



Your social security rights in Bulgaria



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Your social security rights in Bulgaria

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Sometime in your life you may be in need of the support provided by social security benefits. If you are living in the country where you were born and satisfy the qualifying conditions, you will be entitled to receive support. But you also have the right to receive benefits if you are a national of any EU country and move to another part of the EU. The information below sets out when you are eligible for benefits, what you are entitled to and how to go about claiming it.

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Family

Family child benefits

Here you will find information on family allowances.

The following monthly family allowances are described:

- **monthly allowances for raising a child until graduation from high school, but not after the age of 20** (*месечни помощи за отглеждане на дете до завършване на средно образование, но не повече от 20-годишна възраст*);
- **monthly allowances for raising children under the age of one** (*месечни помощи за отглеждане на дете до навършване на една година*);
- **monthly allowances for raising a child with a permanent disability** (*месечни помощи за отглеждане на дете с трайно увреждане*);
- **monthly allowances for children not eligible to receive survivor's pension from a deceased parent** (*месечни помощи за дете без право на наследствена пенсия от починал родител*).

In what situation can I claim?

Family allowances are designed to help cover costs for parents and families in connection with childbirth and childcare.

Benefits are provided in cash or in kind in the form of goods or services.

They are provided on a one-off or monthly basis.

Parents can also apply before the child reaches the age of 1 year if no maternity benefit has been provided and if they have a low income (this only concerns the monthly allowances for raising children under the age of one).

Monthly allowances for raising a child until graduation from high school, but not after the age of 20, are income-tested and represent the most common type of family allowances.

The following persons are entitled to a monthly allowance for permanently disabled children below 18 years of age and prior to finishing secondary school, but not later than reaching the age of 20: families with dependent children who are permanently disabled.

Children who do not receive survivor's pension from their deceased parent due insufficient insurance periods are entitled to a monthly allowance.

What conditions do I need to meet?

Monthly allowance for raising a child until graduation from high school, but not after the age of 20, are provided to families whose income does not exceed BGN 510. When the income is between BGN 510.01 and 610, the amount of the allowance is reduced to 80%. They are provided for children under 20 years of age until they complete secondary education. Entitlement to these benefits is subject to the following conditions:

- the child is not placed for care outside the family in accordance with the Child Protection Act;
- the child regularly attends a preparatory group in a kindergarten or a preparatory group in a compulsory pre-school training school unless this is impossible due to the condition of the child's health;
- the child must regularly attend school unless this is impossible due to the condition of the child's health;
- the child resides permanently in Bulgaria;
- the child has all required immunisations and prophylactic controls according to their age and health.

The allowance is provided in kind in all cases when the mother is below the age of 18 years. The allowance is also provided in kind in the following cases:

- the parents or the persons entitled to the family allowance do not take care of their child/children;
- the family allowance is not used for the intended purpose for the child/children;
- the parents or the persons receiving the family allowance do not fulfil the obligation under the Child Protection Act.

Monthly allowance for raising a child under one year of age are provided on the basis of the income of a family member. To be entitled to such benefits, the income of each family member must be equal to or less than BGN 610. The child must live permanently in the country (as well as the mother or adoptive mother) and not to be placed for care outside the family in accordance with the Child Protection Act.

Mothers (including adoptive mother) who do not receive maternity benefits due to non-compliance with these conditions receive the monthly allowance for raising child under one year of age.

The allowance is provided in kind in all cases when the mother to whom it is provided, has not reached the age of 18 years. The allowance is also provided in kind in the following cases: the parents or the persons receiving the family allowance do not take care of their child/children; the family allowance is not used for the intended purpose for the child/children; the parents or the persons receiving the family allowance do not fulfil the obligation under the Child Protection Act.

Parents who wish to claim these benefits must submit an application. An identity document must be presented when submitting the application.

Monthly allowances for raising a child with a permanent disability are provided to parents (adoptive parents) when raising children with permanent disabilities, regardless of the income of the family, provided that the child lives permanently in the country and is not placed outside the family in accordance with the Child Protection Act. The allowance is also provided to families of relatives or close friends and foster families, regardless of the income of the family.

Monthly allowances for children not eligible to receive survivor's pension from deceased parent are provided to the other parent or legal guardian of the child regardless of the income of the family if:

- the child does not receive survivor's pension in accordance with the Social Insurance Code;
- the child is not placed for care outside the family in accordance with the Child Protection Act;
- the child regularly attends a preparatory group in a pre-school or school the child's state of health does not allow it;
- the child resides permanently in Bulgaria;
- the child has all required immunisations and prophylactic controls according to their age and health.

What am I entitled to and how can I claim?

Every year in the state budget, monthly child-raising allowances are set up until the end of high school, but in maximum until the age of 20. From 2015, the amount of the allowance is determined by the number of children in the family. From 1st of April 2022, the amount for a family with an income up to BGN 510 is:

	Number of children in the family				
	1	2	3	4	For each child above 4
Amount (BGN)	50	110	165	175	raises by BGN 20

The amount of the monthly child-raising allowance for families with an average monthly income per family member for the preceding 12 months ranging from BGN 510.01 to

BGN 610 is reduced to 80%. In the case of multiple births, the compensation for each twin child is BGN 75. In order to receive this benefit, you must complete a declaration and send it to the Social Assistance Directorate, indicating the current families' address together with the other necessary documents.

The amount of the **monthly allowance for raising children under the age of one for parents who are not entitled to maternity benefits** is BGN 200 for 2023. The [application/declaration](#) and the required documents must be submitted to the Social Assistance Directorate covering the mother's current address.

The **monthly allowance for permanently disabled children** is provided regardless of the income of the family. Its amount depends on the degree of disability: over 90% - BGN 930; from 70% to 90% - BGN 450 and from 50% to 70 % - BGN 350 per month for 2023. You must complete a declaration and submit it to the Social Assistance Directorate covering the parents' current address together with the other required documents.

The monthly allowance for a child with no right to a survivor's pension from a deceased parent is BGN 150 for 2023.

Jargon busters

- **Individual residing permanently in this country** - an individual who resides in the territory of the country for over 183 days within 12 months.
- **Child with a permanent disability** - a child/person aged up to 20 with a degree of disability and a degree of permanently reduced working capacity of 50% or more.

Forms you may need to fill in

- [Applications for family allowances](#);
- The [required documents](#) to be submitted to the Social Assistance Directorate.

Know your rights

The laws and web pages of the institutions that determine your rights can be found by following the links below. These are not European Commission pages and do not represent the opinion of the Commission:

- [Agency for Social Assistance](#);
- [Social Assistance Directorates](#).

European Commission publications:

- [Family benefits: your rights abroad as a citizen of the EU](#).

Who do you need to contact?

- [Social Assistance Directorates](#).

Other family allowances and benefits

Here you will find information on the allowances and benefits to which you are entitled and which are not covered in the previous chapters.

The following one-off family allowances under the Family Allowances Act are described:

- **one-off pregnancy benefit** (*еднократна помощ при бременност*);
- **one-off benefit upon childbirth** (*еднократна помощ при раждане на дете*);
- **one-off benefit for raising twins** (*еднократна помощ за отглеждане на близнаци*);

- **one-off benefit for the raising of a child by a mother (adoptive mother) who is a full-time university student** (*еднократна помощ за отглеждане на дете от майка (осиновителка) студентка, учаща в редовна форма на обучение*);
- **one-off benefits for pupils enrolled in the first second, third and fourth grade** (*еднократна помощ за ученици, записани в първи, втори, трети и четвърти клас*);
- **one-off benefits for students enrolled in the eighth grade** (*еднократна помощ за ученици, записани в осми клас*);
- **one-off allowance for free railway and bus transport to mothers of multiple children** (*еднократна помощ за безплатно пътуване веднъж в годината с железопътния и автобусния транспорт в страната за многодетни майки*);
- **one-off benefit upon adoption of a child** (*еднократна помощ при осиновяване на дете*).

In what situation can I claim?

One-off pregnancy benefit is payable to pregnant women whose average monthly income per family member is equal to or lower than BGN 610 and, therefore, cannot receive maternity benefits). They are available for women who are insured for sickness and maternity but do not comply with the conditions for the required period of social insurance cover. More information about maternity benefits can be found in the maternity chapter.

One-off childbirth benefit is payable irrespective of the level of family income. If you give birth to twins, the amount is higher.

A mother (adoptive mother) is entitled to a one-off benefit for raising twins, regardless of the income of the family, provided the children are not placed for care outside the family in accordance with the Child Protection Act and provided they have permanent residence in Bulgaria.

One-off benefit for the raising of a child by a mother (adoptive mother) who is a full-time university student is payable if the mother has been enrolled as a full-time university student as of the date of birth of the child.

Mothers of multiple children are entitled to one-off benefit for travel by train or bus once a year in Bulgaria. This applies to mothers who have given birth to or have adopted and care for three or more children aged over 1 year.

Adoptive parents are entitled to one-off benefit upon adoption of a child regardless of the income of the family, provided that the adoptive parents and the child reside permanently in this country.

What conditions do I need to meet?

You are entitled to the [one-off pregnancy benefit](#) if your income is less than BGN 610. In order to receive this, you must not be entitled to pregnancy and childbirth (maternity) benefit even if you are insured for sickness and maternity, since you do not meet the required social insurance period conditions.

[The mother has the right to a one-off benefit](#) in the event of the birth of a living child irrespective of the family income, provided the child is not placed for care outside the family in accordance with the Child Protection Act. You are entitled to receive this benefit from the date of birth of the child and you can apply for it within 3 years of this date. If you give birth to twins, you are entitled to this benefit for each of the children.

A mother (adoptive mother) is entitled to a one-off benefit for raising twins, provided the children are not placed for raising outside the family. The entitlement to one-off benefit for raising twins elapses when the children reach the age of 6 months.

Both benefits (the one-off benefit upon childbirth and the one-off benefit for raising twins) above must be refunded if, before reaching the age of two, the child is placed for care

outside the family because of culpable behaviour of the parent or of the person caring for the child in accordance with the Child Protection Act.

A mother (adoptive mother) who is a full-time university student is entitled to a one-off benefit for raising a child regardless of the income of the family, provided that the child:

- resides permanently in Bulgaria;
- is not placed for care outside the family.

and that the mother (adoptive mother):

- resides permanently in Bulgaria;
- is a full-time and regular student in higher education in accordance with the Higher Education Act;
- is not insured and does not receive benefits for pregnancy, childbirth and raising a child.

The benefit is paid in two instalments, 50% after the order granting it enters into force, and the remaining 50% following the submission of a certificate of registration for the next semester or of completion of higher education, but not later than the child's first year of age.

The benefit must be refunded if, before reaching the age of two, the child is placed for care outside the family because of culpable behaviour of the parent or of the person caring for the child.

One-off benefits for school pupils are provided after the child enrolls in first, second, third and fourth grade. You must apply for these benefits no later than 15 October of the current school year. If your child cannot begin school for health reasons, this period is extended for 6 months from the beginning of the school year.

The benefit is provided in kind in the following cases: the parents or the persons receiving the family allowance do not take care of their child/children; the family allowance is not used for the intended purpose for the child/children; the parents or the persons receiving the family allowance do not fulfil the obligation under the Child Protection Act.

The one-off benefit for school pupils is provided regardless of the family income.

The one-off benefit for students enrolled in eighth grade is provided in the same way as the one-off benefit for pupils enrolled in the first, second, third and fourth grade of school.

With regard to the one-off allowance for free railway and bus transport in Bulgaria to mothers of multiple children expenses for bus travel are paid on the basis of an application declaration submitted within 1 month of the travel. The application must be accompanied by the travel tickets and a copy of the certificate in which the carrier has recorded the completed journey.

Upon the adoption of a child by spouses, the one-off benefit upon adoption can be claimed by only one of them. The benefit must be refunded if, before the expiry of two years from the adoption, this is terminated or the child is placed for care outside the family because of culpable behaviour of the adoptive parent.

What am I entitled to and how can I claim?

One-off benefits for pregnancy

For 2023, these benefits were set at BGN 150. They are payable for a period of 45 days before the expected date of birth. In order to receive these benefits, you must submit an [application](#) together with the [required documents](#) to the Social Assistance Directorate covering the mother's current address. You will receive the amount during the next month.

One-off benefit upon childbirth

The amount of the benefit in 2023 is BGN 250 for the first child, BGN 600 for the second child, BGN 300 for the third child and BGN 200 for fourth and each subsequent child. When determining the order of children, only children to whom you have given birth and who are born alive will be taken into account. Benefits are only payable provided the child is not placed for care outside the family in accordance with the Child Protection Act.

If you give birth to twins, one of which is a second child of the mother, the benefit will be paid for each of the twin children at the amount for the second child - BGN 600 for each child.

The amount of the one-off benefit for raising twins is BGN 1,200 for each child-twin for 2023.

The amount of the one-off benefit for raising a child by a mother (adoptive mother) who is a full-time university student is BGN 2,880. The benefit is paid in two instalments, 50% after the order granting it enters into force, and the remaining 50% following the submission of a certificate of registration for the next semester or of completion of higher education, but not later than the child's first year of age. In order to receive this benefit you must submit a [declaration](#) together with the [required documents](#) to the Social Assistance Directorate covering the mother's current address.

One-off benefits for pupils enrolled in the first, second, third and fourth grade and **One-off benefits for students enrolled in the eight grade**

When your child is enrolled into one of the above mentioned grades, you are entitled to a one-off benefit. The amount of the benefit for the academic year 2022-2023 is BGN 300. It is paid during the month following the month the application is submitted. The benefit is paid in two instalments, 50% after the order granting it enters into force, and the remaining 50% are paid at the beginning of the second school term if the child continues to attend school

The application declaration must be submitted to the Social Assistance Directorate covering the family's current address together with the other [required documents](#).

One-off allowance for free railway and bus transport in Bulgaria to mothers of multiple children

Expenses for bus travel are paid on the basis of an application declaration submitted within 1 month of the travel. The application must be accompanied by the travel tickets and a copy of the certificate in which the carrier has recorded the completed journey.

The amount of the one-off benefit upon adoption of a child is BGN 250 for 2023. The amount of the benefit cannot be higher than the amount of the one-off

benefit upon childbirth for a first child. Upon the adoption of a child by spouses, the benefit can be claimed by only one of them.

Jargon busters

- **Income per family member.** This is defined on the basis of the average income of the family for the past 12 months and is divided by the number of family members. This includes all gross family income, pensions, allowances, benefits and grants. It does not include aid allowance under the Social Insurance Code, scholarships of students until graduation from high school, but not after the age of 20, as well as allowances and funds received under this act, under the Child Protection Act and the Persons with Disabilities Act. Family members are defined as: spouses, parents living together without being married, parents and their underage children as well as children of legal age, who continue their studies, until graduation from high school, but not after the age of 20 (born, adopted and stepchildren, except those who have married).
- **Mothers of multiple children** - those who have given birth, or have adopted, and raised three or more children above the age of one.

Forms you may need to fill in

- [Application for one-off benefits](#)

Know your rights

The laws and web pages of the institutions which determine your rights can be found by following the links below. These are not European Commission pages and do not represent the opinion of the Commission:

[Agency for Social Assistance](#)

European Commission publications:

- [Family compensation: Your rights abroad as a citizen of the EU.](#)

Who do you need to contact?

Social Assistance Agency

<https://asp.government.bg/>

Sofia 1051, 2 Triaditsa Street

Social Assistance Directorates

- Iztok residential complex, street 172, No 11
Sofia
Tel: +359 28700238 / 28702048/87
- [Regional Social Assistance Directorates](#)

Maternity and paternity

Here you will find information on the benefits to which you are entitled when you get pregnant and become parents.

They are summarised as:

- **pregnancy and childbirth benefits** (*обезщетение за бременност и раждане*);
- **benefit for raising a child up to 2 years of age** (*Обезщетение за отглеждане на дете до 2-годишна възраст*)
- **benefits for adoption of a child up to 5 years of age** (*обезщетение при осиновяване на дете до 5-годишна възраст*);
- **benefits in the event of death or serious illness of the mother/adoptive mother** (*обезщетение при смърт или при заболяване на майката*)
- **benefits for raising a child up to 8 years old by the father (adoptive father)** (*обезщетение за отглеждане на дете до 8-годишна възраст от бащата (осиновителя)*).

In what situation can I claim?

Cash benefits for maternity or paternity are payable to insured parents.

Maternity contributions accumulate in the same fund as contributions for sickness (in the case of sick leave). The 'Sickness benefit' chapter on the [National Social Security Institute website](#) shows who is entitled to benefit. Social insurance under this fund is obligatory under most regular employment. Your right to benefits does not depend on whether your contributions have actually been paid or are due but have not been paid (except for the self-employed for whom the social security contributions have to be paid).

These benefits replace employment income while you are on maternity leave and cover 410 days beginning 45 days before the due date of child birth. If the birth occurs during those 45 days, the remainder of the 45 days can be used after the birth. The father is entitled to 15 days of paid leave from the date of childbirth. When the child reaches the age of 6 months, the father may assume care of the child and hence the cash benefits from the mother for the remainder of the 410 days.

Adoptive parents are entitled to 365 days leave upon adoption of a child up to 5 years of age starting from the date of the adoption.

Fathers (adoptive fathers) are entitled to 2 months leave for raising a child up to 8 years old.

What conditions do I need to meet?

In order to receive pregnancy, childbirth and child care benefits, above all you need to have been insured for sickness and maternity for at least 12 months at the beginning of your period of leave. These 12 months may have been continuous or non-continuous and you do not need to have been employed by one and the same employer.

Leave for pregnancy and childbirth must be certified with medical documents presented to the employer.

If you comply with the above conditions, benefits are paid if:

- the child is alive;
- the child has not been handed over for adoption;
- the child has not been taken into a children's institution fully maintained by the State;
- you have not been deprived of parental rights and they have not been restricted;
- the child has not been in a foster family;

- the mother has not agreed for the leave to be used by the father, grandmother or grandfather of the child.

In the case of adoption, benefits for pregnancy and childbirth are payable under the same conditions, but on the following two additional conditions:

- the adoption has not been terminated by a court;
- you have not been included in a maternity support programme while caring for the child;
- the child is younger than 5 years of age.

Fathers (adoptive fathers) are also entitled to leave for childbirth amounting to 15 days. In addition, after the child reaches the age of 6 months, fathers may also take on the care for the child for the remainder of the 410 calendar days. Adoptive fathers can also take care of the child from the 6th month after the adoption until the end of the leave (365 days). The conditions for payment of benefits are the same, but with some additions:

- You must be married to the mother of the child or live with her in a single household. In the latter case, the father must have recognised the child;
- The social insurance of the mother or adoptive mother has not been terminated.

Grandmothers and grandfathers may take on child care after the child has reached the age of 6 months.

In the event of death or serious illness of the mother or adoptive mother which prevents her from caring for the child, the persons entitled to benefits in her place must be insured for sickness and maternity. [Item 18 on the National Social Security Institute website](#) shows how serious illness of the mother is established. The persons entitled to benefits in her place can be:

- the father of the child;
- one of the parents of the mother or the father, with the agreement of the child's father;
- in the event of death of the mother and father, the guardian acquires the entitlement;
- he/she may transfer the benefit entitlement to one of the parents of the mother or the father.

Fathers (adoptive fathers) are entitled to cash benefit for up to 2 months for raising a child up to 8 years old under the following conditions:

- they are insured for sickness and maternity
- you have at least 12 months of insurance as insured for sickness and maternity. This period may be interrupted or continuous and does not necessarily have to have been completed immediately before going on leave to raise a child up to the age of 8 or with the same employer;
- they are allowed the relevant type of leave;
- you have not used leave for raising a child from 6 months to 1 year; for raising a child in case of death and serious illness of the mother (adoptive mother); for raising a child between 1 and 2 years of age; for adoption of a child up to 5 years old. If they have used any of these leaves for less than 2 months, they have the right to use this leave for the difference to 2 months;
- the cash benefit is not paid upon the death of the child, deprivation of the father's parental rights or giving the child up for adoption, upon termination of the adoption, upon placement of the child in an institution of full state maintenance or in accordance with Art. 26, para. 1 of the Child Protection Act.

- self-insured persons who are insured for general illness and maternity are also entitled to cash benefit for raising a child up to the age of 8, when they meet the conditions.

What am I entitled to and how can I claim?

Social insurance for sickness and maternity is obligatory for all employed people and for self-employed people who have chosen to be insured for those risks.

Cash benefits are calculated on the basis of your average daily remuneration for the last 24 months. If you have paid insurance in another EU Member State within these 24 months, only the monthly insurance contributions paid in Bulgaria are taken into account.

For example, if you have lived in another Member State for two months of the required 24-months period, then only the 22 months of insurance contributions paid in Bulgaria are taken into account.

More information can be found in the chapter entitled 'Summing up social insurance periods from the EU and EEA.'

Benefits are only payable by bank transfer. In accordance with European legislation, the amount may not be reduced due to administrative or bank charges.

Pregnancy and childbirth benefits

Cash benefits for pregnancy and childbirth are calculated per day and amount to 90% of the **average gross daily income** for which you have been insured over the last 24 months before the beginning of the leave for pregnancy and childbirth or adoption. For self-insured people, the contributions for sickness and maternity are considered.

Daily cash benefits cannot exceed the person's average net daily remuneration, i.e. you may not receive more maternity benefits than your net daily salary.

These benefits cannot be less than the minimum monthly wage, which is BGN 780 for 2023. This rule applies if you are employed with more than one employer: the **sum of the different benefits** cannot be less than the minimum working wage.

Benefits for the fathers or one of the grandparents are calculated in the same way as for mothers.

Benefits for adoption of a child up to 5 years of age

The adoptive parents are entitled to a benefit for a period of 365 days. The benefit is calculated in the same way as the benefit for pregnancy and childbirth.

Benefit for raising a child up to 2 years of age

After completion of the 410 days of leave for pregnancy and birth, if you decide to take paid leave to care for a child, you are entitled to benefits until the child reaches 2 years of age. The amount is established each year in the State Social Insurance Budget Act - BGN 710. The mother, father, grandparent or guardian of the child is entitled to this benefit, depending on who cares for the child. If you are self-employed and you are insured for sickness and maternity, you are also entitled to these benefits.

Benefits for the death or serious illness of the mother/adoptive mother

These benefits are paid to the person who cares for the child if the mother/adoptive mother has died or has a serious illness which prevents her from caring for the child.

The amount of benefit is calculated in the same way as for pregnancy and childbirth: 90% of the average daily income for the last 24 months.

If the father, grandparent or guardian cares for the child, he/she is also entitled to benefits for raising a small child. These are equivalent to the amount defined in the State Social Insurance Budget Act and it amounts to BGN 710.

Duration is the same as for other benefits:

- 410 days for pregnancy and childbirth, of which 45 days are before the birth;
- 365 days for the adoptive parent from the day the child is handed over for adoption;
- 15 calendar days for fathers (adoptive fathers);
- the remainder of the 410 days (with the mother's consent) after the child reaches 6 months of age;
- the remainder of 365 days (with the mother's consent) after the first 6 months from the adoption;
- until the child reaches 2 years of age.

Benefit for raising a child up to 8 years old by the father (adoptive father)

The amount of the benefit is determined in the State Social Insurance Budget Act and it amounts to BGN 710.

Jargon busters

- **Period of social insurance cover:** calculated in hours, months and years. This takes into account the time during which you have worked as a full-time employed person if the insurance contributions on the remuneration received have been paid or are payable. This includes the duration of paid or unpaid leave for sickness, maternity, birth or adoption of a child up to the age of 2 years, along with 30 working days for unpaid leave in 1 calendar year. This takes into account self-employment. A minimum social insurance income is defined for each profession and the period covered by social insurance does not include contributions made below this income except in special circumstances. If you have worked part time, the length of employment is calculated proportionally on the basis of working hours set out by law. Under normal working conditions this is 8 hours per day. A detailed description of what is included in the length of employment for social insurance can be found in the chapter entitled 'Sickness Benefit' or on [the National Social Security Institute website](#).
- **Average daily income:** the average daily income for the 24-month period on the basis of which the daily cash benefit is calculated is defined as the total of the gross labour remuneration and/or insurable income and/or the income on the basis of which the cash benefit for temporary incapacity and/or pregnancy and childbirth and/or adoption of a child up to 5 years of age is calculated, divided by the total number of working calendar days for the same period.

Forms you may need to fill in

- [Application for pregnancy benefits](#).

Know your rights

The laws and web pages of the institutions which determine your rights can be found by following the links below. These are not European Commission pages and do not represent the opinion of the Commission:

- [National Social Security Institute](#);
- [Social Insurance Code](#).

European Commission publications:

- [Maternity/paternity benefits: the Bulgarian Social Insurance Institute](#);
- [Family benefit: Your rights abroad as a citizen of the EU](#).

Who do you need to contact

[National Revenue Agency](#)

- Telephone: +359 70018700
- Email: infocenter@nra.bg

- [Regional directorates of the National Revenue Agency](#)

[National Social Security Institute](#)

- Central Directorate of National Social Security Institute
- Boulevard Alexander Stamboliiski No 62-64
- 1303 Sofia
- Telephone: +359 29261010
- Email: noi@nssi.bg
- [Regional directorates of the National Social Security Institute](#)

[National Health Insurance Fund](#)

- 1407 ul. Krichim No 1
- 1407 Sofia
- Telephone: +359 80014800 / 29659121 / 29659387
- [Regional directorates of the National Health Insurance Fund](#)

Health

Long-term care

Here you will find information on your benefits and entitlements if you are taking care of people with disabilities.

The following are described:

- **monthly benefits for caring for children with disabilities;** (*месечни помощи за отглеждане на дете с увреждане*);
- **home care covered by the National Health Insurance Fund;**
- **benefits and allowances for caring for people with disabilities** (*добавки и помощи за грижа за хора с увреждания*).

In what situation can I claim?

You may receive benefits when you care for a person with a long-term disability who needs external care.

You may also receive benefits if you accompany a child or adult family member for medical examinations or treatment.

What conditions do I need to meet?

You are entitled to monthly benefits for caring for a child with a disability, whatever the family income. Long-term disability must be confirmed by the competent health agencies: the regional medical committee (TEMC) and the national medical committee (NEMC). These benefits do not depend on whether you are insured or not.

In order to receive free medicines and medical equipment for home treatment, your illness must be included in the list of illnesses covered by the National Health Insurance Fund for home treatment.

In order to receive benefits when you accompany a family member with a disability for treatment or for an examination, you have to have been insured for sickness or maternity for at least 6 months. In order to receive these benefits, you must have a sick note issued by your general practitioner. You are entitled to these benefits irrespective of whether you have to care for or accompany the patient in Bulgaria or abroad.

If you are an insured person, you are entitled to benefits for the following family members: your mother, father, grandmother, grandfather, great grandmother, great grandfather, children, grandchildren, great grandchildren from the direct line of descent and your husband or wife.

You are entitled to targeted monthly social benefits if you care for a seriously ill family member. Provision of these benefits depends on the monthly income of your family. It must be less than the established differentiated minimal income. The differentiated minimum income is set out in the table on the website of the Social Benefits Department.

What am I entitled to and how can I claim?

The time during which you care for a family member who permanently needs external care is taken into account in your pension entitlement.

Benefits for children with disabilities

The amount of the benefit for raising a child with disabilities is determined annually based on the Law on the State Budget.

- Mother of children up to 2 years of age with permanent disability of minimum 50% is entitled to an additional one-off allowance upon childbirth which in 2023 is BGN 100. The monthly benefit for raising a disabled child up to 2 years of age is BGN 200; The amount of the monthly allowance for children up to 18 years of age with permanent disability depends on the degree of disability:

over 90% - BGN 930;

from 70% to 90% - BGN 450;

from 50% to 70% - BGN 350;

- When the child is placed in professional foster families or the allowance is:

over 90% - BGN 490;

from 70% to 90% - BGN 420;

from 50% to 70 % - BGN 350 .

Home treatment covered by the National Health Insurance Fund

If the illness from which you suffer is included in the list, the National Health Insurance Fund pays partly or fully for the medical equipment, medicines and dietary foods required for home treatment. Medical products are provided upon prescription issued by the general practitioner or specialist. These prescriptions must contain a special code corresponding to the code in the list of illnesses. This list is updated once every year by the Minister of Health. This normally takes place by the end of March of the relevant year.

Benefits and allowances for caring for people with disabilities

Benefits for caring for or accompanying a sick family member are paid in the same manner as for sick leave.

Further information on how benefits are calculated is available in the chapter entitled 'Sickness benefits'.

These benefits can be used in the following cases.

- You are caring for or accompanying a sick family member aged over 18 years for medical examinations, tests or treatment in Bulgaria or abroad. You are then entitled to up to 10 calendar days in 1 calendar year;
- You are caring for or accompanying a sick child aged under 18 years for medical examinations, tests or treatment in Bulgaria or abroad. You are then entitled to up to 60 calendar days in 1 calendar year in total for all insured family members.

If you have reduced capacity to work or you are caring for a seriously ill person, the amount of benefits to which you are entitled is based on a formula. This is the difference between the differentiated minimum income (DMI) and the income of the persons or families from the preceding period.

For example, if you are a single parent and raising a child up to 3, the DMI is BGN 90 (120% * BGN 75). If the income from the previous month is BGN 30 the amount of the monthly allowance is BGN 60. People who have been granted permission for Ministry of Health funding for treatment abroad receive one-off benefits to cover daily and accommodation costs. These benefits may be for them and their companions if the costs are not included in the amount provided for treatment. You can find out more about the differentiated minimum income for your category on the [Social Directorates](#) website.

Jargon busters

- **Social insurance period:** calculated in hours, months and years. This takes into account the time during which you have worked as a full-time employed person if the insurance contributions for the remuneration received have been paid or are payable. A minimum social insurance income is defined for each profession and the period covered by social insurance does not include contributions made below this income except in special circumstances. If you have worked part time, the length of employment is calculated proportionally on the basis of working hours set out by law. Under normal working conditions this is 8 hours per day. Length of service for insurance purposes is different from total length of service.
- **Differentiated minimum income.** This is calculated by multiplying the guaranteed minimum income by a pre-determined coefficient. The coefficient is individually based and is related to age, health condition and social status. The DMI is used to determine who is entitled to targeted or monthly benefits.

Forms you may need to fill in

- [Application for social benefits](#)

Know your rights

The laws and web pages of the institutions which determine your rights can be found by following the links below. These are not European Commission pages and do not represent the opinion of the Commission:

- [List of illness for which treatment is covered by the National Health Insurance Fund.](#)

European Commission publications:

- [Family benefits: Your rights abroad as a citizen of the EU.](#)

Who do you need to contact?

National Health Insurance Fund

- Address: ul. Krichim No1
- 1407 Sofia
- National telephone line for information for the public: +359 80014800 (one impulse for analogue telephones, free from digital telephones). The duration of one consultation is 5 minutes.
- Telephone: +359 29659121 / 29659387 from analogue and mobile telephones.

Agency for People with Disabilities

- Ul. Sofronii Vrachanski No104-106
- 1233 Sofia
- Telephone: +359 29318095 / 28329073
- Fax: +359 28324162
- [Regional offices of the Agency for People with Disabilities](#)

Social Benefits Department

- Department for People with Disabilities and Social Services
- Boulevard Knyaginya Maria Luiza No 88
- 1202 Sofia
- Telephone: +359 28321005
- [Regional social benefits departments](#)

National Social Security Institute

- [Contact centre](#)
- Central Office of the National Social Security Institute
- Boulevard Alexander Stamboliiski No 62-64
- 1303 Sofia
- Telephone: +359 29261010
- noi@nssi.bg

Health care

This chapter will provide you with information on your health care entitlements in Bulgaria.

The following are described:

- **health insurance rights;**
- **European health insurance card;**
- **healthcare which does not depend on social insurance.**

In what situation can I claim?

If your [health insurance coverage is uninterrupted](#) you can benefit from [medical assistance](#) covered by the National Health Insurance Fund. Health insurance is mandatory for Bulgarian citizens and citizens of other countries who reside permanently in Bulgaria and do not have health insurance in another EU member country.

The [European health insurance card](#) certifies that you are entitled to use all emergency medical assistance in the EU and the EEA; the costs will be covered by Bulgaria. In order to use this right you must have uninterrupted health insurance coverage.

For those who are not insured, emergency assistance is covered by the Ministry of Health.

For children aged under 16 years, medical care is covered by the budget. Students aged under 26 years enrolled in a regular form of education are insured through the budget.

The National Health Insurance Fund provides financial and organisational assistance for treatment of children abroad if sufficiently effective treatment is not available in the country. The amounts are paid individually and depend on the child's illness and the cost of treating it.

What conditions do I need to meet?

You can find your health insurance status on the [National Revenue Agency](#) website.

If you live outside the EU, you must submit a declaration that you spend at least 183 days annually outside Bulgaria. This will relieve you of the liability to pay health insurance in Bulgaria.

If you have lived outside the EU and have not paid contributions in Bulgaria, you have two options for restoring your health insurance entitlements in the country:

- you pay health insurance contributions for 6 months, but you are not insured during this period;
- you pay a one-off health care insurance contribution for 12 months and your entitlements will be restored immediately.

When visiting your general practitioner or dentist, you must pay a user charge. For 2023, this charge was BGN 2.90 or BGN 1 for pensioners. User charges are payable for hospital treatment. For 2023, they are BGN 5.80 per day. The charge is only payable for the first 10 days in hospital.

A list of people exempt from payment of the user charge can be found on the [National Health Insurance Fund](#) website.

The European health insurance card is free of charge and is issued within 15 calendar days.

Health care benefits which do not depend on insurance are linked to the urgency of the required medical intervention or the need for illness prevention.

The National Health Insurance fund provides financial and organisational assistance for the treatment of children aged up to 18 years if:

- the required diagnostic and treatment procedures cannot be carried out in Bulgaria;
- treatment is for rare diseases not covered by the budget and outside the scope of mandatory health insurance;
- medical products are prohibited for use in Bulgaria;
- medical products indicated in the list of the fund cannot be obtained in Bulgaria;
- medical items are not covered by the National Health Insurance Fund or in accordance with the Integration of Persons with Disabilities Act;
- specialised medical apparatus and instruments are required for individual use;
- transplantation is required for organs and stem cells;
- transplantation cannot be carried out in Bulgaria.

What am I entitled to and how can I claim?

Health care

Your health care entitlements give you access to medical care in Bulgaria and all the medical care you require when you stay in EU and EEA countries. This means:

- access to high-quality medical care;
- primary outpatient care;
- specialised outpatient care;
- diagnostic tests;
- highly specialised medical activities;
- dental care;
- hospital care;
- medicines for home treatment;
- information on your health status and your treatment methods.

To use your health insurance entitlements, you must choose a general practitioner, also known as a personal doctor. He/she is the first step in your treatment and, if necessary, will refer you to a specialist. For this purpose, you will need a referral for consultation with a specialist. The system of clinical pathways is described in detail on [the National Health Insurance Fund](#) website. You can change or choose your general practitioner twice every year from 1 to 30 June and from 1 to 31 December. If you change your place of residence, you can choose your general practitioner on a temporary basis (for 1 to 6 months).

Students in a regular form of education up to the age of 26 are insured by the budget. Between completion of their secondary education and the start of their university education, however, they must cover their own social insurance contributions.

European health insurance card

The European health insurance card facilitates your access to medical care in EU and EEA countries. If medical care in the country in which you are located is free of charge, you are also entitled to free treatment on presentation of your card. The use of the European

health insurance card guarantees reimbursement of medical expenses in situ or after your return to Bulgaria. The treatment and its payment (and reimbursement) depends on the rules in the country in which you have had to use it.

The card is free of charge and is issued within 15 calendar days of submitting an application.

Health care not linked to health insurance

Even if you do not have health insurance, you are entitled to:

- emergency care;
- obstetric and gynaecological examinations and medical care for childbirth for uninsured women;
- in-patient psychological care;
- transplantation of organs, tissues and cells;
- mandatory treatment and/or mandatory isolation;
- expert assessments of the type and degree of long-term incapacity to work;
- medical transport;
- assisted reproduction.

All Bulgarian citizens and EU citizens are entitled to:

- vaccines for mandatory immunisation and re-immunisation;
- vaccines for special indications and in extraordinary circumstances;
- specific serums, immunoglobulins and other bio-products connected with the prevention of contagious illnesses;
- technical equipment for applying them;
- all anti-epidemic activities;
- access to health care activities included in national, regional and municipal health programmes.

Children (Bulgarian citizens and EU citizens) in care in health institutions are entitled to free medical and social care.

The Health Insurance Fund examines applications for financing treatment in the cases mentioned above. Amounts of money for treatment are paid on an individual basis in accordance with the child's illness and the cost of the treatment in a foreign hospital.

The finance application procedure is described on the [NHIF](#) website.

Jargon busters

- **Uninterrupted health insurance coverage:** your coverage is uninterrupted if fewer than three health insurance contributions are unpaid over the previous 60 months. If your employer or other person is obliged to pay your health insurance contributions, non-payment of health insurance contributions does not deprive you of your health insurance entitlements.
- **NHIF:** National Health Insurance Fund.
- **Clinical Pathways:** the system of requirements and instructions for medical specialists when treating patients. It makes it possible to account for and regulate the procedures carried out so that they can be paid by the National Health Insurance Fund.
- **EU and EEA:** European Union and European Economic Area. This includes Iceland, Switzerland, Lichtenstein and Norway.

Forms you may need to fill in

- [Registration form for the permanent choice of a general practitioner;](#)
- [Registration form for the temporary choice of a general practitioner;](#)
- [Application form for a European health insurance card;](#)
- [Procedure and documents required to apply for treatment abroad;](#)
- [Application procedure for financing treatment for children abroad.](#)

Know your rights

The laws and web pages of the institutions which determine your rights can be found by following the links below. These are not European Commission pages and do not represent the opinion of the Commission:

- [Health Insurance Act;](#)
- [Health Care Act;](#)
- [Ministry of Health;](#)
- [National Health Insurance Fund;](#)
- [European health insurance card.](#)

European Commission publications:

- <http://ec.europa.eu/social/main.jsp?catId=849&langId=en>.

Who do you need to contact?

National Health Insurance Fund

- Address: Ul. Krichim No 1
- 1407 Sofia

National telephone line for public information: +359 80014800 (one impulse for analogue telephones, free from digital telephones). The duration of one consultation is 5 minutes.

Telephone: +359 29659387 from analogue and mobile telephones.

Information for citizens relating to their health insurance entitlements in the European Community:

Telephone: +359 29659116

Information for medical treatment in Bulgaria and abroad:

Telephone: +359 2 965 9193

National Health Insurance Fund experts work from 9.00 to 17.30 from Monday to Friday.

Consultation centre for citizens relating to their health insurance entitlements in the European Community:

- Address: Lozenets, Ul. Krichim No 1
- 1407 Sofia

Consultation centre for citizens:

- Lozenets, Ul. Lyubata No 15
- 1407 Sofia

Consultation hours for citizens: 'Free Movement of People' - European regulations and bilateral agreements for social insurance.
Working days from 9.00 to 17.30.

[Offices issuing European health insurance cards](#)

Sickness benefits (sick pay)

Here you will find information on benefits for temporary incapacity to work due to a sickness (*обезщетения за временна неработоспособност поради общо заболяване*), otherwise known as sick pay.

In what situation can I claim?

Cash benefits for temporary incapacity to work, otherwise known as sick pay, compensate for lost income from your salary when you have to take sick leave. To be entitled to this benefit, you need to have been insured for sickness and maternity for **at least 6 months**. Insurance for this risk is mandatory if you are employed on the basis of a regular employment or fixed-term contract. Your right to benefits does not depend on whether your contributions have actually been paid or are due but have not been paid, but you have to be insured at the minimum wage at least. If you are self-employed, the contributions have to be paid.

You are exempt from the 6 months insurance obligation if you are aged below 18.

The length of paid insurance contributions may be interrupted or uninterrupted and may be with different employers.

In order to receive these benefits, you have to have a sick note issued by your general practitioner or a medical consultation committee.

If you are a self-insured person, you need to have chosen to be insured for sickness and maternity in order to be entitled to this benefit.

The length of your paid insurance contributions and your period of social insurance cover under the legislation of another state outside the EU with which Bulgaria has an international treaty are taken into account.

What conditions do I need to meet?

You are entitled to general sickness benefits if you are insured for sickness and maternity. In particular this means:

- workers and employees;
- judges, prosecutors, investigators, court bailiffs, registry judges, court employees, members of the Supreme Judicial Council and Inspectors at the Supreme Judicial Council Inspectorate;
- candidates for junior judge, junior prosecutor and junior investigator;

- armed forces personnel;
- members of cooperatives;
- managers and proxies of commercial companies and of sole traders and their branches;
- elected representatives;
- religious clerics in the Bulgarian Orthodox Church and other registered religious faiths;
- self-insured persons who have chosen to be insured for sickness and maternity;
- spouses who are self-insured persons voluntarily insured at their own expense for sickness and maternity;
- seafarers.

What am I entitled to and how can I claim?

The first 3 working days of the sick pay are covered by the employer for up to 70% of your daily gross remuneration for the month during which the incapacity to work occurs. For the following days, the daily general sickness benefits in cash for temporary inability to work amount to 80%, or 90% of your average daily gross labour remuneration or average daily insurable income on which social security contributions have been paid for the last 18 months before the incapacity to work occurs.

For example, if your doctor has prescribed 5 days home treatment and your gross salary is BGN 1,000, your daily salary for a month with 21 working days is BGN 47.60. For the first 3 working days of sick leave you will receive BGN 33.30 per day from the employer, or BGN 99.90. For the following 2 working days, the benefits are paid by the National Social Security Institute which will pay you BGN 76.20.

Daily cash remuneration for temporary incapacity to work due to sickness may not exceed your average net daily remuneration for the period for which the benefits are calculated.

Benefits are payable by bank transfer only. In accordance with European legislation, the amount may not be reduced due to administrative or bank fees.

Jargon busters

- **Social insurance period:** calculated in hours, months and years. This takes into account the time during which you have worked as a full-time employed person if the insurance contributions for the remuneration received have been paid or are payable. It includes periods of paid or unpaid leave for sickness, maternity birth or adoption of a child aged up to 2 years as well as 30 days for unpaid leave in 1 calendar year. It takes self-employment into account. A minimum insurable income has been set for each profession and the period covered by social insurance does not include contributions made below this income except in special circumstances. If you have worked part time, the length of employment is calculated proportionally on the basis of the working hours set out in law. Under normal working conditions this is 8 hours per day.

Forms you may need to fill in

- Sick note issued by your general practitioner or a medical consultation committee

Know your rights

The laws and web pages of the institutions which determine your rights can be found by following the links below. These are not European Commission pages and do not represent the opinion of the Commission:

- [Social Insurance Code](#);
- [Regulation for the calculation and payment of benefits for temporary incapacity to work](#).

European Commission publications:

- <http://ec.europa.eu/social/main.jsp?catId=849&langId=en>.

Who do you need to contact?

National Social Security Institute

- Central Office of the National Social Security Institute
- Bul. Alexander Stamboliiski No 62-64
- 1303 Sofia
- Telephone: +359 29261010
- Email: noi@nssi.bg
- [Regional offices of the National Social Security Institute](#)

Incapacity

Persons with disabilities

Here you will find information on all benefits and supplements to which you are entitled if you have a confirmed long-term disability.

The following are described:

- **allowances and invalidity pensions due to sickness** (*помощи и пенсии за инвалидност поради общо заболяване*);
- **supplement for external care in the event of more than 90% degree of disability** (*добавка за чужда помощ*).

In what situation can I claim?

You are entitled to an invalidity pension due to sickness if you have completely or partially lost your ability to work permanently or for an extended period. This pension is granted when your capacity to work has been reduced by 50% or more.

You are entitled to a invalidity pension due to sickness from the date the disability occurs. For partially sighted people who are blind from birth or prior to starting work, the pension is granted from the date of application.

Your invalidity pension is granted for the period of the disability. If your disability occurs after you have reached the age of entitlement for an old age pension, the invalidity pension, is payable until the end of your life.

- In addition to the invalidity pension due to sickness, the state public insurance system pays pensions for civil or military disability;
- Pensioners with a type and degree of disability exceeding 90% who need constant external care are entitled to a 75% supplement to their old age pension.

What conditions do I need to meet?

The entitlement conditions for an invalidity pension are linked to the reason of your disability.

Invalidity pension for sickness (*пенсия за инвалидност поради общо заболяване*)

To be entitled to an invalidity pension for sickness, you must have paid social insurance contributions for a particular length of time before your disability occurred. The period of social insurance contributions required to be entitled to invalidity pension is as follows:

- people up to 20 years of age who are partially-sighted from birth and people who lost their sight before starting work, regardless of their length of paid insurance contributions;
- up to 25 years of age: 1 year;
- up to 30 years of age: 3 years;
- more than 30 years of age: 5 years;
- people born with disability and people who became disabled before starting work are entitled to an invalidity pension if they have paid social insurance contributions for 1 year.

One-third of the above mentioned periods of social insurance contributions must be obtained in connection with actual working activity.

If you receive an old age pension you are not entitled to a pension for disability due to sickness.

Civil invalidity pension (*пенсия за гражданска инвалидност*)

You are entitled to a civil invalidity pension if you have lost your capacity to work while fulfilling your civil duty, e.g. if you were injured while volunteering to fight a natural

disaster. You are also entitled to this pension if you were injured or fell ill accidentally as a result of actions by the authorities while fulfilling their official duties.

The circumstances must be certified with a document issued by the mayor or an authorised person or, in the latter case, the head of the organisation which caused the disability.

Military invalidity pension (пенсия за военна инвалидност)

You are entitled to this pension if you have lost your capacity to work while on conscripted national service or reserve military service. You are also entitled to this pension if you were injured while assisting the Bulgarian armed forces and deceased persons during military service in operations or mission abroad.

Deceased persons and persons lost without trace are also entitled to this pension.

The external care supplement is due to pensioners with more than 90% permanent disabilities. The need for external care is determined by the condition of the person with disabilities: whether he/she is able to cope with daily activities alone.

What am I entitled to and how can I claim?

Invalidity pensions

Invalidity pension for sickness

The invalidity pension for sickness is calculated on the basis of a formula connected with your length of paid insurance contributions and your degree of disability. [The formula for calculating pensions can be found in this calculator.](#)

The minimum amount of the pension for sickness cannot be less than a percentage of the minimum old age pension which in 2023 is determined as BGN 467.

Percentage of disability	From 50% to 70.99%	71% to 90%	More than 90%
Percentage of the minimum pension for old age and length of insurance contributions	85% or BGN 396.95	105% or BGN 490.35	115% or BGN 537.05

Civil invalidity pension

Public service invalidity pensions are calculated as a percentage of the social old age pension which is set at BGN 247. If you are covered for all social insurance risks or only for accidents at work or occupational disease, the pension is calculated in the same way as for accidents at work or occupational disease if this more favourable for you.

Percentage of disability	From 50% to 70.99%	71% to 90%	More than 90%
Percentage of social old age pension	115% or BGN 284.05	140% or BGN 345.8	150% or BGN 370.5

Military invalidity pension

Military invalidity pension is calculated as a percentage of your social old age pension, a percentage of your lost capacity to work and your military rank:

For privates and sergeants:

Percentage of disability	From 50% to 70.99%	71% to 90%	More than 90%
Percentage of social old age pension	115% or BGN 284.05	140% or BGN 345.8	150% or BGN 370.5

For officers:

Percentage of disability	From 50% to 70.99%	71% to 90%	More than 90%
Percentage of social old age pension	120% or BGN 296.4	150% or BGN 370.5	160% or BGN 395.2

In the latter case, if you have been insured against all social insurance risks or only for accidents at work or occupational disease before your conscription or reserve military service, military invalidity pensions are calculated in the same way as pensions for accidents at work or occupational disease if this is more favourable for you. In this case, the years of paid insurance contributions and the income on which the insurance contributions are paid are taken into account when calculating the pension.

Invalidity benefits due to sickness

Invalidity supplements provided by the Social Assistance Agency are granted in accordance with the percentage of disability and are connected with your special needs.

Supplement for external care

Pensioners with a degree of disability of more than 90% who need constant external care are entitled to a 75% supplement of the social old age pension. For 2023, this supplement is BGN 185.25. In addition, the pensioner's companion is entitled to two free trips on Bulgarian State Railways every year.

People with disabilities, depending on their needs, are entitled to comprehensive, individual needs assessment. The assessment examines the disabled person's functional difficulties related to their health concern as well as the existence of barriers in the performance of daily and other activities, as well as the type of support. Persons with disabilities are entitled to financial support depending on their needs as defined in individual assessment.

The financial support paid by the Agency for Social Assistance is intended to offset the costs associated with overcoming the difficulties caused by the type and degree of the disability. It consists of two components:

1. monthly financial support according to the degree of disability;
2. targeted benefits according to the type of disability.

Disability allowances provided by the Social Assistance Agency are provided in accordance with the level of disability and are related to your special needs.

Since 01.01.2019, the amount of the benefits has been linked to the poverty line for the year in question: BGN 504 in 2023.

Periodic supplements: monthly financial support:

People with permanent disability over 18 years of age have the right to monthly financial support as follows:

1. from 50% to 70.99% degree of disability – 7% of the poverty line - BGN 35.28 in 2023;
2. from 71% to 90% degree of disability - 15% of the poverty line - BGN 75.60 in 2023;
3. over 90% degree of disability - 25% of the poverty line - BGN 126 for 2023;
4. over 90% degree of disability with a partial entitlement for external care, who receive an invalidity pension due to a sickness or due to an accident at work or occupational disease - 30% of the poverty line - BGN 151.20 for 2023;
5. over 90% of the disability with a partial entitlement for external care, who receive a social invalidity pension - 57% of the poverty line - BGN 287.28 for 2023.

Persons with permanent disabilities from 18 to 20 years of age are entitled to monthly financial support if they do not receive monthly allowance under Art. 8d of the Family Allowances Act for Children.

Targeted aid is provided for:

1. Purchase of a personal motor vehicle - Persons with permanent disability who have mobility difficulties in traveling are entitled to a personal motor vehicle up to four times of the poverty line for the respective year (BGN 2,016 for 2023). The average monthly income per family member for the past 12 months has to be equal to or below poverty line. They must have over 90% type and degree of disability or permanently reduced working capacity defined by the medical authorities and be working or studying.
2. Home adaptation - people with over 90% permanently reduced working capacity or type and degree of disability as well as children with a certain type and degree of disability who depend on wheelchair for mobility are entitled to targeted assistance of double the poverty line (BGN 1,008 per 2023). The average monthly income per family member for the past 12 months has to be equal to or below the poverty line.
3. Balneotherapy and/or rehabilitation services - Persons with permanent disabilities with over 90% reduced working capacity, permanently disabled children and war invalids are entitled to targeted balneal care and/or rehabilitation services in accordance with the specific needs of the people concerned. Those can be provided once a year subject to medical prescription by a medical specialist. The benefit is up to 80% of the poverty line for that year (BGN 403.20 in 2023), but not more than the actual costs incurred under the submitted documents. Persons relying on care are entitled to have the costs of accompanying carer covered. Same coverage as per the beneficiary applies. The funding through targeted aids is granted when, for the same period, same services have not been already used as part of another social protection scheme. The benefit is paid against the documentation declaring the costs of the balneal treatment and/or rehabilitation services.
4. Rental of municipal housing - Single persons with permanent disability and single parents of a child with permanent disability have the right to use benefit rely on the municipal housing for accommodation purposes. The rental contract has been concluded with them or with their legal representatives, when relevant.

The targeted assistance is in the amount of the legally defined rent under the Municipal Property Act and it is transferred from the Social Assistance Directorate after the respective municipality provides the Directorate with documentation declaring the costs.

Free annual electronic vignette - persons with in minimum 50% reduced working capacity or type and degree of disability and persons or families raising children with permanent disabilities up to 18 years of age and up to the completion of secondary education, but not later than 20 years of age are exempt from paying vignette fees for the use of public roads with a private or co-owned community car with an engine capacity of up to 2000 cubic centimetres and power up to 117.64 kW (160 hp).

The Personal Assistance Act regulates the terms and conditions for the provision and use of personal assistance in Republic of Bulgaria. Personal assistance is a mechanism to support users for full participation in society, to carry out activities corresponding to the personal, domestic or social needs and to overcome the obstacles to the functional limitations. The mechanism is based on state-guaranteed financial support, individual needs and the personal choice of the personal assistance user.

The personal assistance users are:

1. people with permanent disabilities who are entitled to assistance by another person, with ascertained type and degree of disability or degree of permanently reduced working capacity;
2. children, who are not entitled to assistance by another person, with ascertained type and degree of disability or degree of permanently reduced working capacity of 90% and over.

A personal assistance user may also be a user of community social services, excluding residential care social services.

Personal assistance is provided on the basis of an individual needs assessment and a referral (direction) for the provision of this support. For persons who have expressed

interest to use personal assistance Social Assistance Directorate will assess their individual needs.

The number of hours for personal assistance is determined by the individual assessment, based on four levels of dependence on intensive support:

1. first degree - up to 15 hours per month ;
2. second degree - up to 42 hours per month;
3. third degree - up to 84 hours per month;
4. fourth degree - up to 168 hours per month .

Persons with minimum 71% degree of permanently reduced working capacity or type and degree of disability, children under 16 with permanent disability and war invalids are entitled to free travel twice a year – national return ticket using the railway. The right also applies to the accompanying carer/personal assistant/guide dog when traveling with them.

The funds intended for payment of an hour of work under the personal assistance mechanism include:

1. a factor of 1.4 of the amount of the minimum hourly salary established in the country for the respective year;
2. additional employment remuneration for work experience and professional experience, and
3. social security and health insurance contributions on behalf of the employer.

Until 31 December 2022, a 1.2 coefficient shall apply under point 1.

Jargon busters

- **GMI:** guaranteed minimum income considered to be required to cover basic needs
- **Social insurance period:** calculated in hours, months and years, this takes into account the time during which employees have worked full-time if the insurance contributions for the remuneration received have been paid or are payable. A minimum insurable income is set for each profession and the period covered by social insurance does not include contributions made below this income except in special circumstances. If you have worked part time, your length of service for insurance purposes is calculated proportionally on the basis of working hours as set out in law. Under normal working conditions this is 8 hours per day. Length of service for insurance purposes is different from total length of service.

Forms you may need to fill in

- [Application - declaration for the preparation of the individual needs assessment;](#)
- [Application-declaration for free annual electronic vignette;](#)
- [Self-assessment form.](#)

Know your rights

The laws and web pages of the institutions which determine your rights can be found by following the links below. These are not European Commission pages and do not represent the opinion of the Commission:

- [Social Insurance Code;](#)
- [National Social Security Institute;](#)
- [Social Assistance Agency;](#)
- [Agency for People with Disabilities;](#)

- [Ministry of Labour and Social Policy](#);
- [Act for Persons with Disabilities](#);
- [Social Assistance Act](#);
- [Medical Devices Act](#);
- [Act for personal assistance](#).

European Commission publications:

- <http://ec.europa.eu/social/main.jsp?catId=849&langId=en>.

Who do you need to contact?

Agency for People with Disabilities

- Ul. Sofronii Vrachanski No 104-106
- 1233 Sofia
- Telephone: +359 29318095 / 28329073
- Fax: +359 28324162
- [Regional offices of the Agency for People with Disabilities](#)

[Social Assistance Agency](#)

- Ul. Triaditsa No 2
- 1051 Sofia
- Telephone: +359 28119607
- Hotline: +359 29350550
- ok@asp.government.bg

Social Assistance Department

- People with Disabilities and Social Services Department
- Bul. Knyaginya Maria Luiza No 88
- 1202 Sofia
- Telephone: +359 28321005
- [Regional social assistance departments](#)

National Social Security Institute

- [Contact Centre](#)
- Central Office of National Social Security Institute
- Bul. Alexander Stamboliiski No 62-64
- 1303 Sofia
- Telephone: +359 29261010
- noi@nssi.bg
- [Regional offices of the National Social Security Institute](#)

Temporary incapacity to work

Here you will find information on your benefit entitlements if you are temporarily unable to work.

The following are described:

- **cash benefits for a suitable job placement** (*обезщетение при трудоустрояване*);
- **benefits for care for a sick family member** (*обезщетение за гледане на болен член на семейството*);
- **rehabilitation and preventive care** (*обезщетения за профилактика и рехабилитация*).

In what situation can I claim?

Cash benefits for sickness are described in detail in the chapter entitled 'Sick pay'. [Placement in a suitable job](#) is required when you cannot meet your work obligations due to pregnancy, sickness, accident or occupational disease. There are three types of benefits for placement in a suitable job in the case of incapacity to work:

- for sickness, accident at work or occupational disease;
- for pregnancy or breastfeeding;
- for advanced in-vitro treatment.

You are also entitled to benefits when you have to care for a family member or child who is hospitalised or needs medical examination.

You are entitled to cash benefits if your general practitioner confirms that you need preventive care or rehabilitation.

What conditions do I need to meet?

In order to receive each of the benefits, you must have been insured for 6 consecutive months. Whether your insurance payments have been paid or are due for payment is immaterial. This rule does not apply if disability is a result of an accident at work or an occupational disease.

Placement in a suitable job

In the event of sickness, accident at work or occupational disease

If your state of health prevents you from continuing in your current work, while other suitable work or the same work under adapted conditions - and without endangering your health, is manageable, you are entitled to be transferred into such suitable job. This takes place on recommendation of the health authorities: your general practitioner, a medical consultation committee, regional medical committee or national medical committee.

For pregnancy or breastfeeding

If you are pregnant or breastfeeding or you are at an advanced state of in-vitro treatment and are performing unsuitable work for your condition, your employer must temporarily adapt your work place and/or working time. If this is not possible, your employer must transfer you to another suitable job.

Placement in a suitable job takes place on the basis of a recommendation from the health authorities and is approved via a medical certificate.

The medical certificate for placement in a suitable job is issued by your general practitioner or obstetric gynaecologist.

Care for a sick family member

In addition to the condition that you must have been insured for sickness and maternity for at least 6 months, you must also have a medical certificate issued by your general practitioner or a relevant specialist.

Rehabilitation and preventive care

Persons insured for maternity and sickness are entitled to cash benefits for preventive care and rehabilitation.

If you are not insured, but receive invalidity pension, you are also entitled to these benefits. The entitlement is also conditioned by a decision confirming the entitlement issued by the Territorial Expert Medical Committee (TEMC) or National Expert Medical Committee (NEMC).

If you are only insured for accidents at work and occupational disease, you are entitled to assistance if preventive care and rehabilitation are necessary due to an accident at work or occupational disease.

What am I entitled to and how can I claim?

Placement in a suitable job

Cash benefits are calculated on the basis of your average daily remuneration for the last 18 months. If you have paid insurance in another EU Member State within these 18 months, only the monthly insurance contributions paid in Bulgaria are taken into account. The benefits are equal to the difference between the average daily wage for this period and your salary for the period of placement in a suitable job.

The gross salary only includes the remuneration for which insurance contributions are payable for sickness and maternity. These are the basic working wage, supplements in accordance with Labour Code categories, night shift work, hazardous work, remuneration for paid leave, etc.

The average daily wage after placement in a suitable job is calculated by dividing the wages received during a calendar month by the number of days worked. Paid leave is included in the number of days worked.

The number of days worked after placement in a suitable job does not include days of temporary incapacity to work, pregnancy and childbirth, care for a small child and unpaid leave. This does not depend on whether these periods count in the length of paid insurance contributions or not.

If you received less than the minimum wage (BGN 780 for 2023) prior to placement in a suitable job, the benefits will be equal to this difference. In this case, the amount of your salary after placement in a suitable job is immaterial.

These benefits are paid for the period during which you have been placed in a suitable job, but for no more than 6 months.

Benefits for placement in a suitable job in the event of pregnancy are payable from the day of placement in a suitable job until the beginning of leave for pregnancy and childbirth. In the case of breastfeeding, the benefits are payable for the entire period of placement in a suitable job, while the mother is breastfeeding.

In the case of placement in a suitable job due to an advanced stage of in-vitro treatment, the benefits are payable for no more than 20 calendar days.

Care for a sick child

If you have to care for a sick child, you are entitled to the same benefits as for sickness. The first 3 working days of sick leave are covered by the employer, who must pay you 70% of your gross daily remuneration for the month during which you are on sick leave.

The following working days are payable by the National Social Security Institute and are equivalent to 80% of your gross salary.

You can use these benefits during the following periods:

- for a child aged up to 18 years suffering from a contagious illness, you are entitled to compensation and leave until the end of the quarantine period;
- for a sick child aged up to 3 years and hospitalised together with you, the benefits cover the time you spend in hospital;
- for a healthy child up to 12 years of age sent home from a children's institution or school due to quarantine of the institution or school or of separate part or class in it, or due to quarantine of the child, you are entitled to benefits for the period of the quarantine.

Rehabilitation and preventive care

You are entitled to cash benefits for preventive treatment and rehabilitation once per calendar year for a 10-day stay in hospital.

These cash benefits cover the following:

- Expenditure for no more than four basic diagnostic and therapeutic procedures per day. These include examinations and tests. In addition, the prices must be approved by the Supervisory Board of the National Social Security Institute.
- Expenses for overnight accommodation at a price approved by the Supervisory Board of the National Social Security Institute, without additional payment from you.
- Partial food benefits: BGN 7.00 per day. For the day of admission and the day of discharge, the National Social Security Institute pays a total of BGN 7.00 in partial cash benefits for food.

In order to receive cash benefits for rehabilitation and preventive care, you must receive all three types of benefits.

You must make your own reservations for admission to preventive care and rehabilitation. You must then find out what additional prices you have to pay for food, since the National Social Security Institute only pays the defined amount.

Jargon busters

- **NSSI:** National Social Security Institute.

Forms you may need to fill in

- [Required documents for receiving a certificate for rehabilitation and preventive care;](#)
- For benefits and leave for care for a sick child, you need a medical certificate issued by your general practitioner or medical consultation committee.

Know your rights

The laws and web pages of the institutions which determine your rights can be found by following the links below. These are not European Commission pages and do not represent the opinion of the Commission:

- [Conditions for entitlement to cash benefits for rehabilitation and preventive care;](#)
- [List of prices and rehabilitation and preventive care providers approved by the National Social Security Institute;](#)
- [Conditions for receiving benefits for caring for a sick child](#)

- [Regulation on placement in a suitable job.](#)

European Commission publications:

- <http://ec.europa.eu/social/main.jsp?catId=849&langId=en>.

Who do you need to contact?

National Social Security Institute

- [Contact Centre](#)
- Central office of the National Social Security Institute
- Bul. Alexander Stamboliiski No 62-64
- 1303 Sofia
- Telephone: +359 29261010
- noi@nssi.bg
- [Regional directorates of the National Social Security Institute](#)

Accidents at work and occupational diseases

Here you will find information on your benefit entitlements in the event of accidents at work and occupational diseases.

The following is described:

- **benefits for accidents at work and occupational diseases.**

In what situation can I claim?

An accident at work is damage to health or death resulting from the implementation of work under a labour/employment relationship. This includes the following:

- Any sudden damage to health which may take place during, in connection with or as a result of work carried out and of any work done in the interests of the company;
- Damage to health or death during or on the way to and from work. This is any accident which may occur on the way to or back from your workplace to:

your home;

the place where you normally eat during the working day;

the place from where you receive your salary.

An occupational disease is a disease which may take place due to harmful factors in the working environment or the labour process. These diseases are explicitly listed in the [list of occupational diseases](#). Diseases which are not included in this list are also recognised if it is confirmed that they are caused by normal working activities.

Occupational illness also includes its complications and later consequences.

What conditions do I need to meet?

In order to have entitlement to benefits for accidents at work and occupational diseases, you must be insured against accident at work and occupational diseases risks. Social insurance for these risks is mandatory for the following.

- Workers and employees hired to work for one or more employers. The social insurance does not depend on the nature of the work, the payment method or the source of finance;
- State employees;

- Judges, prosecutors, investigators, court bailiffs, registry judges, court employees, members of the Supreme Judicial Council and Inspectors at the Supreme Judicial Council Inspectorate;
- Armed forces personnel in accordance with the Defence and Armed Forces Act of the Republic of Bulgaria;
- Members of cooperatives exercising labour activities who receive remuneration from the cooperative;
- Executors of contracts for the management and control of commercial companies, sole traders, unincorporated companies, official receivers and liquidators;
- Persons in elected positions;
- Religious clerics of the Bulgarian Orthodox Church and other registered religious faiths;
- Candidates for junior judges, junior prosecutors and junior investigators.
- Seafarers.

Invalidity pensions are granted for accidents at work and occupational diseases if you have lost 50% or more of your capacity to work due to an accident at work or occupational diseases. Conditions for retirement pensions are more favourable than for invalidity pensions due to sickness. This pension does not depend on your period of social insurance cover.

What am I entitled to and how can I claim?

The procedures for confirming an [accident at work](#) or occupational diseases can be found on the website of the National Social Security Institute. If you are injured as a result of an accident at work or occupational diseases, you are entitled to medical assistance, medicines, medical equipment and technical aids from the health care system and the social benefits system.

In the event of an accident at work or occupational disease, insured persons or their successors are entitled to the following cash benefits and pensions from the state social insurance fund:

- **cash benefits for temporary incapacity to work: sick pay** (*парично обезщетение за временна неработоспособност*);
- **cash benefits for placement in a suitable job** (*обезщетение за трудоустрояване*);
- **a personal or inheritable invalidity pension** (*лична или наследствена пенсия за инвалидност*);
- **cash benefits for preventive care and rehabilitation** (*обезщетения за профилактика и рехабилитация*);
- **a one-off benefit in the case of death** (*еднократна помощ при смърт*).

The amounts are higher than those for sickness and include:

- Cash benefits for temporary incapacity to work (sick pay) amounting to 90% of the average daily salary, for the last 18 months of paid insurance contributions;
- Cash benefits for placement in a suitable job. The daily amount of benefits is equal to the difference between the daily salary for the last 18 months, but no more than the maximum monthly insurable income. The benefits may not exceed your salary after placement in a suitable job;
- A personal or inherited invalidity pension due to an accident at work or occupational disease. The formula for calculating your pension for an accident at work and occupational disease can be found [here](#).

The pension cannot be lower than a percentage of the minimum old age pension and social insurance cover period pension, which for 2023 is BGN 467.

Percentage of disability	From 50% to 70.99%	71% to 90%	More than 90%
Percentage of the minimum pension for old age and social insurance cover period	100% or BGN 467	115% or BGN 537.05	125% or BGN 583.75

- Cash benefits for preventive care and rehabilitation: expenditure on a total of four basic daily diagnostic and therapeutic procedures (including examinations and tests). Funds are provided for overnight accommodation at a price approved by the Supervisory Board of the National Social Security Institute without additional payment. Cash benefits for rehabilitation include partial payment for food: BGN 7.00 per day. For the day of admission and the day of discharge, the National Social Security Institute pays a total of BGN 7.00 in partial cash benefits for food. You are entitled to cash benefits for preventive treatment and rehabilitation once per calendar year for a 10-day stay in hospital.

Jargon busters

- **Unincorporated companies:** companies under the Obligations and Contracts Act that are not legal entities, but to which tax legislation ascribes certain rights and obligations. An example of such a company is a solicitor's practice.

Forms you may need to fill in

- [Forms for confirmation of accidents at work or occupational diseases by a medical consultation committee.](#)

Know your rights

The laws and web pages of the institutions which determine your rights can be found by following the links below. These are not European Commission pages and do not represent the opinion of the Commission:

- [Social Insurance Code;](#)
- [National Social Security Institute;](#)
- [Procedure for the recognition of accidents at work;](#)
- [Procedure for the recognition of occupational diseases.](#)

European Commission publications:

- [Death grants: Your rights abroad as a citizen of the EU.](#)

Who do you need to contact?

National Social Security Institute

- [Contact Centre](#)
- Central Office of the National Social Security Institute
- Bul. Alexander Stamboliiski No 62-64
- 1303 Sofia
- Telephone: +359 29261010
- noi@nssi.bg
- [Regional offices of the National Social Security Institute](#)

Old-age and survivors

Pensions

Here you will find information on your pension rights.

The following are described:

- **pension for periods of social insurance and old age** (*пенсия за осигурителен стаж и възраст*);
- **early retirement pension** (*пенсия за ранно пенсиониране*);
- **social old age pension** (*социална пенсия за старост*).

In what situation can I claim?

You acquire the right to pension for your period of social insurance cover and old age when you reach a given age, which is different for men and women, and attain a given period of social insurance cover.

If you do not have the required period of social insurance cover for a pension, you acquire it when you reach the age of 67 years and a period of social insurance cover of at least 15 years.

If you acquire the right to a pension during the previous year but do not retire, you do not lose your entitlement. You can retire during the following years, whether there are changes in the conditions for retirement or not.

Your entitlement to early retirement depends on the category of the work you perform. Armed forces personnel, certain state employees, investigators, some firefighters and divers retire younger than the standard retirement age. They acquire the right to a pension after accumulating a given period of social insurance cover in these professions. [You can find information on each profession here.](#)

You have the right to a social pension for old age at the age of 70 if your family income is below a given minimum amount and if you do not receive another pension including from another country.

What conditions do I need to meet?

Pension for period of social insurance and old age

For retirement in 2023, women need to be 62 years old and to have a period of social insurance of 36 years and 4 months. For men the age is 64 years and 6 months and a period of social insurance of 39 years and 4 months. Since 1 January 2016, the required retirement age and periods of insurance has been gradually increasing till reaching 65 years of age for both genders and 40 years periods of insurance for men and 37 for women. [The information is set out in detail in a table on the National Social Security Institute website.](#)

If you do not have the required period of social insurance for a pension, you acquire the right when you reach the age of 67 years and have a period of social insurance of at least 15 years.

As of 1 January 2016, people with sufficient periods of insurance may acquire the right to a pension one year before they reach retirement age. The pension will be permanently reduced by 0.4% for each month before the person reaches retirement age.

Specific provisions exist for certain professions:

- Regular servicemen acquire a right to a pension upon reaching 54 years of age if they have 27 years of employment, two thirds of which actually served as regular military service;
- Officers and civil servants of the Ministry of Interior and of the State Agency for National Security, civil servants according to the Law on Special Reconnaissance

Means and the Law on Execution of Penalties and Detention as well as the civil servants from the Directorate-General for Security acquire a right to a pension upon reaching 54 years of age if they have 27 years of service, two thirds of which actually served as civil servants in particular departments;

- Persons mentioned above who have served 15 years as flight crew, parachutists, crew of underwater vessels and underwater diving crew are entitled to a pension upon reaching 44 years of age;
- Civil servants from the Directorate-General for Fire Safety and Civil Protection acquire a right to a pension upon reaching 54 years of age if they have 27 years of service, two thirds of which actually served as civil servants in particular departments;
- Ballet dancers acquire a right to a pension upon reaching 44 years if they have 25 years of insurance in the profession.

From 1/1/2016 the retirement age is being gradually increased until it reaches 55 (bullets 1, 2 and 4), respectively - 45 years of age (bullets 3 and 5).

Early retirement

Labour categories are [set out in a regulation](#) and are connected with labour conditions, e.g. if you worked in mines, as a pilot or in metallurgy. There are two schemes:

Pension from professional pension funds

As of 01 January 2016, people insured in a professional pension fund who have not chosen to be insured solely in the Pension Fund of the State Public Insurance (first pillar), are entitled to a fixed-term professional pension paid from professional pension funds provided the following conditions are met:

- they have completed at least 10 years of insurance under the first category of labour after 31/12/1999 and still have 10 years to go before they reach retirement age;
- they have completed at least 15 years of insurance under the second or first and second category of labour after 31/12/1999 and still have 5 years to go before they reach retirement age.

The supplementary fixed-term professional pension shall be paid until the person reaches the standard retirement age.

Pension from Pension fund (first pillar)

If persons have not acquired the right to a pension paid by professional pension fund or have chosen to be insured solely in the Pension Fund of the State Public Insurance (first pillar), they are entitled to a life-long pension paid by National Social Insurance Institute upon following conditions:

- persons have completed at least 10 years of insurance under the first category of labour and has reached the age of 50 years and 4 months for women and 54 years and 10 months for men provided that the sum of periods of insurance and age is equal to 94 for women and 100 for men. Since 31/12/2015 the retirement age has been increased by 2 months for men and 4 months for women per calendar year until reaching 55;
- persons have completed at least 15 years of insurance under the second category of labour and has reached the age of 55 years for women and 58 years and 10 months for men provided that the sum of periods of insurance and age is equal to 94 for women and 100 for men. Since 31/12/2015 the retirement age has been increasing by 2 months for men and 4 months for women per calendar year until reaching 60 years of age.

Teachers are entitled to an early pension if it is paid from the Teachers' Pension Fund. Entitlement to this pension is subject to both of the following conditions:

- 58 years and 10 months of age for women and 61 years and 5 months for men. Since 1 January 2018 the required retirement age has been gradually increasing till reaching 62 for both genders;
- a teaching service of 25 years and 8 months for women and 30 years and 8 months for men.

Social pension for old age

You have the right to a social pension when you reach 70 years of age, if the annual income per member of your family is less than the guaranteed minimum income for the previous 12 months and if you do not receive another pension including from another country. For 2022, the guaranteed minimum income is BGN 75 per month. Annual income per family member does not include:

- supplements for external care for disabled persons, compensation, indexation and one-off pension supplements;
- social benefits;
- family benefits for children and monthly supplements for persons with disabilities.

What am I entitled to and how can I claim?

Pension for period of social insurance and old age

Pensions for old age and period of social insurance cover are calculated on the basis of a formula with the following determining factors: period of social insurance cover and the income for which insurance contributions have been paid over these years.

The amount of the pension = (the income on the basis of which it is calculated) x (period of social insurance cover/100).

In the event of incomplete length of service, the months are divided by 12 and the result obtained is rounded to two decimal places.

You can read more about the calculation of pensions on the [National Social Security Institute website](#) which describes in detail how each of the components of the formula is calculated.

The minimum amount of pensions for periods of social insurance and old age is determined every year and is BGN 370 for 2022. For people aged at least **66 years and 10 months who have retired with a real 15-year period of social insurance cover**, the minimum amount of the pension is 85% of the minimum pension amount for period of social insurance and old age, or BGN314.50. The minimum pension is identical for men and for women.

People born after 31 December 1959 are compulsory insured in a universal pension fund if they have not chosen to be insured solely in the Pension Fund of the State Public Insurance (first pillar). This provides an entitlement to a second additional pension when the person acquires the right to a pension for periods of insurance and old age. In addition, you are entitled to a one-off payment of up to 50% of the amounts accumulated on your individual account in the event that you lose more than 89.99% of your capacity to work. Additional mandatory pension insurance entitles you to a one-off or deferred payment of the amounts to the successors of a deceased person and pensioner.

Early retirement

People who work under difficult labour conditions (category I and II) and in particular professions are entitled to a pension from the National Social Security Institute pension fund or from professional pension fund.

People who have worked in labour category 1 and 2 since the beginning of 2000 must also be insured in professional pension fund managed by a pension insurance company. This insurance provides entitlement to an early pension payable by the company which manages

the fund until you reach the required age for a social insurance cover period/old age pension. Contributions to these funds accumulate in an individual account for each insured person. As of 1 January 2015, people can choose to be insured in both Professional Pension Fund and the Pension Fund of the State Public Insurance or solely in the Pension Fund of the State Public Insurance. The conditions are described in detail in the National Social Security Institute table.

[Teachers are entitled to early retirement under special conditions.](#) Pensions for early retirement are reduced by 0.1% for each month below the retirement age for social insurance cover period/old age pensions. On reaching the required age, the social insurance cover period/old age pension is paid in full from the general pensions fund.

Social old age pension

The social old age pension amounts to BGN 170.

Jargon busters

- **Professional pension fund:** a fund managed by a pension insurance company for mandatory additional pension insurance. Employers' contributions accumulate in an individual account set up by the employer for people working in labour categories I and II. You receive a limited occupational pension from this individual account on the basis of a contract between you and the pension company. This lays down the amount of the pension and the payment method for the period until you acquire the right to a social insurance cover period/old age pension from the state social security fund;
- **Universal pension fund:** a fund managed by a pension insurance company for mandatory additional pension insurance. Employers' and employees' contributions accumulate in an individual account for people born after 31 December 1959;
- **Occupational pension schemes:** rules for additional voluntary pension insurance which are mandatory in the case of a collective agreement or collective labour contract.

Forms you may need to fill in

- [Procedure and required documents for payment of pensions.](#)

Know your rights

The laws and web pages of the institutions which determine your rights can be found by following the links below. These are not European Commission pages and do not represent the opinion of the Commission:

- [Social Insurance Code;](#)
- [National Social Security Institute.](#)

European Commission publications:

- [Retirement abroad; Your rights abroad as a citizen of the EU.](#)

Who do you need to contact?

National Social Security Institute

- [Contact Centre](#)
- Central Office of the National Social Security Institute
- Bul. Alexander Stamboliiski No 62-64
- 1303 Sofia
- Telephone: +359 29261010

- noi@nssi.bg
- [Regional offices of the National Social Security Institute](#)

Survivors' pension

Here you will find information on your pension and supplement entitlements as an inheritor.

The following are described:

- **one-off benefit in the event of the death of an insured family member;**
- **survivors' pension** (*наследствена пенсия*);
- **supplement from the pension of a deceased husband/wife** (*добавка от пенсията на починал съпруг/а*).

In what situation can I claim?

The spouses, children and parents of the deceased are entitled to a one-off benefit in the event of death of an insured family member. This one-off payment may be claimed within a period of 3 years from the first day of January following the year of death.

In the event of death of an insured person or pensioner, their family is entitled to part of their pension. It may be the same pension as that received when the person was alive, or that which the deceased person would have received. This is called a survivors' pension. The following family members are entitled to a survivors' pension: the children, husband or wife and parents of the deceased person.

The supplement from a pension or pensions payable to a living spouse is different from a survivors' pension. This supplement cannot be received at the same time as a survivors' pension.

What conditions do I need to meet?

A [one-off benefit in the case of death](#) is payable to the family of a deceased person who was insured at the date of death, regardless of the risks against which they were insured. The spouses, children and parents are entitled to a one-off benefit. They can receive a one-off benefit regardless of whether they are pensioners, school pupils, students or at work. Whether they are insured is immaterial. The parents of the deceased person are entitled to this benefit whether they were supported by them or not.

[Survivors' pensions](#) are granted to the children, parents or spouse of the deceased person.

Children are entitled to this pension:

- until they reach the age of 18 years;
- if they are students: until the age of 26 years;
- if they are disabled before they reach 18 years of age (or 26 if they are students) - they retain their entitlement to a survivors' pension;
- if they were born in wedlock, adopted or born out of wedlock.

Children must provide certification that they are studying at the beginning of each school year. This certificate is issued by their educational establishment. You are entitled to a pension whether you study in Bulgaria or abroad. If you have to interrupt your studies due to sickness, pregnancy or care for a small child, you retain your pension entitlement if you comply with the rules of the relevant educational establishment. The pension will be paid for a total of 2 years of interrupted education.

Spouses are entitled to a survivors' pension 5 years earlier than the required age for a social insurance period and old age pension. If the surviving spouse is unable to work, the survivors' pension is paid regardless of their age.

The parents of the deceased person are entitled to a survivors' pension if they have reached pensionable age, but do not receive the pension. If the person has died during compulsory military service or during military service in operations or mission abroad, the parents are entitled to a survivors' pension regardless of their age, along with their personal pension.

Compulsory military service was abolished in Bulgaria in 2008.

[A supplement from the pension or pension of a deceased spouse](#) is payable to pensioners who are spouses of the deceased person and is referred to as a bereavement supplement. The supplement amounts to 26.5% of the pension or total sum of pensions received by the deceased spouse.

If the deceased person does not receive a pension, the supplement is calculated on the basis of the pensions which they would have received if they had been alive.

You are not entitled to this supplement if you receive a survivors' pension.

What am I entitled to and how can I claim?

One-off benefit in the case of death

A one-off benefit in the case of death is established in the budget each year. For 2022 this supplement is BGN 540. The amount is divided equally between everyone who is entitled to receive it: spouse, children and parents.

Survivors' pension

A survivors' pension is a percentage of the personal pension payable to the deceased person. This percentage is calculated according to the number of heirs entitled to this pension:

- one heir: 50%;
- two heirs: 75%;
- three or more heirs: 100%.

The survivors' pension is paid in total to all persons entitled to it and is divided equally amongst them. The minimum amount of the survivors' pension cannot be lower than 85% of the minimum amount of the pension for periods of insurance and old age.

If both parents or adoptive parents are deceased, their children are entitled to a survivors' pension calculated on the basis of the total sum of the pensions of the deceased person.

Supplement from the pension or pensions of a deceased spouse

A pensioner is entitled to a supplement from the pension or total sum of pensions which the deceased spouse received. This is established at 26.5% of the pension/s. For example, if your deceased spouse received a pension of BGN 500, the supplement to your pension will be BGN 132.5.

If the personal pension plus supplement is less than the survivors' pension, you receive the survivors' pension.

The conditions under which you can receive more than one pension can be found on the [National Social Security Institute](#) website.

Jargon busters

- **NSSI:** National Social Security Institute.

Know your rights

The laws and web pages of the institutions which determine your rights can be found by following the links below. These are not European Commission pages and do not represent the opinion of the Commission:

- [Social Insurance Code](#);
- [National Social Security Institute](#).

European Commission publications:

- [Death grants: your rights abroad as a citizen of the EU](#).

Who do you need to contact?

National Social Security Institute

- [Contact Centre](#)
- Central Office of the National Social Security Institute
- Bul. Alexander Stamboliiskii No 62-64
- 1303 Sofia
- Telephone: +359 29261010
- noi@nssi.bg
- [Regional offices of the National Social Security Institute](#)

Social assistance

Social benefits

Here you will find information on your social benefit entitlements if your income is low and you are at risk of poverty.

The following are described:

- **monthly benefit** (*месечни помощи*);
- **one-off benefit** (*еднократни помощи*);
- **rent allowance** (*помощи за наем на жилище*) ;
- **heating allowance** (*целеви помощи за отопление*).

In what situation can I claim?

Social benefits are based on guaranteed minimum income and differentiated minimum income. The minimum income is considered sufficient to satisfy basic needs (i.e. for staying above the poverty line).

For 2023, the guaranteed minimum income (GMI) is BGN75 per month.

Targeted or monthly social benefits are paid to people whose income is under or up to the minimum.

The differentiated minimum income (DMI) is determined on the basis of the number of family members and the number of people living in one residence. DMI is also linked to the age, family status, health and property of the people concerned. A detailed table with the amount of DMI can be found on the [Social Assistance Agency](#) website.

Income is defined as all the money from pensions, wages, rents, leases, child benefits, maintenance payments, etc. **Family** is defined as spouses and all children under the age of 18. **Cohabiting** people are defined as those living together in one residence and one household.

What conditions do I need to meet?

You are entitled to [monthly benefits](#) in the following cases:

- Your monthly income is less than indicated in the [differentiated minimum income](#) table;
- You have no other home. To be entitled to assistance your home must be no larger than:

one room if you live alone;

two rooms if your family consists of two or three people;

three rooms if your family consists of four people.

You have no movable (e.g. a taxi) or immovable property (e.g. a residence) which could be a source of income. This condition does not apply to your own home if you have no other home. It does not apply to a home where a person with a percentage disability of 50% or more or a seriously ill family member lives. An exception is made for homes which cannot be rented due to their poor technical condition or for health, hygiene, social or other reasons.

You are not registered as sole traders and you do not own capital in a commercial company.

You do not have a contract for ownership in exchange for maintenance and care. This condition does not apply if you are pensioners, disabled people, students or unemployed people and you have undertaken maintenance and/or care obligations.

You have not sold immovable property during the last 5 years.

Savings per family member do not exceed BGN 500 (BGN 1,000 for two people, etc.).

You are unemployed and have been registered for at least 6 months at the Unemployment Office.

[One-off benefits](#) are provided for occasional health, educational, domestic and other basic needs. You are entitled to a one-off benefit once per year.

The right to monthly assistance is granted to persons or families whose income for the previous month is lower than their differentiated minimum income. The basis for determining the differentiated minimum income is the guaranteed minimum income, as determined by the Council of Ministers.

The differentiated minimum income is defined as follows:

1. for persons over 75 years of age living alone - 248% of the guaranteed minimum income (GMI);
2. for persons over 65 years of age living alone – 210% of the GMI;
3. for persons living with another person over 65 years of age - 150% of the GMI;
4. for persons living with another person(s) or family, and for each of the cohabiting spouses – 100% of the GMI;
5. for persons up to 65 years of age living alone - 109% of the GMI;
6. for persons with minimum 50% of permanently reduced working capacity – 150% of the GMI;
7. for persons with minimum 70% of permanently reduced working capacity – 188% of the GMI;
8. for children:
 - (a) up to the age of 16, and –those studying - up to the completion of secondary education, but not more than up to the age of 20 – 150% of the GMI;
 - (b) from the age of 4 to 16, and if –studying - up to secondary education but no more than 20 years of age, and has committed 5 or more absences absent for the month in question or three or more absences without valid reasons of pre-school education - 45% of the GMI;
 - c) from the age of 4 to 16, not studying – 30% of the GMI;
 - d) from the age of 16 to 18, not studying but registered in the "Labour Office" Directorate – 100% of the GMI;
 - e) with official note certifying the obligatory immunizations and prophylactic examinations of the child, issued by the child's GP (in the absence of a GP, by the Regional Health Inspection) – 45% of the GMI;
9. for orphan children, for children living with relatives or in foster family under the Child Protection Act, for children with permanent disability – 150% of the GMI;
10. For parents / child-raising parents:
 - a) Up to 3 years of age – 180% of the GMI;
 - b) up to the age of 16, and if studying - up to the completion of secondary education, but not more than up to the age of 20 – 150% of the GMI;
11. for pregnant women 45 days before birth and for parents raising a child up to the age of 3 – 150% of the GMI.

You are entitled to a rent allowance if you live in a municipal housing and your income from the previous month is less than 250% of the **Differentiated minimum income (DMI)**. This includes:

- single old persons over the age of 70;
- parents raising children alone.

Persons and families whose income in the previous 6 months was less than or equal to the “differentiated income for heating” (*диференцирания доход за отопление*) have the right to heating allowance. The amount of this income is determined depending on the situation of the person concerned (e.g. person living alone, single parent, small children, disability etc.).

What am I entitled to and how can I claim?

Monthly benefit

The amount of monthly allowance is the difference between the DMI as determined for your personal situation and your income from the previous month. For example, if you live alone and are aged over 75 years, the DMI for your social category is BGN 186. If your income per month is BGN 100, the monthly benefit is BGN 86.

If you are a single parent, the DMI is defined as BGN 135. If your monthly income is BGN 30 the monthly benefit is BGN 105.

You can find out more about the differentiated minimum income for your category at the [Social Assistance Agency](#) website.

One-off benefit

You can apply for one-off benefit once per year. The amount of benefit depends on your needs. The maximum amount is 5 times the guaranteed minimum income or BGN 375. You can also apply for assistance to cover the cost of issuing an identity card. One-off benefit is also granted to persons who have received a permit for treatment abroad by the Ministry of Health at the expense of the Ministry budget to cover the cost of living and subsistence for them, their attendants and donors when they are not included in the amount of the granted treatment. You can find out more about one-off benefit in the [Regulations for applying the Social Assistance Act](#).

Jargon busters

- **Guaranteed minimum income (GMI):** the legal basis for determining the access to social assistance and used in determining the amount of social benefits. This is the minimum income required to cover basic needs.
- **Differentiated minimum income (DMI):** calculated by multiplying the guaranteed minimum income by an individually defined percentage given in the table above linked with age, health condition and social status. The DMI is used to determine who is entitled to targeted or monthly benefits depending on the income of their family members.
- **Social Insurance period:** calculated in hours, months and years. This takes into account the time during which employees have worked full-time if insurance contributions on the received remuneration have been paid or are payable. A minimum insurable income has been set for each profession and the period covered by insurance does not include contributions made below this income except in special circumstances. If you have worked part time, the length of employment for insurance purposes is calculated proportionally on the basis of working hours set out in law. This is 8 hours per day under normal working conditions. Length of service for insurance purposes is different from total length of service.

Forms you may need to fill in

- [Application for monthly benefit](#);
- [Application for heating allowance](#);
- [Application for rent allowance](#);
- [Application for one-off cash benefit](#).

Know your rights

The laws and web pages of the institutions which determine your rights can be found by following the links below. These are not European Commission pages and do not represent the opinion of the Commission:

- [Social Assistance Agency](#);
- [Regulations for the Implementation of the Social Benefits Act](#);
- [Social Assistance Directorates](#).

European Commission publications:

- [Family benefits: Your rights abroad as a citizen of the EU](#);
- [Retiring abroad: Your rights abroad as a citizen of the EU](#).

Who do you need to contact?

Social Assistance Agency

- Ul. Triaditsa No 2
- 1051 Sofia
- Telephone: +359 28119607
- Hotline: +359 29350550
- ok@asp.government.bg
- [Regional social assistance directorates](#)

National Social Security Institute

- [Contact Centre](#)
- Central office of the National Social Security Institute
- Bul. Alexander Stamboliiskii No 62-64
- 1303 Sofia
- Telephone: +359 29261010
- noi@nssi.bg
- [Regional offices of the National Social Security Institute](#)

Social programmes and services for supporting people with disabilities and elderly

Here you will find information on services and programmes for supporting people with disabilities and elderly people.

The following are described:

- Home-based services (*услуги, предоставяне в дома*):
 - **Assistant/Personal assistant**
 - **Domestic social patronage** (*домашен социален патронаж*);
 - **Public canteens** (*обществени трапезарии*);
- **Social services (various daily and consultative community-based services as well as community-based social services for residential care to support elderly people and people with disabilities);**
- **Specialised institutions (old people's homes and homes for people with disabilities).**

It should be noted that in the context of the ongoing social services reform the efforts are directed toward closing down the existing specialised institutions and expanding the network of community-based and home-based social services for elderly people and people with disabilities. The use of social services for residential care is allowed only if the possibilities for supporting the persons through social services in a home environment and in the community have been exhausted. The use of social services for residential care is organised in a way that prevents isolation from the community.

In what situation can I claim?

With regard to improving the access to services in home environment, the specialised social service assistant support is provided under Social services act. The social service assistant support is provided to elderly people above working age who are unable to look after themselves and do not have a degree of reduced working capacity assessed in accordance with the relevant procedure or to children with permanent disabilities and adults with permanent disabilities who are entitled to assistance by another person and who do not receive home care assistance under another law. This ensures access to this service for a certain group of vulnerable people, such as elderly people over 65 with limitations or inability to self-serve. The municipality undertakes to organise the provision of assistant support in such a way as to allow the comprehensive provision of the different types of social services in home environment.

Assistant support includes support by an assistant for:

1. self-service;
2. movement and motion;
3. changing and maintaining the position of the body;
4. execution of daily and household activities;
5. communication.

Referrals for use of assistant support financed by the state budget and the municipal budget are made only by the municipality that provides the service.

Other home-based services (for example, delivering meals to people at home and providing care services, such as help with personal or domestic hygiene) and public canteens are local activities financed by the municipalities and the Social Protection Fund of the Ministry of Labour and Social Policy.

Home-based services are also provided by private providers, as well as under different types of programmes and projects, funded by the State or European Social Fund. The conditions for their provision are different depending on projects' specifics.

Support in home environment, including through the provision of integrated health and social services for elderly people, persons with disabilities and persons over 65 who are unable to look after themselves, are provided under the procedure "Patronage care for elderly people and persons with disabilities" under the Operational Programme "Human Resources Development" 2014-2020. The "Patronage care" employees supply them with food, medicines and other essential products. The people from the risk groups who do not leave their homes also receive support through the payment of utility bills and through assistance for urgent administrative services.

Specialised institutions are for people who have reached pensionable age based on their period of social insurance cover and old age and for people with a disability established by a territorial expert medical committee of the national expert medical committee. As it has been mentioned above, social services in specialised institutions are provided only after having exhausted the options for providing social services in the community.

Municipalities and private providers provide social services to elderly people and people with disabilities in return for payment. The following persons should not pay for the use of social services that are financed by the State budget: children up to 18; young people aged between 18 and 21 years who have used residential care in accordance with the Child Protection Act until reaching the age of majority; persons who do not have income and deposits.

What conditions do I need to meet?

Specialised institutions: until entering into force the new mechanism for determining payment of fees for social services, in order to use social services in specialised institutions for people with disabilities or elderly people, you must pay a fee of 70% to 80% of your income depending on the type of the institution or a fee amounting to your actual monthly expenditure.

The amount of the fees for community-based social services varies between 5% and 50% of your income.

The beneficiaries definition of personal assistance under the Personal Assistance Act is detailed under the "Persons with disabilities" chapter of this document.

What am I entitled to and how can I claim?

Depending on the main groups of activities, the types of social services are as follows:

1. information and counselling;
2. advocacy and mediation;
3. community work;
4. therapy and rehabilitation;
5. training for acquiring skills;
6. support for acquiring occupational skills;
7. day care;
8. residential care;
9. providing shelter;
10. assistant support.

For the provision of State funded social services, a preliminary assessment of the needs of the person is made. Each person has the right to use the generally available (universal) social services without being referred by the Social Assistance Directorate or the municipality and without a preliminary needs assessment.

The referral by the Social Assistance Directorate for the use of specialized social services is made at the request of the person who can apply to the directorate at his current address on the spot or by phone or in writing, including electronically.

For each person, who has expressed a desire to use a specialized social service the referral is carried out by a social worker appointed by the director of the Social Assistance Directorate within 20 days from the application of the desire to use a social service. The social worker proposes a date and place for holding a meeting within three working days from the declaration of the wish for use of a social service as they shall be coordinated with the person.

By 1st January of the year following the adoption of the National Map of Social Services all referrals should be made by Social Assistance Directorate except the referrals for assistance support, provided by municipality in accordance with the Social Services Act. The referral for use of social services for children, parents, families and children's caregivers as a child protection measure is done in accordance with the Child Protection Act.

Under the domestic social patronage provided by the municipalities you are entitled to:

- delivery of food to your home;
- home cleaning;
- assistance in submitting applications to social benefits departments, health authorities, etc., if you are disabled or seriously ill;
- assistance in obtaining technical aids for people who are ill or disabled;
- care assistance such as measuring blood pressure etc., and maintaining social contacts;
- domestic services: purchase of food and basic necessities, payment of household bills with the user's money;
- assistance in maintaining personal hygiene, laundry for personal clothing and bed linen;
- minor repairs to homes and domestic appliances;
- organisation of cultural events, celebration of personal festivities, trips and excursions.

You can use these services if you submit the required documents to the municipal services covering your residential address. You can stop using care services for up to 3 months per year without declining them, during which time you will not pay a fee.

Public canteens provide a hot meal for lunch - soup, main course and bread. The food is provided also at home.

Jargon busters

- **TEMC:** Territorial Expert Medical Committee.
- **NEMC:** National Expert Medical Committee.
- **Social Insurance Period:** calculated in hours, months and years. This takes into account the time during which employees have worked full-time if insurance contributions for the remuneration received have been paid or are payable. A minimum insurable income is set for each profession and the period of social insurance cover does not include contributions made below this income except in special circumstances. If you have worked part time, the length of employment for insurance purposes is calculated proportionally on the basis of working hours set out in law. This is 8 hours per day under normal working conditions. Length of service for insurance purposes is different from total length of service.

Know your rights

The laws and web pages of the institutions which determine your rights can be found by following the links below. These are not European Commission pages and do not represent the opinion of the Commission:

- [Social Assistance Agency](#);
- [National Social Security Institute](#);

European Commission publications:

- <http://ec.europa.eu/social/main.jsp?catId=849&langId=en>.
- National Association of Municipalities in the Republic of Bulgaria.

Who do you need to contact?

Social Assistance Agency

- Triaditsa No 2
- 1051 Sofia
- Telephone: +359 28119607
- Hotline: +359 29350550
- ok@asp.government.bg

Social Assistance Directorate

- [Regional social assistance directorates](#)

National Social Security Institute

- [Contact Centre](#)

Employment Agency

- Address: Bul. Dondukov No 3
- 1000 Sofia
- Telephone: +359 29808719
- Fax: +359 29867802
- Email: az@az.government.bg
- [Regional branches of the Labour Office](#)

Central office of the National Social Security Institute

- Bul. Alexander Stamboliiski No 62-64
- 1303 Sofia
- Telephone: +359 29261010
- noi@nssi.bg
- [Regional directorates of the National Social Security Institute](#)

Unemployment

Unemployment benefit

Here you can find information on the unemployment benefit system in Bulgaria.

The following are described:

- **unemployment benefit** (*обезщетение за безработица*);
- **guaranteed debt payment in the event of an employer's insolvency** (*гарантирано вземане при несъстоятелност на работодателя*).

In what situation can I claim?

[Unemployment benefits](#) are payable to everyone who has paid social insurance contributions into the unemployment fund of the General State Insurance Fund for at least 12 months in the previous 18 months before becoming unemployed.

Benefits are payable whether or not the insurance contributions have been paid or are due but have not actually been paid.

Employees may also receive benefits if the company in which they work is declared insolvent. [Guaranteed debt payments](#) are financed by the Guaranteed Debt Payments for Workers and Employees Fund to which all companies are obliged to pay contributions.

Long-term unemployment benefits have not been payable since 2011.

What conditions do I need to meet?

In order to receive unemployment benefit:

- you must be registered as unemployed at the [Employment Agency](#);
- you must not be entitled to a pension for period of social insurance or old age or an early retirement pension in Bulgaria, or an old age pension in another country;
- you must not be employed in an activity which is subject to compulsory insurance.

If you are employed part-time and your remuneration is less than the minimum wage, you will be entitled to half of the unemployment benefit due to you.

To determine the length of paid insurance contributions which make up your entitlement to unemployment benefit, the following factors are taken into account: paid and unpaid leave for child care, temporary incapacity to work, pregnancy and childbirth, adoption of a child up to 5 years of age and unpaid leave of up to 30 working days in 1 calendar year.

Your length of paid insurance contributions and unemployment insurance period stipulated in the legislation of another state outside the EU with which Bulgaria has an international treaty is taken into account.

You are entitled to receive benefits from the fund that guarantees debt payment in the event of insolvency from the moment the court decision on insolvency procedures is recorded in the Commercial Register. You are not entitled to this benefit if you are a member of the managing bodies of the company, a shareholder in the commercial company or his/her spouse or a direct relative. The employer is obliged to notify you of the amount of paid and unpaid labour remuneration and/or cash compensation due to you.

The regional directorate of the National Social Security Institute checks to establish whether you are entitled to a benefit in accordance with the [Guaranteed Receivables Act](#) and drafts a statement. The procedure begins within 1 month of the court decision being recorded in the Commercial Register. While this verification is in progress, you are entitled to submit objections to the information provided by the employer. More information about the procedure can be found on the [National Social Security Institute](#) website.

What am I entitled to and how can I claim?

Unemployment benefits

The first step towards obtaining unemployment benefit is to register at the Employment Agency within 7 working days of termination of work. This can be done at the regional labour office departments in the region of your permanent address.

You must then submit an application for unemployment benefit within 3 months to the regional directorate of the National Social Security Institute.

The daily cash benefit for unemployment is 60% of your average insurable income for which you have paid contributions during the 24 months prior to suspension of social insurance. If you have worked in Bulgaria and in another EU Member State, only the periods of unemployment insurance and your income in Bulgaria are taken into account in the benefit calculation. The amount of benefit must be at least the minimum amount set out in the state budget for each calendar year. The minimum amount for 2023 is BGN 18 per day. The maximum amount for 2023 is BGN 85.71 per day.

There are exceptions when determining the amount of benefit. If you have willingly terminated your relationship with your employer of your own accord, you are entitled to minimum benefits for 4 months. You receive the minimum amount if you have already received unemployment benefit in the last 3 years.

The duration of unemployment benefit depends on the period of social insurance cover in years.

Period of social insurance cover (years)	Benefit payment period (months)
Up to 3	4
From 3 and 1 day to 7	6
From 7 and 1 day to 11	8
From 11 and 1 day to 15	10
Over 15	12

Long-term unemployment benefit has not been payable since 2011.

Guaranteeing debt payments in the event of employer's insolvency

Employees who have worked for their employer for at least 3 months are entitled to this benefit. If you began work for an employer at least 3 months before the court decision was recorded, you are also entitled to benefit but to a lesser extent.

- The guaranteed debt is equivalent to the last 6 calculated but unpaid salaries and cash compensation during the 36 calendar months, prior to the month when insolvency was declared. Monthly compensation cannot be more than the maximum amount of guaranteed receivables. For 2023, this is BGN 1950 per month;
- Employees whose legal relations with the employer were terminated during the 36 months prior to the date of the recording of the court decision are also entitled to a guaranteed debt payment. The guaranteed debt is equal to the sum of the last calculated but unpaid monthly salaries but not exceeding four times the minimum salary (for 2023 – BGN 780).

Jargon busters

- **NSSI:** National Social Security Institute;
- **SIC:** Social Insurance Code;
- **Social Insurance Period:** calculated in hours, months and years. This takes into account the time during which employees have worked full-time if insurance contributions for the remuneration received have been paid or are payable. A minimum insurable income has been set for each profession and the period covered by insurance does not include contributions made below this income except in special circumstances. If you have worked part time, the length of employment for insurance purposes is calculated proportionally on the basis of working hours set out in law. This is 8 hours per day under normal working conditions. Length of service for insurance purposes is different from total length of service.

Forms you may need to fill in

- [Application for registration at the Employment Agency](#) to be submitted to the labour office covering the applicant's permanent or present address;
- [Application for unemployment benefits in cash in accordance with Art. 54a of the Social Insurance Code](#) to be submitted to the regional office of the National Social Security Institute;
- [Declaration of a bank account for payment of unemployment benefit in cash](#) to be submitted to the regional office of the National Social Security Institute
- Copy of a document issued by the relevant bank with personal bank account details;
- Employment Agency registration: a copy to be submitted to the regional office of the National Social Security Institute;
- [The remaining documents required for benefits to be granted are described in point 5 on the National Social Security Institute website.](#)

Know your rights

The laws and web pages of the institutions which determine your rights can be found by following the links below. These are not European Commission pages and do not represent the opinion of the Commission:

- [Social Insurance Code](#);
- [National Social Security Institute](#);
- [Employment Agency](#);
- [Guaranteed debt payments for employees and workers in the event of insolvency of their employer](#);
- [Guaranteed Receivables for Workers and Employees in the Event of Insolvency of the Employer Act](#);
- [Registration of citizens of EEA Member States](#);
- [Registration of job seekers](#).

European Commission publications:

- [Social security system coverage: your rights abroad as a citizen of the EU](#);
- [Unemployment and social security system coverage: Your rights abroad as a citizen of the EU](#).

Who do you need to contact?

Employment Agency

- Address: Bul. Dondukov No 3
- 1000 Sofia
- Telephone: +359 29808719
- Fax: +359 29867802
- Email: az@az.government.bg
- [Regional departments of the Labour Office](#)

National Social Security Institute

- [Contact Centre](#)
- Central office of the National Social Security Institute
- Bul. Alexander Stamboliiski No 62-64
- 1303 Sofia
- Telephone: +359 29261010
- noi@nssi.bg
- [Regional offices of the National Social Security Institute](#)

Moving abroad

Accumulation of periods of social insurance cover from the European Union and the European Economic Area

The provisions of the regulations on social security (Regulation (EC) N° 883/2004 and Regulation (EC) N° 987/2009) provide for the mutual respect of insurance periods by States in cases when a person has lived and/or worked in more than one Member State. These provisions also apply for Norway, Liechtenstein, Iceland, Switzerland and in some cases for the United Kingdom. The Withdrawal Agreement and the Trade and Cooperation Agreement between the EU and the UK regulate other cases of social security rights.

In what situation can I claim?

One of the fundamental principles of the EU is free movement and settlement. This is guaranteed in a number of ways, one of which is uninterrupted social security wherever you are located in the EU and for whatever reasons.

Uninterrupted social security coverage means that our periods of insurance cover in the various Member States are valid everywhere in the other Member States as if they were their own.

Periods of social insurance cover from a number of Member States are calculated as if they were attained in one and the same country. The same applies to periods of employment and residence. Only the periods are taken into consideration, **not the amount of insurance contributions paid.**

Each case needs to be assessed individually to determine whether a person falls within the scope of Art 30 of the Withdrawal Agreement, and so the EU Coordination Regulations apply, or if they fall within the scope of situations described in Art 32 of the Withdrawal Agreement and/or come under domestic legislation

What conditions do I need to meet?

Periods of social insurance cover from a number of Member States are taken into consideration for all forms of benefits in all areas of social security:

- sickness benefit in cash or in kind;
- maternity/paternity benefits in cash or in kind;
- disability benefits in cash or in kind;
- old age pensions;
- benefits in the event of death;
- benefits for accidents at work and occupational diseases in cash or in kind;
- pre-retirement benefits;
- unemployment benefits;
- family benefits;
- special benefits not dependent on contributions.

Periods of social benefit cover provided in the event of poverty are not taken into consideration.

Benefits or pensions are paid everywhere in the EU no matter where the person lives and which country has granted the benefits.

Your benefit entitlement depends on the conditions in which you acquired the entitlement in the state providing the benefit.

If you have paid social insurance contributions while working in a number of EU countries, your insurance contributions are not transferred to any one of them. Instead, you receive benefits or pensions from all countries in which you are insured or from only one of them

but for all insured periods. If your social insurance in one Member State is obligatory and you have also opted to insure yourself on a voluntary basis, only the period of obligatory insurance is taken into account.

What am I entitled to and how can I claim?

The exchange of information between the competent institutions in the EU regarding social security rights is carried out entirely via electronic means. Therefore, upon occurrence of the respective event, it is necessary to indicate to the relevant competent institution in the country where you live at the time of application that you have insurance periods in other countries as well. Subsequently, your insurance periods will be confirmed by the competent institutions, using the electronic exchange. Therefore, it is not necessary to take action to respect your insurance periods, as they will be confirmed by the competent institutions when applying for a certain type of benefit from the material scope of coordination regulations.

Jargon busters

- **European Economic Area (EEA):** countries of the European Union, Iceland, Liechtenstein and Norway.

Forms you may need to fill in

Social security information for persons is transferred between the competent institutions electronically via EESSI.

Know your rights

The laws and web pages of the institutions which determine your rights can be found by following the links below. These are not European Commission pages and do not represent the opinion of the Commission:

- [Information brochure on social security in the EU;](#)
- [Information brochure on the coordination of social security systems in the EU.](#)

European Commission publications:

- [Social security system coverage: Your rights abroad as a citizen of the EU;](#)
- [Retiring abroad: Your rights abroad as a citizen of the EU.](#)

Who do you need to contact?

[Ministry of Labour and Social Policy](#)

- UI. Triaditsa No 2
- 2015 Sofia
- Telephone: +359 28119443
- Fax: +359 29884405 / 29861318
- Email: mlsp@mlsp.government.bg

[Ministry of Health](#)

- Hotline: +359 29301152 / 29301253
+359 29301259
- Email: goreshtalinia@mh.government.bg

[National Revenue Agency](#)

- Telephone: +359 70018700
- Email: infocenter@nra.bg

- [Regional offices of the National Revenue Agency](#)

[National Social Security Institute](#)

- Central office of the National Social Security Institute
- Bul. Alexander Stamboliiskii No 62-64
- 1303 Sofia
- Telephone: +359 29261010
- Email: noi@nssi.bg
- [Regional offices of the National Social Security Institute](#)

[National Health Insurance Fund](#)

- Ul. Krichim No 1
- 1407 Sofia
- Telephone: +359 80014800 / 29659121 / 29659387
- [Regional offices of the National Health Insurance Fund](#)
- [Social Assistance Agency](#)

Main residence

Habitual residence

Here you will find information on habitual residence in Bulgaria if this is important for your benefit entitlements.

In what situation can I claim?

There are cases in which your rights to social security or obligations depend on your habitual residence. The principle of EU law is that the social security legislation of only one EU Member State can be applied to you at any given moment. In order to define which country's legislation applies, the habitual residence criterion may be used.

According to European regulations, you have the same rights in the country in which you reside, as its citizens. If you work, you are part of the social security system of the country under whose legislation you have started work. For example, if you have been sent on a business trip to another Member State, the legislation of Bulgaria continues to apply to you. This rule is valid if the duration of the business trip is up to 24 months.

If you are an independently insured person registered in Bulgaria but you go to another Member State to provide services, Bulgarian legislation applies to you if you reside in Bulgaria. Seafarers are subject to the social security legislation of the country under whose flag their ship sails, etc.

However, if you do not work or work simultaneously in two or more EU Member States, the social security legislation which protects you is defined mainly on the basis of the habitual residence criterion. According to European legislation, the criteria for defining habitual residence do not coincide with the address on your identity document.

These criteria serve only for determining the applicable social security legislation and where contributions and/or tax are payable. In Bulgaria this is monitored and defined by the National Revenue Agency.

What conditions do I need to meet?

The criteria used to determine habitual residence are set out in Regulations 883/2004 and 987/09. The social legislation that applies to you is determined by the following.

Forms you may need to fill in

[Transferable document A1](#): issued in Bulgaria by the National Revenue Agency, showing the applicable social security legislation in particular cases of employment and independent employment. This document is not issued for work in only one state, for economically inactive persons, etc.

Know your rights

The laws and web pages of the institutions which determine your rights can be found by following the links below. These are not European Commission pages and do not represent the opinion of the Commission:

- [Information brochure about social security in the EU](#);
- [Information brochure about the coordination of social security systems in the EU](#);
- [National Revenue Agency](#).

European Commission publications:

- [Social security system coverage: Your rights abroad as a citizen of the EU](#);
- [Retiring abroad: Your rights abroad as a citizen of the EU](#).

Getting in touch with the EU

In person

All over the European Union there are hundreds of Europe Direct information centres. You can find the address of the centre nearest you at: europa.eu/european-union/contact_en

On the phone or by email

Europe Direct is a service that answers your questions about the European Union. You can contact this service:

- by freephone: 00 800 6 7 8 9 10 11 (certain operators may charge for these calls),
- at the following standard number: +32 22999696 or
- by email via: europa.eu/european-union/contact_en

Finding information about the EU

Online

Information about the European Union in all the official languages of the EU is available on the Europa website at: europa.eu/european-union/index_en

EU publications

You can download or order free and priced EU publications at: publications.europa.eu/en/publications. Multiple copies of free publications may be obtained by contacting Europe Direct or your local information centre (see europa.eu/european-union/contact_en).

EU law and related documents

For access to legal information from the EU, including all EU law since 1952 in all the official language versions, go to EUR-Lex at: eur-lex.europa.eu

Open data from the EU

The EU Open Data Portal (data.europa.eu/euodp/en) provides access to datasets from the EU.

Data can be downloaded and reused for free, both for commercial and non-commercial purposes.

