-hour assistance is provided by those establishments which have concluded contracts for such services. These include out-patient care and home visits for patients who are not able to travel. Addresses and telephone numbers of establishments which provide 24-hour care services are available from primary healthcare providers.

If you need to consult a specialist, you will generally need a referral from a doctor who practises within the health insurance system (general practitioner). However, no referral is required for the following specialists: gynaecologists, obstetricians, dentists, dermatologists, venereologists, oncologists, ophthalmologists or psychiatrists. A referral is also not required for people suffering from tuberculosis, people infected with HIV, war invalids and victims of political persecution, and people addicted to alcohol, narcotics or psychoactive substances who are undergoing rehabilitation. Any beneficiary who has suffered an accident, injury, poisoning, or whose life is threatened, will also receive the medical care needed without a referral.

If you need hospital care, a doctor's referral is required.

Chapter III: Sickness cash benefits

When are you entitled to sickness cash benefits?

Sickness insurance provides cash benefits if an insured person or a member of their family becomes ill or falls pregnant.

The sickness insurance fund pays out the following benefits: sickness allowance, rehabilitation allowance, compensation allowance, maternity allowance and child-minding allowance.

Sickness allowance (*Zasilek chorobowy*)

The sickness allowance is a basic benefit paid under sickness insurance. Any insured person who becomes ill during the term of sickness insurance is eligible for this allowance from the 34th day of illness (or from the 15th day if the employee has reached 50 years of age). Insured individuals become eligible for the sickness allowance after 30 days of continuous insurance if they are insured on a mandatory basis, or after 90 days of continuous insurance if they are insured on a voluntary basis.

The following people are eligible for the sickness allowance from the first day they are insured:

- graduates of schools or higher education institutions who became covered by or joined sickness insurance within 90 days of leaving school or receiving their degrees or diplomas;
- those whose inability to work was caused by an accident on the way to or from work;
- people who have been insured on a mandatory basis for at least 10 years;
- Members of Parliament and senators who joined the sickness insurance scheme within 90 days of the end of their term of office.

The sickness allowance is granted on the basis of medical certification using the ZUS's ZLA form to confirm temporary inability to work.

Child-minding allowance (*Zasilek opiekuńczy*)

Child-minding allowance is paid to any insured person released from the obligation to continue working because of a need to personally provide care for a healthy child of up to 8 years of age, a sick child of up to 14 years of age, or another sick family member. The following are considered as children: own children of an employee or his/her spouse; his/her/their adopted children; and other children raised and maintained by the employee or his/her spouse. The term "family members" means: a spouse; parents; parents-in-law; grandparents; grandchildren; siblings; and children above 14 years of age, if they live in the same household with the insured person during the period of care.

Both the mother and father of the child are eligible for the allowance on equal terms, but the allowance is paid to one parent only, i.e. the one who submits the application for allowance for a given period. The allowance is awarded only in absence of other

persons in the common household who could take care of the child or of the sick family member. However, these other persons in the common household do not include, among others: persons completely incapable of work, sick persons, persons physically or mentally disabled due to their age, persons running a farm or carrying out economic activity outside the agriculture, who cannot freely regulate their hours of work.

Rehabilitation allowance (*Zasilek rehabilitacyjny*)

Rehabilitation allowance is granted to insured people whose eligibility for the sickness allowance has run out, but whose inability to work continues. The rehabilitation allowance may be granted to such people for the time they need to recover the ability to work, up to a maximum, however, of 12 months. The decision on granting the rehabilitation allowance is made by the competent branch of ZUS based on the assessment of ZUS's authorised physician.

Compensation allowance (*Zasilek wyrównawczy*)

Compensation allowance is paid only to insured people who are employed. It is granted to people whose monthly pay has been reduced because they are undergoing job retraining. The need for such training is evaluated by the occupational medicine centre for the region concerned (*voivodeship*) or by a ZUS-certified physician.

What is covered?

Sickness allowance

For the first 33 days, employees continue to be paid by their employer. The allowance is due for each day they are unable to work, including legal holidays. It is calculated on the basis of 1/30 of monthly pay. It is paid for the period during which the person is unable to work up to a maximum of 182 days, or 270 days if the inability to work is caused by tuberculosis or occurred within the period of pregnancy.

Sickness allowance may amount to as much as 80% of the calculation basis, and 70% of the calculation basis for the period of hospitalisation. Where the inability to work is caused by an accident at work or by an occupational disease, or where it falls during the period of pregnancy, or if it has arisen due to the need to undergo medical examinations for cell, tissue or organ donation, or the procedures for removing cells, tissues or organs, the sickness allowance due and payable will cover 100% of the calculation basis (including the period of hospitalisation).

Child-minding allowance

The child-minding allowance is paid for the duration of the absence from employment resulting from the need to personally care for the child, up to a maximum of 60 days per calendar year for care of a child under 8 years old or for care of a sick child up to 14 years old, and of 14 days per calendar year for a child over 14 years old or other sick family members. The child-minding allowance granted for caring for children or other family members for various reasons can be paid for a maximum of 60 days (or 14 days) per calendar year, regardless of the number of family members who require

such care. The amount of the allowance is 80% of the calculation basis. The calculation basis for employees is the average monthly remuneration paid for the 12 calendar months before the person became unable to work.

Rehabilitation allowance

The rehabilitation allowance amounts to a maximum of 90% of the calculation basis during the first 90 days of its receipt, and 75% of the calculation basis for the remaining period. Where the inability to work is caused by an accident at work or an occupational disease, or where it falls during pregnancy, the amount of the benefit paid is equal to 100% of the calculation basis for the sickness allowance.

Compensation allowance

The compensation allowance is due and payable for the period of job retraining, not exceeding, however, 24 months. The compensation allowance constitutes a difference between the average monthly remuneration paid for the period of 12 months preceding the retraining, and the monthly remuneration for work at the decreased rate.

How are sickness cash benefits accessed?

A contracted doctor certifies incapacity for work from the first day of illness. It is possible that re-examination by an approved social security doctor will be necessary.

The insured person is obliged by law to submit a medical certificate to the contribution payer within seven days from the date after the certificate is received. If this obligation is not complied with, the amount of sickness and care allowance is reduced by 25% starting from the eighth day after the certificate is received.

Chapter IV: Maternity and paternity benefits

When are you entitled to maternity or paternity benefits?

The maternity allowance (*zasilek macierzyński*) is payable to any insured person who during the term of sickness insurance or child-raising leave:

- gives birth to a child;
- takes in a child of up to seven years of age with the intention of raising that child and files a petition for the adoption of that child;
- takes in a child of up to seven years of age with the intention of raising that child within a foster family.

The maternity allowance may also be granted to the father of the child, if he is insured, where the child's mother has taken at least 14 weeks of maternity leave. In this case, the child's mother may transfer the remaining leave to the child's father who is eligible for maternity leave or who discontinued any gainful activity to take care of the child. If the child's father does not wish to use the remaining maternity leave, the child's mother is required to use it fully and may not shorten it.

The maternity allowance may also be granted to the father of the child, if he is insured, or to another insured family member, where:

- the child's mother has died or abandoned the child, and/or
- these people give up employment or another gainful activity to take care of the child.

In addition, parents may be entitled to additional maternity allowance (*Dodatkowy zasilek macierzyński*) and to benefit during parental leave (*Urlop rodzicielski*).

What is covered?

The maternity allowance is paid during the maternity leave period. Its period of payment depends on the number of children born in one confinement, and equals:

- 20 weeks in the case of a single birth;
- 31 weeks if two children are born in one confinement;
- 33 weeks if three children are born in one confinement;
- 35 weeks if four children are born in one confinement;
- 37 weeks if five and more children are born in one confinement.

The amount of the maternity allowance is 100% of its calculation basis. For employees, this is equal to the average monthly remuneration paid over the last 12 calendar months before the person became unable to work.

Furthermore, parents of children born after 31 December 2012 are granted:

- an additional maternity allowance during a period of 6 weeks (8 in case of multiple birth), which can be taken in one or two parts, following each other directly and covering one or more weeks. The amount of the additional maternity allowance equals that of the maternity allowance;

- a benefit during the 26 weeks' parental leave. The leave can be taken either at once by one of the parents or in two or three parts following each other directly and not shorter than 8 weeks. The amount of the benefit during parental leave is 60% or 80% (depending on the situation) of the average monthly remuneration paid over the last 12 calendar months.

How are maternity and paternity benefits accessed?

Maternity allowances are payable by ZUS or by the employer, and are financed by the Social Insurance Fund.

The maternity allowance is granted on the basis of a certificate stating the expected date of birth for the period before the birth, and on the basis of the birth certificate for the period from the date of birth. If it is payable by ZUS, the Z-3 form has to be used.

Chapter V: Invalidity benefits

When are you entitled to invalidity benefits?

Invalidity pension (*renta*) insurance provides cash benefits in the event of the loss of cash income if you become unable to work. In such cases, contributors to the invalidity pension insurance scheme receive an invalidity pension which compensates for the lost income.

The following benefits are paid out by invalidity pension insurance:

- invalidity pension due to inability to work (*renta z tytułu niezdolności do pracy*);
- training pension (*renta szkoleniowa*);
- survivors' pension (*renta rodzinna*).

The right to the invalidity pension due to inability to work is granted to people deemed partly or totally unable to hold any gainful employment because of the state of their health. A person is considered to be unable to work if they have lost the capacity to perform any kind of work. A person is considered to be partially unable to work if they have lost a considerable extent of the capacity to perform work commensurate with their professional qualifications.

The basic criterion for receiving the invalidity pension is the emergence of a total or partial inability to hold gainful employment due to impaired physical or mental ability and a prognosis that the individual will not recover the ability to work after retraining. Inability to work is assessed for a period of not more than 5 years, unless the current state of medical knowledge considers that the prognosis for the inability to work to be overcome before the end of that period is negative, in which case the inability to work will be assessed for a period longer than 5 years.

The invalidity pension due to an inability to work is payable to a person who fulfils the following requirements:

- they are unable to work;
- they can demonstrate that they have completed the required period for coverage (contributory and non-contributory);
- the inability to work arose during periods specifically set out in the law, e.g. during the period of insurance, employment, receipt of unemployment benefits, receipt of social insurance allowances (sickness or care), or not later than 18 months after the end of these periods.

The length of contributory and non-contributory periods required varies according to the age of the insured person when the inability to work arose:

- 1 year if the inability to work arose before the person concerned turned 20;
- 2 years if the inability to work arose when the person concerned was between 20 and 22;
- 3 years if the inability to work arose when the person concerned was between 22 and 25;
- 4 years if the inability to work arose when the person concerned was between 25 and 30;
- 5 years if the inability to work arose after the person concerned turned 30.

For people who become unable to work after they turned 30, the 5 years required must fall within the 10 years prior to the day on which the application for the invalidity pension was submitted or on which the inability to work arose.

Training pension (*Renta szkoleniowa*)

The right to the training pension is granted to people who meet the eligibility requirements for the invalidity pension and who have received an official statement that a change of professional qualifications is appropriate since they are unable to continue work in their current occupation. Once the training pension is granted, the pension body refers the person concerned to the poviát labour office to allow them to take training for a new occupation. The training pension is granted for a period of 6 months, which may be reduced or extended.

The period is reduced if the starost (*poviát administrative officer*) informs the pension body of:

- the lack of any possibility to retrain a given person for a new occupation;
- the fact that a given person does not want to undergo retraining.

The period specified may be extended for the length of time needed to undergo vocational retraining, but in any case not longer than 30 months. This means that the training pension may be received for a maximum period of 36 months.

What is covered?

The amount of the invalidity pension is calculated as follows:

- invalidity pension due to total inability to work:
 - i. 24% of the basic amount;
 - ii. 1.3% of the calculation basis for each year of contributory periods
 - iii. 0.7% of the calculation basis for each year of non-contributory periods;
 - iv. 0.7% of the calculation basis for each remaining year needed to complete 25 years of service, from the date on which the invalidity pension was applied for to the invalidity pensioner's 60th birthday;
- invalidity pension due to partial inability to work: 75% of the invalidity pension due to inability to work;
- invalidity pension due to total inability to work and lead an independent life, with an additional care allowance;
- training pension: 75% of the calculation basis for the invalidity pension, but not less than the amount of the lowest invalidity pension due to partial inability to work.

The amount of the invalidity pension cannot be lower than PLN 831.15 (€ 192) in case of total inability to work, and PLN 637.92 (€ 147) in case of partial inability to work.

How are invalidity benefits accessed?

Inability to work is assessed by the authorised physician of the Social Insurance Institute (ZUS) in the form of an official statement of assessment. This statement enables the relevant pension body to decide on those benefits which depend on the assessment of inability to work.

You are entitled to appeal against an assessment by an authorised physician to the ZUS assessment team within two weeks of the first assessment. The appeal should be submitted to the ZUS unit responsible for the area where you reside.

Chapter VI: Old-age pensions and benefits

When are you entitled to old-age benefits?

The reform of the social insurance system in Poland in 1999 introduced different eligibility criteria for old-age pension (*emerytura*) according to the age of the insured person. Thus, the rules differ somewhat for the following three age groups:

- people born before 1 January 1949;
- people born between 1 January 1949 and 31 December 1968;
- people born after 31 December 1968.

People born before 1 January 1949 become eligible for the old-age pension once the following conditions are met:

- the retirement age is reached, i.e. 60 years of age for women and 65 for men;
- the required insurance period can be documented, i.e. 20 years for women and 25 years for men.

Since 1 January 2013 the retirement age gradually increases by one month per three months for every age cohort, until it reaches 67 for both men and women. The first persons concerned by this increase are those born in 1953 (women) and 1949 (men).

Entitlement to an old-age pension may also be acquired after an insurance period of 15 years for women and 20 years for men. However, if the old-age pension of such people is lower than the minimum retirement benefit guaranteed by the insurance system, it will not be increased to the amount of the minimum benefit.

People born before 1 January 1949 may also be eligible for old-age pension earlier if they meet the following conditions:

- any woman who has reached the age of 55 and can show that she has at least 30 years of contributory and non-contributory periods, or at least 20 years of contributory and non-contributory periods and she is declared totally unable to work;
- any man who has reached the age of 60 and can show that he has at least 35 years of contributory and non-contributory periods, or at least 25 years of contributory and non-contributory periods and he is declared totally unable to work.

Old-age pensions may also be obtained earlier by individuals who can show that they have at least 20 years (for women) and 25 years (for men) of insurance periods, including at least 15 (and in some cases, 10) years of work under unusual conditions or of a special nature. People who meet these conditions may retire at the age defined for particular occupational groups and jobs under the Regulation on the retirement age of employees working in unusual conditions or performing work of a special nature.

More favourable conditions for eligibility for the old-age pension are also enjoyed by some special groups, such as war invalids or the military, public sector employees, teachers, miners and railway employees.

People born between 1 January 1949 and 31 December 1968 may retire earlier on similar terms to those described above, provided that they fulfil both of the following conditions:

- they have not joined any open pension fund;
- the statutory conditions for qualifying for the old-age pension were met by 31 December 2008.

Insured people born after 31 December 1948 and who, by 31 December 2008, did not reach the retirement age needed to qualify for the old-age pension (because their work was performed under special conditions or was of a special nature, or because their activity was creative or artistic), miners' old-age pension, old-age pension for some periods of miners' work, or railway employees' old-age pension, may retire at the age of 60 (for women) and 65 (for men), provided that on 1 January 1999, they could document:

- a period of employment under special conditions or of a special nature guaranteeing the right to the old-age pension at the age of 60 (for women) and 65 (for men);
- contributory and non-contributory periods totalling at least 20 years for women and 25 years for men.

As of 2009 some employees who have been employed before 1 January 1999 and/or after 31 December 2008 under special conditions or in work of a special nature may also be entitled to the bridge pension (*emerytura pomostowa*). The bridge pension may be claimed by persons who, among other things, have reached the age of 55 years for women and 60 years for men, and have completed an insurance period of no less than 20 years for women and 25 years for men, including at least a 15-year period of employment under special conditions or in work of a special nature. Termination of the employment relationship is a supplementary condition to be awarded the pension. The pension amount is calculated in a similar way as the amount of the "new" old-age pension. However, irrespective of the actual age of retirement of a given person, the average life expectancy for persons aged 60 years is always taken into account. The right to the bridge pension expires on the day preceding the day of acquiring the right to the old-age pension or, if the person concerned does not have the right to the old-age pension, on the day preceding the statutory retirement age.

People born after 31 December 1968 become eligible for old-age pension once they reach the minimum retirement age of 60 for women and 65 for men. In this case, entitlement to the old-age pension does not depend on documenting any specified minimum insurance period. For this group of insured people, the amount of the old-age pension will be determined by dividing the calculation basis by the average life expectancy for people of the age at which the insured person decides to retire.

What is covered?

The amount of the abovementioned old-age pensions depends on the following:

- the basic amount for the assessment;
- the number of contributory and non-contributory periods that the insured person can demonstrate;
- the base amount effective as at the date on which the person became eligible for the pension.

Old-age pensions are assessed on the basis of contributions to social security or old-age insurance under Polish law paid during 10 consecutive calendar years within the 20 calendar years directly preceding the year the application for the benefit was submitted.

An insured person may also opt for the average of contributions to social insurance from 20 freely-selected calendar years out of the full period of insurance to be used as the basis for calculating the old-age pension.

The basis for calculating the old-age pension is set by multiplying the individual calculation basis rate by the base amount.

The base amount is 100% of average pay minus the social insurance contributions deducted in the previous calendar year. The base amount is established annually and is valid from 1 March of each calendar year until the end of February of the next calendar year.

The amount of the old-age pension is equal to:

- 24% of the base amount as referred to above;
- 1.3% of its basis of assessment for each year of contributory periods;
- 0.7% of its basis of assessment for each year of non-contributory periods - taking account of special regulations.

The statutory minimum pension is PLN 831.15 (€ 192) and the maximum is 100% of the reference wage.

Non-contributory periods are taken into account to a maximum of 1/3 of the contributory periods considered.

For people born after 31 December 1968, the basis of assessment for the old-age pension is the total value of contributions paid by the insured person up to the end of the month preceding the one in which they become eligible for the old-age pension. This amount includes contributions to old-age pension insurance, the annual indexation and the initial capital, duly indexed (where the insured person was covered before 1 January 1999).

The age of the insured person on the day of retirement will be expressed in years and months. Average life expectancy is a statistical figure which will be used to establish the number of months during which, on average, any new old-age pension will be paid out. Exceeding this number of months will not in any way affect the amount or the indexation of the pension paid in the future.

How are old-age benefits accessed?

Anyone who pays contributions must submit an application for social insurance coverage within seven days of the event which creates the obligation to be insured (i.e. the conclusion of the employment contract or the establishment of one's own economic activity). Everyone who is required to have old-age and disability pension insurance must submit this application.

Anyone covered by social insurance on a voluntary basis may apply for social insurance coverage any time they choose to do so. Applications to ZUS for social

insurance coverage can be made using a special electronic form created by ZUS which is available to contribution payers, or a good quality print-out of this same form.

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Chapter VII: Survivors' benefits

When are you entitled to survivors' benefits?

A survivors' pension (*renta rodzinna*) is paid to members of the family of a deceased person who, at the time of death, was receiving an old-age or invalidity pension due to inability to work or who fulfilled the conditions to qualify for the old-age or invalidity pension due to inability to work. When assessing the entitlement to the survivors' pension, it is assumed that the deceased person was totally incapable of work.

The following people are eligible for the survivors' pension:

- children, including those of the insured person, the spouse, and any adopted children, who have not reached the age of 16, or of 25 if they are still in education. The survivors' pension regardless of age is due to children who were declared totally unable to work before their 16th birthday or, if they were still students, before their 25th birthday;
- grandchildren, siblings and other children accepted to be raised and brought up before they reach the age of majority, provided that they fulfil the following two conditions:
 - i. they were taken into the family at least one year before the death of the employee or the pensioner, unless the death was caused by an accident
 - ii. they are not eligible for any pension from their parents in the event of their death, their parents are unable to maintain them, or the employee, pensioner or his/her spouse are the legally appointed guardians.
- widows and widowers if the spouse, at the time of death, had reached 50 years of age or was unable to work. If they have not reached 50 but are raising at least one of the children, grandchildren or siblings who are under 16 and who are eligible for the survivors' pension of the deceased, they are also entitled to this pension. If the child, grandchild or siblings of the deceased are pursuing education, the widow or widower may also claim the survivors' pension until the child's 18th birthday. Widows and widowers are also eligible for the survivors' pension if they have custody of a child who is totally unable to work. Widows or widowers who reach the age of 50, who become unable to work within less than 5 years after their spouse's death or after they cease to take care of a child below the age of 16 (18 if the child is pursuing education) or of a child assessed as totally unable to work are also entitled to a survivors' pension. Divorced people and widows or widowers who did not share the conjugal community with their spouse at the time of death are eligible for the survivors' pension, if, in addition to fulfilling the conditions applicable to widows and widowers at the time of the spouse's death, they were receiving alimony pursuant to a court decision or agreement in court.
- parents are eligible for the survivors' pension if they meet the same conditions as widows or widowers, or if their deceased child used to contribute significantly to their maintenance.

Widows, widowers or children do not lose the right to the survivors' pension if they (re)marry.

Funeral allowance (*Zasilek pogrzebowy*)

A funeral allowance is granted in the event of the death of:

- an insured person;
- a person receiving an old-age or disability pension;
- a person who is not receiving an old-age or disability pension at the time of death, but who meets the eligibility criteria to claim it;
- a member of the family of one of the people described in points 1 or 2 above.

The funeral allowance is a flat rate amount of PLN 4,000 (€ 923).

What is covered?

The amount of the survivors' pension is equal to:

- for a single beneficiary: 85% of the pension for which the deceased was eligible;
- for two beneficiaries: 90% of the pension for which the deceased was eligible;
- for three or more beneficiaries: 95% of the pension for which the deceased was eligible.

The statutory minimum pension is PLN 831.15 (€ 192). All eligible family members receive a single joint survivors' pension, which, if necessary, is divided equally among all the beneficiaries.

The funeral allowance is paid only once. It may be granted to the person who has covered the funeral costs, or to the employer, social welfare centre, commune, powiat (district), or to an official of the Catholic Church or other religious denomination, if they have covered the funeral costs. The funeral allowance is a one-off payment amounting to PLN 4,000 (€ 923). Eligibility for the funeral allowance lapses if the application for the allowance is not submitted within 12 months of the date of death of the person for whom the allowance could be granted.

How are survivors' benefits accessed?

Decisions on granting the old-age or survivors' pension are taken by the pension body responsible for the claimant's place of residence. The first step in obtaining a benefit is to submit an application. The pension body must always issue its decision within 30 days of the last condition which grants entitlement to the benefit being met.

Claimants are entitled to appeal against pension bodies' decisions. Anyone who does not agree with the decision made has the right to lodge an appeal with the labour and social insurance court of the district within one month of being informed of the decision. The appeal should be submitted through the pension body that issued the decision.

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?

The majority of people in active employment must take out mandatory insurance against accidents at work and occupational diseases. Such insurance is not available on a voluntary basis.

Sickness, disability pension and indemnity benefits connected with an accident at work or an occupational disease are paid from the accident insurance fund.

Sickness benefits

- Sickness allowance (*zasilek chorobowy*) is paid to an insured person who is unable to work because of an accident at work or an occupational disease. It is due and payable regardless of the accident insurance period, from the first day that the person is unable to work because of an accident at work or an occupational disease;
 - Rehabilitation benefit (*świadczenie rehabilitacyjne*) is paid to an insured person who is still unable to work when their eligibility for sickness allowance lapses, and who is expected to be able to recover the ability to work with further treatment or therapeutic rehabilitation. It can be paid for a maximum of 12 months;
 - Compensation allowance (*zasilek wyrównawczy*) is paid to an insured person who has suffered a reduction in pay due to permanent or long-lasting damage to health.
- For further information on these benefits, see part on [sickness cash benefits](#).

Invalidity pension (*Renta*)

- Training pension (*renta szkoleniowa*) is paid to an insured person for whom the usefulness of vocational retraining has been assessed following an inability to continue working in their previous profession because of an accident at work or an occupational disease. For further information see part on [invalidity benefits](#);
- Survivors' pension (*renta rodzinna*) is paid to the family members of an insured person or person receiving an invalidity pension following an accident at work or an occupational disease. For further information see part on [survivors' benefits](#);
- Invalidity pension due to inability to work (*renta z tytułu niezdolności do pracy*) is paid to an insured person who has become unable to work due to an accident at work or an occupational disease.

Allowances (*Zasiłki*)

- A lump-sum compensation (*jednorazowe odszkodowanie*) is paid to an insured person who suffered permanent or long-lasting damage to health as a result of an accident at work or an occupational disease;
- a lump-sum compensation (*jednorazowe odszkodowanie*) is also paid to family members of an insured person who died as a result of an accident at work or an

occupational disease, or of a person receiving an invalidity pension as a result of an accident at work or an occupational disease;

- the costs of dental treatment, preventive vaccinations and orthopaedic articles as stipulated by the law.

What is covered?

The amount of the invalidity pension due to inability to work is equal to:

- 24% of the base amount;
- 1.3% of the calculation basis for each year of contributory periods;
- 0.7% of the calculation basis for each year of non-contributory periods;
- 0.7% of the calculation basis for each remaining year needed to complete 25 years of contributory and non-contributory periods from the date the application for the disability pension was submitted to the date of the disability pensioner's 60th birthday (i.e. "hypothetical service").

The amount of the invalidity pension due to inability to work and the training pension resulting from an accident at work or an occupational disease may not be lower than:

- 60% of the calculation basis for the invalidity pension for a person partly unable to work;
- 80% of the calculation basis for the invalidity pension for a person completely unable to work;
- 100% of the calculation basis for the invalidity pension for a person eligible for the training pension.

The amount of the invalidity pension due to inability to work in respect of an accident at work or an occupational disease cannot be lower than PLN 997.38 (€ 230) in case of total inability to work, and PLN 765.50 (€ 177) in case of partial inability to work.

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

In the case of an occupational disease, an illness caused by an employment injury or a disease occurring during pregnancy, the Social Insurance Institute pays 100% of the reference wage. If the victim of an occupational disease has been exposed to the risk at more than one employer, the allowance is paid by the last employer.

Chapter IX: Family benefits

When are you entitled to family benefits?

Family benefits may be claimed by people who meet the following conditions:

- they will reside within Poland for the period for which they will receive the benefits;
- their family income does not exceed PLN 539.00 (€ 124) per person in the family, or PLN 623.00 (€ 144) if one of the family members is a disabled child.

What is covered?

The basic family benefit is the family allowance (*zasilek rodzinny*) together with its supplements (*dodatki*).

The family allowance is payable from the date of birth of the child until the child's 18th birthday, or until the child completes their education, until no later than their 21st birthday, or, for a child who is pursuing education and is moderately or severely disabled, until their 24th birthday. The allowance is paid monthly. In parallel with the family allowance, some supplements may also be granted:

- a childbirth-lump-sum supplement (*dodatek z tytułu urodzenia dziecka*), which may be granted until the child's 1st birthday;
- a childcare allowance paid to people on parental leave (*dodatek z tytułu opieki nad dzieckiem w okresie korzystania z urlopu wychowawczego*), provided that they were working for at least 6 months directly before acquiring the entitlement to that leave. This supplement may be granted for a period of up to 24 months, extended to 36 months where the person concerned provides care for more than one child delivered in the same multiple birth, or to 72 months for a disabled child;
- a bringing-up-a-child-alone supplement (*dodatek z tytułu samotnego wychowywania dziecka*) is granted to the single mother or father of a child, to its actual guardian or its legal guardian without a court decision granting alimony from the child's second parent, due to the death of that parent or because the father of the child is unknown. It may be granted to a person pursuing education if both parents of that person are deceased. The amount of this supplement is increased for families raising a disabled child, or if the income per family member is 50% or less of the fixed ceiling;
- a large-family supplement (*dodatek z tytułu wychowywania dziecka w rodzinie wielodzietnej*), paid monthly for the third and every subsequent child eligible for the family allowance;
- a training-and-rehabilitation-of-a-disabled-child supplement (*dodatek z tytułu kształcenia i rehabilitacji dziecka niepełnosprawnego*), is granted to a child until 16 years of age provided that the disability is proven by an official certificate, or, if the child is between 16 and 24 years old, by an official certificate attesting to moderate or severe disability;
- a commencement-of-a-school-year supplement (*dodatek z tytułu rozpoczęcia roku szkolnego*), paid once a year at the beginning of each school year;
- a child-education-out-of-the-place-of-residence supplement (*dodatek z tytułu podjęcia przez dziecko nauki poza miejscem zamieszkania*), intended to cover

accommodation and travel costs to the location of the school. This supplement is paid for 10 months of the year.

Family benefits also cover attendance benefits, i.e. the medical care allowance, the nursing benefit and the special attendance allowance.

Medical care allowance (*Zasilek pielęgnacyjny*)

Eligible people for medical care allowance include disabled children until the age of 16 and people over 16 who hold an official certificate attesting to severe or moderate disability which arose prior to their 21st birthday. This allowance is also granted to people over 75 who are not eligible for a care allowance in addition to the old-age or invalidity pension. This benefit is granted regardless of the family's income.

Nursing benefit (*Świadczenie pielęgnacyjne*)

Nursing benefit is paid to people caring for a child who were forced to give up their job to do so. It may be paid to the child's mother, father, the actual guardian of the child, or any other person who is obliged to pay alimony if that person does not work or gives up employment or any other gainful work to take care of a child who:

- holds an official certificate attesting to disability and indicating the need for permanent or long-term care or assistance by another person resulting from the significantly reduced possibility of leading an independent life and the need for permanent, daily participation of the child's guardian in the treatment, rehabilitation and education of the child; or
- holds an official certificate attesting to severe disability.

This benefit is granted regardless of the family's income.

Special attendance allowance (*Specjalny zasilek opiekuńczy*)

Special attendance allowance is granted to persons charged with a maintenance obligation if they abandon employment or another gainful activity due to the necessity to provide constant care to a person who is certified as having a high level of disability or as being disabled and in need of: constant and long-term care or assistance of another person due to a highly reduced capacity to lead an independent life; and constant everyday involvement of a caretaker in the process of treatment, rehabilitation and education of the child.

Special attendance allowance is granted if the total income per member of the family of the person providing care and of the family of the person requiring care does not exceed the amount of PLN°623 (€°144).

Special attendance allowance amounts to PLN°520 (€ 120) a month.

How are family benefits accessed?

Family benefits may be claimed by:

- both parents;
- one of the parents;
- the child's legal guardian;
- the child's actual guardian, i.e. a person who takes care of the child and has petitioned the court to adopt the child;
- anyone who has reached the age of majority, is still pursuing education and is not a dependant of their parents because the latter are deceased, or who receives support payments from their parents pursuant to a court decision, provided that the decision was handed down before the person pursuing education reached the age of majority.

Chapter X: Unemployment

When are you entitled to unemployment benefits?

Social security against unemployment in Poland is public and mandatory. It covers both employees and the self-employed. The self-employed pay contributions to the Labour Fund themselves, while employees' contributions to the Labour Fund are paid in full by employers. To be covered by unemployment insurance, your monthly wages or salary must be at least equal to the minimum wage.

You become entitled to the allowance for every calendar day with effect seven days after registering with the relevant local labour office, if:

- there are no offers of employment, training, internships, traineeships with an employer, or public works appropriate for you as an unemployed person, and
- you were employed for at least 365 days over the 18 months prior to the date you registered, and you were paid an amount which was not lower than the minimum amount upon which the contribution to the Labour Fund must be paid, or you fulfil the requirements by documenting another period qualifying you for the unemployment allowance (*zasilek dla bezrobotnych*).

Early Retirement Benefit (*Świadczenie przedemerytalne*)

Early retirement benefits are intended for people who are made redundant and who do not qualify for retirement. They are available to people who are close to retirement age and have been made redundant for reasons attributable to the employer. Early retirement benefits may also be granted to an unemployed person who:

- has received the unemployment allowance for at least 6 months and is still registered as unemployed at the end of that period;
- while receiving the unemployment allowance, did not refuse, without any justified reason, an offer of appropriate employment, other gainful work, subsidised work, or work in the public sector;
- submits an application for early retirement benefit within the deadline specified by law.

What is covered?

The gross basic amount of the unemployment benefit is currently PLN 823.60 (€ 190) per month for a period of three months, and PLN 646.70 (€ 149) thereafter. An unemployed person whose qualification period for the allowance is less than 5 years is eligible for an allowance equal to 80% of the basic amount. An unemployed person whose qualification period for the allowance is at least 20 years is eligible for an allowance equal to 120% of the basic amount.

The duration of the unemployment benefit depends notably on the unemployment rate in the area in which you live, and can either be 6 or 12 months, i.e.:

- 6 months in areas with an unemployment rate less than 150% of the national average,

- 12 months in areas with an unemployment rate of at least 150% of the national average, or if the claimant has completed a qualifying period of 20 years and is over 50 years old, or if the claimant's spouse is unemployed, not entitled to an allowance and they have at least one dependent child under the age of 15 years.

How are unemployment benefits accessed?

Applicants must register as unemployed with the local labour office. There is a waiting period of seven calendar days. Any unemployed person who is not satisfied with the decision on the award of the unemployment allowance may lodge an appeal with the higher court within 14 days of being notified of the decision.

Early retirement benefits are awarded on the basis of the request submitted by the claimant. The appropriate application should be submitted to the ZUS branch responsible for your place of residence. You may appeal against the pension body's decision using the same means of appeal as for decisions concerning old-age and invalidity pensions.

Chapter XI : Minimum resources

When are you entitled to benefits regarding minimum resources?

The Social Assistance Act grants the right to certain non-contributory benefits to individuals and families whose income does not exceed a minimum income criterion.

What is covered?

This social assistance includes, among other things, cash benefits, benefits in kind and social work. The basic social assistance benefits are as follows:

- the permanent allowance (*zasilek stały*) which supplements the income of people who are totally unable to work because of their age or disability;
- the periodic allowance (*zasilek okresowy*) for individuals and families without income, or whose income is lower than the legal threshold and whose cash resources are too low for basic subsistence. Individuals and families always retain the right to keep or gain entitlement to benefits from other social security schemes if they should be struck by chronic disease, disability or unemployment;
- the special needs allowance (*zasilek celowy*) and the special personal allowance are lump sum benefits for individuals and families paid out to meet specific subsistence needs.
- allowance and loan to attain financial independence;
- assistance to foster families;
- assistance to attain self-dependence and to continue education;
- cash benefit for refugees towards living costs and expenses connected with learning the Polish language.

Social assistance also offers support in an in-kind form, such as credit tickets, contributions to health insurance, contributions to social insurance, organisation of a funeral and specialist guidance.

How are minimum resources benefits accessed?

Benefits in kind are organised by units of central and local administration in cooperation with organisations such as foundations, associations, the Catholic Church, other churches and religious groups, trade unions, employers and natural and legal persons. Cash benefits are administered and claimed through local Social Assistance Centres.

Chapter XII: Long-term care

When are you entitled to long-term care?

In healthcare insurance, long-term care is provided to bedridden and chronic patients, who, although not requiring hospitalisation, experience deficits in self-care and are in need of 24-hour, professional, intensive care and nursing, and continuation of treatment.

All age groups are entitled to long-term care benefits (both children and adults). The main eligibility criterion for awarding this type of care is the state of health, as it results from the degree of disability, invalidity or age.

The social pension (*Renta socjalna*) is payable to adults who have been recognised as totally unable to work due to impairment of bodily functions which occurred:

- before reaching the age of 18 years, or
- during the course of studies at school or any higher education institution before reaching the age of 25 years, or
- during the course of doctoral studies or post-graduate programmes (*aspirantura*).

What is covered?

Long-term care provides benefits in kind and cash benefits in a piece-meal manner, through legislation on a number of other risks (including old-age, invalidity, survivors' and healthcare insurance) and also through legislation on social assistance.

Cash benefits are subject to income levels (earnings, pensions, other benefits and allowances). As a general rule, there is a free choice between cash benefits and benefits in kind. Nevertheless, the cash benefits usually do not include the possibility to receive benefits in kind.

The forms of financial assistance paid directly to persons in need of long-term care services are:

- a [medical care allowance](#),
- a medical care supplement: in order to be entitled to this supplement a person needs to be assessed as totally incapable of work and of independent living (regardless of age) and to be over 75 years of age,
- a [nursing benefit](#).

People who require long-term care and find themselves in a difficult financial situation may also receive financial assistance within the social assistance system, notably the permanent allowance, the periodic allowance and the [special needs allowance](#).

The social pension is granted as a fixed amount and equals 84% of the minimum invalidity pension. Since 1 March 2013 it amounts to PLN⁶698.17 (€²⁰⁷).

How is long-term care accessed?

For invalidity benefits, evaluation is made by an authorised physician of the Social Insurance Institute. For other benefits, it is the *poviat* or *voivodeship* bodies for certification on the grade of disability who make the evaluation.

Annex: Useful addresses and websites

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 and Social Policy
Ministerstwo Pracy i Polityki Społecznej
ul. Nowogrodzka 1/3/5
00-513 Warszawa
<http://www.mpips.gov.pl>

Ministry of Health
Ministerstwo Zdrowia
ul. Miodowa 15
00-952 Warszawa
<http://www.mz.gov.pl>

Social Insurance Institute
Zakład Ubezpieczeń Społecznych (ZUS)
ul. Szamocka 3,5
01-748 Warszawa
<http://www.zus.pl>

The State Fund for the Rehabilitation of Disabled Persons
Państwowy Fundusz Rehabilitacji Osób Niepełnosprawnych (PFRON)
ul. J. Pawła II 13
00-828 Warszawa
<http://www.pfron.org.pl>

National Health Fund
ul. Grójecka 186
02-390 Warszawa
<http://www.nfz.gov.pl>