



Your social security rights in Luxembourg



EUROPEAN COMMISSION

Directorate-General for Employment, Social Affairs and Inclusion
Directorate D: Social Rights and Inclusion
Unit D.2: Social Protection

Contact: <https://ec.europa.eu/social/main.jsp?catId=2&langId=en&acronym=contact>

European Commission
B-1049 Brussels

Your social security rights in Luxembourg

Manuscript completed in July 2023

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Luxembourg: Publications Office of the European Union, 2023

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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 benefits

This chapter tells you everything you need to know to claim family benefits.

If you work in Luxembourg, you may be eligible for family benefits, even if your children live in another country.

In what situation can I claim?

Allowance for the children's future (*allocation pour l'avenir des enfants*) (abbreviation: **Family allowance** (*allocation familiale*))

Family allowance is granted to compensate for the financial costs related to supporting and educating your children.

Allowance payable at the beginning of the school year (*allocation de rentrée scolaire*)

This benefit is intended to compensate for the financial costs relating to the new school year, such as buying study materials, clothing, etc.

Birth grant (*allocation de naissance*)

The birth grant is allocated to women who have undergone monitoring and regular medical check-ups during their pregnancy, the birth and raising of their child up to the age of two years.

Parental leave benefit (*indemnité de congé parental*)

The parents of a young child may, thanks to parental leave, pause their professional career or reduce it in order to be with their child, with the assurance that they can return to their job at the end of the leave period.

What conditions do I need to meet?

All children who have their legal domicile in Luxembourg qualify for the family allowance.

If you are gainfully employed in Luxembourg, you are also entitled to family allowances for your children if they reside in another country. If you are receiving similar benefits in the country of residence, but the amount is lower, the Children's Future Fund (*Caisse pour l'avenir des enfants, CAE*) will pay the difference.

All these benefits are also awarded for adopted children.

General child benefit

It is granted to all children aged under 18, or 25 if they are still pursuing secondary or assimilated studies, a specialised training for disabled young people or an apprenticeship. (State financial assistance is provided for university studies.)

Supplementary special allowance

This allowance is paid to all children under 25 who are recipients of the general child benefit and have a permanent reduced mental or physical capacity of at least 50% compared to a healthy child of their age.

Birth grant

You can benefit from this allowance during your pregnancy and after the birth, if you have all the required medical examinations carried out and certified in a maternity booklet.

If you are not resident in Luxembourg, you can also claim these benefits as long as you have some form of connection to Luxembourg and you do not already claim similar benefits in your country of residence.

Parental leave benefit

To benefit from parental leave, you must:

- be parent of a child aged under 6 years;

- raise the child or children concerned in your household during the parental leave and mainly devote yourself to the child's education;
- not be in gainful employment during parental leave or reduce your employment in the case of part-time parental leave;
- be affiliated for a continuous period of at least 12 months preceding immediately the start of the parental leave on the basis of an employment contract for a minimum of 10 hours per week or on the basis of a self-employed activity.

Full-time parental leave can be requested for a period of 4 or 6 months per child.

You may also take part-time parental leave or split the leave and benefit from partial parental leave. So, if you work at least part-time, with the agreement of your employer, you may take part-time parental leave for 8 or 12 months by reducing your activity by half. If you work full-time, you can reduce your work hours by 20% per week for twenty months, or even take a split leave of four periods of one month, over a maximum twenty month period.

Note that one of the parents must take parental leave immediately after maternity or settling-in leave. If not, this parent loses his/her right to leave (except for parents raising a child alone). The other parent can take the leave until the child is 6 years old (12 years in case of adoption).

What am I entitled to and how can I claim?

To obtain family benefits, you must enter a claim to the CAE using specific [forms](#).

Family allowance

Monthly amount of family allowance: EUR 285.41. This amount is increased by EUR 21.57 for a child over 6 and by EUR 53.85 for a child over 12.

Back to school allowance

Monthly amount of the back to school allowance:

EUR 115 for children aged 6 years and older,

EUR 235 for children aged 12 years and older.

Birth grant

The benefits are divided into three portions of EUR 580.03 each, paid separately and subject to different eligibility conditions (it is possible to gain access to one of these portions without gaining access to the others):

- a prenatal allowance;
- an allowance for the actual birth;
- a postnatal allowance.

Parental leave benefit

The gross monthly amount for parental leave is determined based on your average monthly income in the 12 months before the start of parental leave. The benefit is subject to tax and social security charges, but exempt from sickness allowance and accident insurance contributions.

For a full parental leave of a full time worker, the allowance cannot be less than EUR 2,387.40 per month or more than EUR 3,978.99 per month. Limits vary depending on the average number of hours that you have worked in the 12 months before the start of parental leave.

Jargon busters

- **Children's Future Fund** (*Caisse pour l'avenir des enfants, CAE*): the office which is responsible for establishing and paying the family allowances.
- **Legal domicile**: be permitted to reside in Luxembourg, and be legally declared through entry in the communal population register and have your main residence in Luxembourg.
- **Disabled child**: child afflicted by one or more conditions which constitute permanent impairment or decrease of at least 50% of the physical or mental capacity of a healthy child of the same age.

Forms you may need to fill in

- [Claim forms](#)

Know your rights

The links below provide a legal definition of your rights. They are not European Commission websites and they do not represent the views of the Commission:

- [Further information is available in the Luxembourg State administrative guide](#)
- [Further information is available on the CAE website](#)

Commission publications and websites:

- [Family benefits: your rights as a European citizen abroad](#)

Who do you need to contact?

Children's Future Fund (*Caisse pour l'Avenir des Enfants*)

Address: 34 Avenue de la Porte Neuve L-2227 Luxembourg

Postal Address: BP394 L-2013 Luxembourg

Telephone number: (+352) 47 71 53-1

Contact form: <http://www.cae.public.lu/fr/support/contact/formulaire.html>

Website: <http://www.cae.public.lu/fr/la-caisse.html>

Maternity and paternity benefits

This chapter tells you everything you need to know about claiming maternity and paternity benefits.

If you have worked and paid social security contributions in another country of the European Union, the corresponding periods may be taken into account to determine your right to maternity and paternity benefits in Luxembourg.

In what situation can I claim?

Maternity and health insurance covers the necessary care during pregnancy and birth. It provides a maternity grant to replace your work income during maternity leave and adoption leave.

What conditions do I need to meet?

To enable services such as consultations, visits, treatment, medical services and healthcare to be reimbursed by the health insurance fund, they must be:

- provided by service providers which have signed an agreement with the National Health Fund (*Caisse Nationale de Santé - CNS*);
- be included in the statutes of the CNS;
- be listed in a breakdown of treatments or a list of tariffs.

As a salaried employee or a self-employed person, and to gain access to maternity benefit during prenatal and postnatal leave periods, you must be able to demonstrate at least 6 months affiliation with maternity and health insurance over the 12 months prior to the beginning of your leave. The same affiliation period is required to benefit from adoption leave.

The leave request is submitted to CNS through a medical certificate giving the expected date of birth, to establish the last twelve weeks of pregnancy.

A copy of the birth certificate of the newborn infant should be sent to the CNS.

What am I entitled to and how can I claim?

Benefits in kind

At the time of the birth, insured persons are entitled to the services of a midwife, medical assistance, a stay in a maternity centre or clinic, and pharmaceutical supplies.

Duration of leave and cash benefits

The **leave period** is equal to 8 weeks prior to the forecast date of birth and a maximum of 12 weeks after.

Women who work in jobs which are hazardous to their health or to the health of the newborn infant may be relieved of their position if allocation to another position within the same company is not possible.

Insured persons have the right to maternity benefits during prenatal and postnatal leave and while they are exempted from work. In principle, the **amount of the benefits** is identical to that for sickness benefit (100% of the previous salary), without exceeding 5 times the social minimum wage. These benefits are paid by the CNS and may not be accumulated with either sickness benefits or any other wage.

Allowance for adoption leave (*allocation pour congé d'accueil*) (adopting a child)

In the event of the adoption of a child who has not yet been admitted for his/her first year of primary education, a leave period of 12 weeks is granted to one of the parents. If both parents fulfil the conditions to obtain the leave, they decide by mutual consent who will apply for it. Adoption leave gives rise to a payment of a benefit for the duration of the leave period, paid by the CNS. The amount is in principle the same as the sickness benefit (100% of previous salary) without exceeding 5 times the social minimum wage. This benefit may not be cumulated with sickness benefits or with any income from employment.

Jargon busters

- **Caisse nationale de santé (CNS):** Health insurance fund for all employees in the private sector, salaried employees and the self-employed.
- **Minimum wage:** the minimum salary which employers are required to pay their employees. The salaries, pay and social security benefits (except for family benefits), including the minimum wage, are indexed to changes in the cost of living.
- **Service providers:** doctors, dentists, pharmacists, nurses, midwives, physiotherapists, opticians, speech therapists, orthopaedists, rehabilitation specialists, laboratories, spas, convalescence centres, patient transportation services. All service providers are linked to the CNS by agreement and must respect the tariffs.
- **Tariffs:** prices for treatment and services negotiated between the representative associations of the service providers and the CNS, entered into the official lists and descriptions.

Know your rights

The links below provide a legal definition of your rights. They are not European Commission websites and they do not represent the views of the Commission:

- [Further information is available on the website of the National Health Fund \(Caisse Nationale de Santé - CNS\).](#)
- [Form for calculating maternity leave on the CNS website.](#)

Commission publications and websites:

- [Family benefits: your rights as a European citizen abroad](#)

Who do you need to contact?

Caisse nationale de santé

Address: 125 route d'Esch, L-1471 Luxembourg

Telephone number: +352 27 57-1

E-mail: cns@secu.lu

Contact form: <https://cns.public.lu/fr/support/contact.html>

Website: <http://www.cns.lu/>

[Page for directly contacting the relevant department](#)

Health

Healthcare

This chapter details what you need to know about claiming healthcare.

In what situation can I claim?

Compulsory health insurance covers, amongst others, salaried employees, the self-employed, apprentices, mariners, young volunteers, young au pairs, as well as people receiving pensions, invalidity pension, unemployment benefits, parental leave or the guaranteed minimum wage.

As somebody covered by this insurance, you have the right to benefits to both yourself and members of your family (joint insured persons), including: spouses, partners, children under your legal guardianship under 30 years old, parents or direct relatives or relatives by marriage to the third degree where they take care of the household of the insured person instead of a spouse.

Students pursuing their studies in Luxembourg are subject to health insurance if they are not covered by social protection in their capacity as a family member.

Anybody not covered or no longer covered by compulsory insurance or joint insurance may voluntarily receive coverage:

- by continuing to pay contributions following a loss of insurance, on the condition that they were insured for at least 6 continuous months immediately before their disaffiliation (excluding a break of less than 8 days), and to submit the application within three months to the Social Security Centre (*Centre commun de la sécurité sociale - CCSS*);
- otherwise, by taking out optional insurance. In this case, contributions are to be paid from the date of first request, but benefits may only be claimed after a period of 3 months.

What conditions do I need to meet?

To enable benefits such as consultations, visits, treatments and medical services and healthcare to be covered by health insurance, they must be:

- provided by service providers which have signed an agreement with the National Health Fund (*Caisse Nationale de Santé - CNS*);
- be included in the statutes of the CNS;
- be listed in a breakdown of treatments or a list of tariffs.

What am I entitled to and how can I claim?

You are free to choose your own general practitioner and are free to consult a specialist doctor.

The **healthcare** you may receive is as follows:

- Medical treatment
- Dental treatment
- Visual aids (spectacles, contact lenses etc.)
- Treatment performed by healthcare professionals
- Medical biology analyses
- Orthoses, prostheses, epistheses and dental implants
- Medicines
- Medical devices

- Hospital treatments and stays
- Therapeutic cures
- Physical rehabilitation and post-oncological care
- General and occupational rehabilitation
- Transport expenses incurred in connection with health care
- Palliative care
- Blood products and plasma derivatives
- Organ transplants
- Psychotherapies treating a mental disorder.

How is healthcare accessed?

Non-inpatient medical appointments are covered up to 80% of the listed official tariff. Consultations are covered up to 88% of this tariff. Amongst other things, full coverage is provided for chemotherapy, radiotherapy, haemodialysis, procedures provided as part of preventive medicine schemes (children's vaccinations, mammograms, etc.), and physiotherapy (in case of serious pathology, post-surgery rehabilitation and treatments for children under 18, otherwise 70% coverage).

100% of the costs are covered for children and youngsters under 18.

Above the annual amount of EUR 69.86 fully paid by health insurance, dental procedures and services are covered up to 88% of the tariffs. Dental prosthetics costs are covered up to 80% of the tariffs, except for restorative maxillo-facial prostheses, for which the coverage amounts to 100% of these tariffs. Coverage is 100% for children and young people who are under the age of 18.

Further details about coverage for other services is available on the [dedicated web page of the Caisse nationale de santé](#).

Medicines are only covered upon presentation of the original medical prescriptions. For medicines appearing on the official list, there are 3 classes and for each class there is a rate of coverage:

- the standard rate of 80% applies to all medicines not included in a specific provision;
- the preferential rate of 100% applies to medicines for specific therapies which contain a single active ingredient and which are intended to combat particularly serious or chronic illnesses;
- the reduced rate of 40% applies to non-essential pharmaceutical products of more limited therapeutic use.

Persons covered contribute to **hospitalisation** costs, excluding medical fees, at the rate of EUR 23.68 per day of hospitalisation in a second class room, up to the limit of 30 days per calendar year. Hospitalisation in a 1st class room is fully payable by the patient. Coverage is possible through the use of additional insurance.

Healthcare services are granted:

- either in the form of reimbursement through the CNS (or through public sector health insurance) if you have paid your fees. In this system, it is your responsibility to pay the fees to the service provider for the treatment received;
- or in the form of direct coverage by the CNS (3rd party payer system). In the event that you benefit from the 3rd party payer system, it is your responsibility to pay the service provider (doctor, dentist, pharmacist, etc.) solely the portion of the costs personally payable by you.

What is the duration of the coverage?

Healthcare services are provided to you from the date of your inclusion in social security, except in the event of optional insurance, where a waiting period of three months is applied.

In the event that you cease your inclusion in the social security system, your right to healthcare services is upheld for the current month in question and for the subsequent three months, on condition that you had previously been included in the system for a continuous period of 6 months immediately prior to your disaffiliation. Insurance periods completed in another country are taken into account.

Jargon busters

- **Caisse nationale de santé (CNS):** Health insurance fund for all private sector workers, salaried employees and self-employed persons.
- **Centre commun de la sécurité sociale (CCSS):** Body which governs affiliation and the collection of contributions for all branches of social security.
- **Service providers:** doctors, dentists, pharmacists, nurses, midwives, physiotherapists, opticians, speech therapists, orthopaedists, rehabilitation specialists, laboratories, spas, convalescence centres, patient transportation services. All service providers are linked to the CNS by agreement and must respect the tariffs.
- **Tariffs:** prices for treatment and services negotiated between the representative associations of the service providers and the CNS, entered into the official lists and descriptions.

Know your rights

The link below provides a legal definition of your rights. This website is not a European Commission website and it does not represent the views of the Commission:

- [Further information is available on the website of the National Health Fund \(Caisse Nationale de Santé - CNS\).](#)

Commission publications and websites:

- [Social security services: your rights as a European citizen abroad](#)

Who do you need to contact?

Caisse nationale de santé

Address: 125 route d'Esch, L-1471 Luxembourg

Telephone number +352 27 57-1

E-mail: cns@secu.lu

Contact form: <https://cns.public.lu/fr/support/contact.html>

Website: <http://www.cns.lu/>

[Page for directly contacting the relevant department](#)

Centre commun de la sécurité sociale

Address: 125, route d'Esch, L-2975 Luxembourg

Phone number: +352 40 14 1-1

Website: <https://ccss.public.lu/>

Contact form: <https://ccss.public.lu/fr/support/contact.html>

Sickness cash benefits

This chapter provides information on what you need to know about claiming sickness cash benefits.

If you have worked and paid social security contributions in another country in the European Union, the corresponding periods may be taken into account to determine your right to sickness cash benefits in Luxembourg.

In what situation can I claim?

If you are unable to work owing to illness or a non-work related accident, health insurance provides the payment of financial sickness compensation to replace your professional income.

What conditions do I need to meet?

Salaried employees who are unable to work are required to notify the employer either in person or through another person, on the day of said incapacity. The employee's compensation is applicable from the first working day of the work incapacity (with no waiting periods being applicable), on the condition that this is declared to the National Health Fund (*Caisse Nationale de Santé - CNS*) and to the employer by the third day's absence at the latest, through the presentation of a medical note confirming the incapacity to work and the forecast period of such incapacity.

The sickness cash benefits owed to employees are suspended for the reimbursement period. They are paid at the end of the suspension period, pursuant to the opinion of the Social Security Medical Assessor (*Contrôle Médical de la Sécurité Sociale - CMSS*) based on a detailed medical report drawn up by the attending doctor.

CNS officials may visit the home of the insured person to verify that they are complying with the health coverage provisions. If the person being checked is not present at the time of this visit and if they are unable to produce any justification for this absence using the official forms and within the official deadlines, their case shall be subject to an order by the CNS, which may rule for official fines.

What am I entitled to and how can I claim?

If you are a salaried employee

You have the right to your full salary to the end of the calendar month during which the 77th day of work incapacity occurs, during a reference period of 18 successive calendar months.

If the work incapacity lasts beyond this period, the health insurance body will grant sickness cash benefits until the entire period of 78 weeks per reference period of 104 weeks is reached.

The compensation is calculated based on the professional income subject to contributions (taxable basis) relating to the affiliations applicable at the time the work incapacity arose. This means the basic remuneration alongside additional and ancillary remuneration, on condition that this is payable monthly in cash, except for remuneration for overtime.

Limits and ceilings:

- The monthly sickness cash benefits may not be less than the minimum wage, excepting any legitimate cause for exemptions or reductions.
- In the event of part-time work, this threshold is established based on the hourly minimum wage.
- For apprentices, apprenticeship compensation constitutes the basis for calculating the sickness cash benefits.
- The monthly sickness cash benefits may not exceed five times the minimum wage.

- Sickness cash benefits are no longer payable for persons over the age of 68.

If you are self-employed

Daily compensation is provided following a waiting period ending at the end of the calendar month during which the 77th day of work incapacity occurs. You may, however, opt for employers' mutual insurance, and you will receive compensation from the first day of work incapacity. The amount of the compensation corresponds to the taxable basis applicable at the time the work incapacity arises.

Sickness cash benefits are granted for as long as the work incapacity persists, according to the opinion of the *Contrôle Médical de la Sécurité Sociale*, up to a total limit of 78 weeks for a reference period of 104 weeks. It is no longer granted for persons over the age of 68.

Jargon busters

- **Contrôle Médical de la Sécurité Sociale (CMSS):** Competent authority for all medical issues. Its opinions are binding on the social security institutions.
- **Caisse nationale de santé (CNS):** Health insurance fund for all private sector workers, salaried employees and self-employed persons.
- **Employers' mutual insurance:** this refunds employers 80% of the remuneration paid to employees who are absent due to work incapacity. It pays sickness benefits to self-employed people (voluntarily affiliated) during the waiting period.
- **Minimum wage:** the minimum salary which employers are required to pay their employees. The salaries, pay and social security benefits (except for family benefits) including the minimum wage, are indexed to changes in the cost of living.

Know your rights

The links below provide a legal definition of your rights. They are not European Commission websites and they do not represent the views of the Commission:

- [Further information is available on the website of the National Health Fund \(Caisse Nationale de Santé - CNS\).](#)
- [Further information for self-employed people is available on the website of the Luxembourg Chamber of Skilled Trades and Crafts \(Chambre des métiers\).](#)

Commission publications and websites:

- [Social security services: your rights as a European citizen abroad](#)

Who do you need to contact?

Caisse Nationale de Santé

Address: 125 route d'Esch, L-1471 Luxembourg

Telephone number(+352) 27 57-1

E-mail: cns@secu.lu

Website: <http://www.cns.lu/>

[Page for directly contacting the relevant department](#)

Contrôle médical de la sécurité sociale

Address: 125, route d'Esch L-1471 Luxembourg

Phone number: (+352) 26 19 13-1

Website: <https://mss.gouvernement.lu/fr/annuaire.html?idMin=257>

Long-term care

This chapter provides information on what you need to know about claiming for long-term care.

If you are affiliated to the Luxembourg health insurance system, you may benefit from nursing care cover, even if you live in another country.

In what situation can I claim?

Long-term care in the home or in an institution is covered by nursing care insurance.

The aim of nursing care insurance cover is to compensate for expenses incurred by care and assistance provided by another person in order to carry out basic day-to-day tasks (personal hygiene, nutrition, mobility, etc.).

A person is deemed to be dependent on nursing care if, following a physical, mental or psychological illness or disability, they have significant and regular needs for assistance from another person in order to carry out basic day-to-day tasks.

The benefits provided for nursing care insurance coverage are not subject to any conditions of resources.

What conditions do I need to meet?

Any person covered by Luxembourg health insurance is also covered by nursing care insurance.

The concept of assistance requirements from another person assumes the following three conditions:

- the state of health of the person requiring assistance fully or partially to carry out basic day-to-day tasks in terms of personal hygiene, excretion, nutrition, getting dressed and mobility;
- the requirement for assistance continues for a minimum period of six months, or is irreversible;
- the weekly assistance requirement represents at least 3.5 hours.

What am I entitled to and how can I claim?

Nursing care insurance covers the assistance and care of the dependent person, living in their own home or in an institution. It covers assistance and care which is not covered by health insurance. In the event of care in the home, the assistance and care may be provided to a dependent person by an assistance and care network body, by a specialist day-care centre or by a friend or relative of the affected person ("carer").

Depending on these needs, the applicant is allocated one of 15 weekly assistance and care need levels. Each level corresponds to a period of time in minutes. The level allocated covers the basic daily tasks, according to the dependent persons situation and their individual needs.

To benefit from dependency coverage, a claim must be made to the National Health Fund (CNS) using a set form. This claim will then be passed on to the Administration for assessing and monitoring nursing care insurance (*Administration d'évaluation et de contrôle de l'assurance dépendance, AEC*). This claim must be accompanied by a report drawn up by an attending doctor.

Benefits in kind

In the event of support at home, nursing care insurance covers:

- basic day-to-day tasks;
- help with housework;

- support activities;
- pension contributions for carers.

Nursing care insurance directly covers costs relating to the assistance and care provided by professionals. Nursing care insurance pays a lump sum for products such as mattress protection, adult nappies, etc. It can also contribute to costs incurred by adapting accommodation or the purchase of devices for increasing the independence of the person requiring care (specialist bed, guide dog, wheelchair).

If the person requiring care lives in sheltered accommodation, the insurance covers:

- basic day-to-day tasks;
- products necessary for assistance and care;
- certain devices (exceptionally).

Cash benefits

Nursing care insurance provides for the conversion of part of the benefits in kind into cash, which will enable the person requiring care to pay the person providing assistance.

Combined benefits

The person requiring care may use assistance both from a relative and a specialist service.

Jargon busters

- **National Health Fund** (*Caisse Nationale de Santé - CNS*): Health insurance fund which is also the care insurance management agency. Its decisions are based on the opinion of the CEO.
- **Administration for assessing and monitoring nursing care insurance** (*Administration d'évaluation et de contrôle de l'assurance dépendance, AEC*): Public service which issues an opinion on the state of dependence of an insured and determines the need of help for dependent persons.
- **Carer**: somebody close to the person requiring care and who looks after this latter. This can be a family member, a friend or a neighbour, etc. The person requiring care may also hire somebody specifically to provide assistance. This employed person should be declared to the *Centre Commun de la Sécurité Sociale (CCSS)* through a simplified procedure. Upon request from the dependent person, the nursing care insurance covers the pension contributions for this carer.
- **Network of assistance and care**: network made up of professionals who provide all the assistance and care to dependent persons that they may require to perform basic day-to-day tasks.
- **Sheltered accommodation**: establishments providing accommodation for persons requiring care: care centres, homes for the elderly, hospitals, centres for disabled people.

Forms you may need to fill in

The nursing care benefits claim form can be downloaded from the [website of the Luxembourg State administrative guide](#).

Know your rights

The link below provides a legal definition of your rights. It is not a European Commission website, nor does it represent the views of the Commission:

- [Further information is available on the AEC website.](#)

Commission publications and websites:

- [Social security services: your rights as a European citizen abroad](#)

Who do you need to contact?

Caisse Nationale de Santé

Address: 125 route d'Esch, L-1471 Luxembourg

Telephone number: +352 27 57-1

E-mail: cns@secu.lu

Website: <http://www.cns.lu/>

[Page for directly contacting the relevant department](#)

Administration d'évaluation et de contrôle de l'assurance dépendance

Address: 125, rte d'Esch L-1471 Luxembourg

Phone number: +352 247-86060

E-mail: secretariat@ad.etat.lu

[Website with a list of phone numbers](#)

Centre commun de la sécurité sociale

Address: 125, route d'Esch L-2975 Luxembourg

Phone number: +352 40 14 1-1

Site web: <https://ccss.public.lu/>

Contact form: <https://ccss.public.lu/fr/support/contact.html>

Other sickness cash benefits

This chapter provides information on what you need to know about claiming cash benefits during leave for family reasons (a child's sickness), compassionate leave to support somebody who is terminally ill or to receive a funeral grant in the event of the death of a family member.

In what situation can I claim?

Aside from the cash benefits paid to you if you are ill and unable to work, three other sets of circumstances grant access to benefits:

Leave in the event of a child's sickness (*Congé en cas de maladie d'un enfant*)

Leave for family reasons enables you to stay with your sick child without losing income.

Compassionate leave to support somebody who is terminally ill (*Congé d'accompagnement d'une personne en fin de vie*)

If you have somebody close to you at the end stage of a serious illness, you may take leave from work, without losing income, and remain by the side of this person.

Funeral grant (*Indemnité funéraire*)

In the event of the death of the insured person or of a member of their family, a lump-sum funeral grant is provided to cover funeral costs.

What conditions do I need to meet?

Leave in the event of a child's sickness

If you are a salaried employee, an apprentice or self-employed and you are the legal guardian of a child under the age of 18 requiring you to be with them in the event of illness or an accident, you can claim leave for family reasons.

Each parent performing a professional activity has an individual right to leave. If just one parent works and the other stays at home, the working parent still has the right to take leave for family reasons.

To claim this leave, you will need to present a medical note confirming the child's illness or accident.

Leave for family reasons is also possible in case of quarantine, isolation or home care for a child under the age of 13, due to imperative public health reasons aimed at limiting the spread of an epidemic.

Compassionate leave to support somebody who is terminally ill

Leave is only granted in the event of the terminal stage of a person's serious illness, where their state of health requires the presence of somebody close to them.

You can request this type of leave if you have:

- a terminally ill first-degree relative, ascendant or descendant (mother/father or son/daughter);
- a terminally ill second degree relative (sister/brother);
- your terminally ill spouse (husband/wife) or ([legally recognised](#)) partner.

Funeral grant

The funeral grant is allocated in the event of the death of the insured person or of a member of their family.

It is paid, up to the amount of the costs incurred, to the person or to the institution which has advanced such costs. Any remaining balance is paid to the spouse or the partner or to the children, father and mother, brothers and sisters, if they lived with the insured person.

What am I entitled to and how can I claim?

Leave in the event of a child's sickness

- Per child, the period of leave for family reasons is 12 days if the child is younger than 4, 18 days if the child is between 4 and 13, and 5 days if the child is between 13 and 18 (in the latter case, the leave is only granted if the child is in hospital). The leave period is doubled for children benefiting from an additional allowance for disabled children. If the child has an exceptionally serious illness or disability or in the event of quarantine, isolation or home care of a child under the age of 13 for imperative public health reasons aimed at limiting the spread of an epidemic, the duration of the leave may be extended to 52 weeks over a 104-week period.
- Leave for family reasons may be split. This means that it does not have to be taken in full all at once. A split period which does not exceed four hours will only be included as a half day.
- The age limit of 18 years does not apply to children benefiting from additional allowances for disabled children.
- For the duration of this leave, workers may benefit from compensation matching their professional remuneration or income.

Compassionate leave to support somebody who is terminally ill

- Compassionate leave may not exceed 5 working days (40 hours) per case and per year. This will, however, end on the date of the death of the person concerned.
- Compassionate leave can be split: it can be taken in more than one instance.
- This form of leave can also be taken part-time (with the employer's agreement): in this case, the period of leave is increased in proportion.

Please note: to receive benefits during leave for family reasons or during compassionate leave to support somebody who is terminally ill, you must declare your absence to the

National Health Fund (CNS) with a medical note confirming the child's illness or, in the case of compassionate leave, the terminal illness of the dying person and the need for your continued presence with the child or the person concerned.

You are also obliged to notify your employer on the first day of your absence at the latest.

Funeral grant

On 1st January 2023, the amount of the funeral grant stood at EUR 1,140.11. If this relates to a child under six months old or a stillborn child, only half or one fifth respectively of this amount is granted. The grant must be claimed from the CNS.

Jargon busters

- **National Health Fund** (*Caisse nationale de santé - CNS*): health insurance fund regulating all private sector workers, employees and independent.
- **Social Security Medical Inspectorate** (*Contrôle médical de la sécurité sociale - CMSS*): Competent administration for all medical issues. Its opinions are binding on the social security institutions.
- **Dependent child**: a dependent child is a child for whom a family allowance is granted by the Children's Future Fund (*Caisse pour l'avenir des enfants, CAE*).
- **Additional allowance for disabled children**: this allowance constitutes financial assistance for the additional costs caused by a child's disability. It is granted in addition to the family allowance.
- **Disabled child**: child afflicted by one or more conditions which constitute permanent impairment or decrease of at least 50% of the physical or mental capacity of a healthy child of the same age.

Forms you may need to fill in

- [Claim form for compassionate leave to support a terminally ill person](#)

Know your rights

The links below provide a legal definition of your rights. They are not European Commission websites and they do not represent the views of the Commission:

Leave in the event of a child's sickness

- [Further information is available on the website of the Caisse Nationale de Santé \(CNS\).](#)
- [Further information is available in the Luxembourg State administrative guide.](#)

Compassionate leave to support somebody who is terminally ill

- [Further information is available on the website of the Caisse Nationale de Santé \(CNS\).](#)
- [Further information is available in the Luxembourg State administrative guide.](#)

Funeral grants

- [Further information is available on the website of the Caisse Nationale de Santé \(CNS\).](#)
- [Further information is available in the Luxembourg State administrative guide.](#)

Commission publications and websites:

- [Social security services: your rights as a European citizen abroad](#)

Who do you need to contact?

Caisse Nationale de Santé

Address: 125 route d'Esch, L-1471 Luxembourg

Telephone number: +352 27 57-1

E-mail: cns@secu.lu

Website: <http://www.cns.lu/>

[Page for directly contacting the relevant department](#)

Incapacity

Invalidity pension

This chapter provides information about what you need to know to claim invalidity pension.

If you have worked and paid social security contributions in another European Union country, the corresponding periods may be taken into account to determine your right to invalidity benefits in Luxembourg.

In what situation can I claim?

If you are a salaried employee under the age of 65, you can claim an invalidity pension to subsidise your needs if you are unable to carry out your profession or any other occupation corresponding to your strengths or skills.

Please note: your invalidity pension is converted into an old-age pension when you reach the age of 65.

What conditions do I need to meet?

The invalidity assessment is made based on the opinion of the *Contrôle Médical de la Sécurité Sociale* (CMSS).

The **criteria required** for the allocation of the invalidity pension are as follows:

- you must be under 65 years of age;
- the invalidity criterion must be recognised by the CMSS;
- you must have been affiliated to the insurance system for at least 12 months over the three years prior to the date of invalidity or the expiry of sickness cash benefits. No minimum affiliation period is required if the invalidity is caused by an accident (of any kind whatsoever) or a recognised occupational illness which arises during the period of affiliation;
- you must not perform any unsalaried activity subject to insurance. This means any activity whose professional income exceeds one third of the minimum wage.
- the beneficiary of an invalidity pension under the age of 50 may be obliged to undertake rehabilitation or professional conversion measures ordered by the pension fund upon request from the CMSS.

Where the **invalidity is temporary**, the pension takes effect upon the expiry of sickness cash benefits, or after an uninterrupted period of invalidity of 6 months.

Where the **invalidity is permanent**, the pension takes effect from the first day of the establishment of the invalidity. In the event of continued remuneration from the employer, it is paid as of the end of the remuneration period. If it is not possible to establish the date when the invalidity started, the pension will be effective from the date of presentation of the claim.

What am I entitled to and how can I claim?

The invalidity pension may be paid for a set period (temporary invalidity) or without a time limitation (permanent invalidity). It is paid by the National Pension Insurance Fund (*Caisse Nationale d'Assurance Pension - CNAP*).

Calculating the pension

The invalidity pension is calculated using four elements:

- **flat-rate amounts:** these are granted based on the duration of the insurance coverage. The maximum number of years taken into account is 40.
- **proportional amounts:** these are granted based on the income received over the course of the insurance period. They are calculated by multiplying the amount of

income with an increase rate which varies depending on the year in which entitlement to a pension begins.

- **special flat-rate amounts:** the aim of these is to extend artificially your insurance career to the age of 65 if you have to stop working before retirement age for health reasons.
- **special proportional amounts,** which take into account artificial income for the prospective period from the beginning of the pension up to the age of 55.

[Further information about pension calculations is available on the website of the National Pension Insurance Fund \(Caisse Nationale d'Assurance Pension\).](#)

Jargon busters

- **Social Security Medical Inspectorate** (*Contrôle Médical de la Sécurité Sociale - CMSS*): Competent administration for all medical issues. Its opinions are binding on the social security institutions.
- **National Pension Insurance Fund** (*Caisse Nationale d'Assurance Pension - CNAP*): Contact body for all persons covered by the pension insurance scheme for the private sector.
- **Minimum wage:** the minimum salary which employers are required to pay their employees. The salaries, pay and social security benefits (except for family benefits) including the minimum wage, are indexed to changes in the cost of living.

Forms you may need to fill in

- [Invalidity pension claim form](#)

Know your rights

The link below provides a legal definition of your rights. It is not a European Commission website, nor does it represent the views of the Commission:

- [Information brochure from the National Pension Insurance Fund \(Caisse Nationale d'Assurance Pension\).](#)

Commission publications and websites:

- [Social security services: your rights as a European citizen abroad](#)

Who do you need to contact?

Caisse nationale d'assurance pension

Address: 1a, boulevard Prince Henri L-1724 Luxembourg

Telephone: (+352) 22 41 41 -1

Contact form: <https://www.cnap.lu/accueil-mail/>

Website: www.cnap.lu

[Page for directly contacting the relevant department](#)

Contrôle médical de la sécurité sociale

Address: 125, route d'Esch L-1471 Luxembourg

Telephone number: (+352) 26 19 13-1

Website: <https://mss.gouvernement.lu/fr/annuaire.html?idMin=257>

Benefits for workplace accidents and occupational illnesses

This chapter provides information about everything you need to know in order to claim benefits for workplace accidents and occupational illnesses.

If you have worked and paid social security contributions in another European Union country, the corresponding periods may be taken into account to determine your right to benefits for workplace accidents and occupational illnesses in Luxembourg.

In what situation can I claim?

You are covered against risks relating to workplace accidents and occupational illnesses if you carry out a salaried or self-employed professional activity. Schoolchildren and students are also covered.

What conditions do I need to meet?

The insurance covers:

- accidents sustained while at work;
- accidents sustained while travelling to and from work;
- occupational illnesses which appear on an [official list which can be viewed on the website of the Accident Insurance Association](#) (*Association d'assurance accident - AAA*).

Benefits in kind and in cash are awarded under the same conditions as those applicable to sickness benefits, in principle with no contribution to costs from you.

What am I entitled to and how can I claim?

Benefits in kind

You have access to health insurance treatment and to nursing care benefits relating to an occupational illness or a workplace accident. Please note that these benefits are provided by the National Health Fund (CNS) on behalf of the AAA.

Benefits for non-financial damages

If, after healing, you remain fully or partially unfit to work, you may receive an allowance

- for physiological damage and loss of amenities of life in order to compensate for the loss of quality of life and the loss of value on the job market;
- to compensate for pain endured until healing;
- for aesthetic damage.

Cash benefits

- While you are unable to work following an occupational accident or illness, your salary and your cash benefits may be maintained under the same conditions as when you are rendered unfit through illness;
- you may have access to a partial accident benefit if you can return to work after an occupational accident;
- a full accident benefit may be granted to you until your health has returned to normal after you no longer have the right to cash benefits. The benefits are equal to your remuneration, subject to social security contributions, as it stood prior to the accident.
- a professional tide-over benefit equivalent to 85% of the full benefit is available if vocational rehabilitation measures apply.

Survivors' benefits

- Orphan benefit for children;
- Survivor's benefit for a spouse or partner;
- Allowance for psychological damage.

Jargon busters

- **Accident Insurance Association** (*Association d'Assurance Accident - AAA*): Public body responsible for the prevention and compensation of workplace accidents and occupational illnesses.
- **National Health Fund** (*Caisse nationale de santé - CNS*): Health insurance fund for all private sector workers, salaried employees and self-employed persons.
- **Healing**: The point when, following a period of treatment or care, the injury is mended and takes on a definitive nature, and where no further treatment is deemed necessary, except to avoid any further complications. It is at this point that it is possible to ascertain a certain degree of permanent incapacity following an accident.

Forms you may need to fill in

[The forms relating to workplace accidents and occupational illnesses are available for download on the AAA website.](#)

Know your rights

The links below provide a legal definition of your rights. They are not European Commission websites and they do not represent the views of the Commission:

- [Further information is available on the AAA website.](#)
- [Further information is available in the Luxembourg State administrative guide.](#)

Commission publications and websites:

- [Social security services: your rights as a European citizen abroad](#)

Who do you need to contact?

Association Assurance Accident

Address: 125, route d'Esch, L-2976 - Luxembourg

Telephone number: +352 26 19 15 - 1

E-mail: prestations.aaa@secu.lu

Website: www.aaa.public.lu

Contact form: <https://aaa.public.lu/fr/support/contact.html>

Vocational rehabilitation benefits

This chapter provides information on everything you need to know to claim vocational rehabilitation benefits.

In what situation can I claim?

If you are no longer able to exercise your last profession (your last job) although not affected by a general inability to work, you may be able to claim for **vocational rehabilitation benefits** (*prestations de réinsertion professionnelle*).

What conditions do I need to meet?

You can claim for vocational rehabilitation benefits if you fit one of the following descriptions:

- you are ill for an extended period;
- you have put in a claim for an invalidity pension;
- you benefit from a temporary invalidity pension.

The *Contrôle Médical de la Sécurité Sociale* may find that you do not fulfil the benefit conditions or the maintenance of an invalidity pension, while finding that you are unable to carry out the job you last held. With your agreement, a joint committee will be arranged to decide on redeployment, and the employer will be notified. The occupational doctor will see and examine you within a period of approximately two weeks.

- If the occupational doctor decides that you are not able to carry out your last work position, a redeployment procedure (vocational rehabilitation) will be launched.
- If the occupational doctor decides that you are able to carry out your last work position, or if you do not present yourself for the examination, you must return to work.

What am I entitled to and how can I claim?

In the event that the occupational doctor recommends vocational rehabilitation, you can benefit from either internal or external redeployment.

- For **internal redeployment**, you must present yourself to your employer to return to work, but in a position or a system suitable to your state of health.
- For **external redeployment**, your employment contract will cease to be effective and you must present yourself to ADEM to register as a jobseeker. The relevant department will remain at your disposal to provide assistance in finding a suitable job. In the meantime, you will be eligible for unemployment benefits.

If your internal or external redeployment leads to a reduction in your remuneration, you will have the right to a compensation allowance.

If at the end of the unemployment benefits you have not been able to be redeployed, you will receive a professional tide-over benefit and you will remain registered with ADEM.

[Further information is available on the ADEM website.](#)

Jargon busters

- **Social Security Medical Inspectorate** (*Contrôle médical de la sécurité sociale - CMSS*): Competent administration for all medical issues. Its opinions are binding on the social security institutions.
- **Agency for Development of Employment** (*Agence pour le Développement de l'Emploi - ADEM*): Public service in charge with guiding job seekers, establishing and paying unemployment benefits.
- **Joint committee**: Committee made up of representatives from social partners, the CMSS, ADEM, the Ministries for Work and Health, which decides on the internal or external redeployment of employees.

Know your rights

The links below provide a legal definition of your rights. They are not European Commission websites and they do not represent the views of the Commission:

- [Further information on internal redeployment is available on the ADEM website.](#)
- [Further information on external redeployment is available on the ADEM website.](#)

Commission publications and websites:

- [Social security services: your rights as a European citizen abroad](#)

Who do you need to contact?

Agence pour le Développement de l'Emploi

Address: 10, rue Bender L-1229 Luxembourg - for local agencies, visit the website.

Telephone numbers

for jobseekers: +352 247 - 88888

for employers: +352 247 - 88000

E-mail: info@adem.public.lu

Website: <http://www.adem.public.lu>

Contrôle médical de la sécurité sociale

Address: 125, route d'Esch L-1471 Luxembourg

Telephone number: (+352) 26 19 13-1

Website: <https://mss.gouvernement.lu/fr/annuaire.html?idMin=257>

Old-age and survivors

Old-age pensions and benefits

This chapter provides information about everything you need to know to claim old-age pensions and benefits.

If you have worked and paid social security contributions in another country of the European Union, the corresponding periods may be taken into account to determine your right to old-age pensions and benefits in Luxembourg.

In what situation can I claim?

If you carry out a professional occupation (employed or self-employed) or if you receive a replacement income (sickness cash benefits, maternity allowance, occupational accident or unemployment benefits), you are covered by the general pension insurance scheme.

What conditions do I need to meet?

Your access to the various types of old-age pensions and benefits is subject to a condition of age and insurance periods.

Generally speaking, we can distinguish the following insurance periods:

- compulsory insurance;
- continuous voluntary insurance;
- optional insurance;
- retroactive purchase;
- additional periods.

These different periods are automatically listed in your [insurance records](#) with the *Centre Commun de la Sécurité Sociale (CCSS)*. Additional periods are listed upon request from the insured party. Periods carried out in another State will not appear in this file, and you should disclose whether you have worked in another country at the time of submitting your claim.

Conditions for allocating old-age pension

The old-age pension is awarded from the age of 65, on the condition that 120 months of compulsory insurance, continuous insurance, optional insurance or retroactive purchase periods have been fulfilled.

If you benefit from an old-age pension, your performance of a professional activity has no effect on the pension benefit.

Conditions for allocating early old-age pension

Early old-age pension may be provided:

- at the age of 57, if you can justify a period of 480 months of compulsory insurance;
- at the age of 60 if you can justify 480 months of compulsory insurance, continuous insurance, optional insurance, retroactive purchase periods and additional periods, of which at least 120 months are from compulsory insurance, continuous insurance, optional insurance and retroactive purchase periods.

A financial condition is added to the allocation of early old-age pension:

- In principle you are allowed to carry out a professional activity while being beneficiary of an early old-age pension, but this activity may affect the granting, maintenance and calculation of your pension.
- A distinction is made between salaried and unsalaried activity.

For further information on this topic, [please refer to the appropriate chapter of the CNAP information brochure](#).

What am I entitled to and how can I claim?

You can request retirement if you have reached the age limit for working or if you have paid social security contributions for a sufficient length of time in order to take advantage of your pension rights.

The old-age pension is made up of:

- **flat-rate amounts** granted based on the insurance period (within a limit of 40 years);
- **proportional amounts** granted based on professional taxable income received throughout your working life.

The gross annual amount of the pension is calculated on an index of 100 of the cost of living in relation to the base year of 1984. Therefore, the amount obtained is adapted to the average of this index and the applicable revaluation factor, divided by 12 in order to obtain the monthly amount.

Further information on the calculation of retirement pension amounts is available on the [CNAP website](#).

If you do not fulfil the conditions for obtaining a pension at the age of 65, even allowing for time spent working in another country, the social security contributions paid on your behalf will be refunded upon request.

Pension claims should be sent to CNAP, if possible several months before you reach the required age.

Jargon busters

- **National Pension Insurance Fund** (*Caisse nationale d'assurance pension - CNAP*): Institutions for all persons covered by the pension insurance scheme for the private sector.
- An **early old-age pension** should not be confused with early retirement benefit: the first pension statement and the second unemployment statement.
- **Optional insurance and retroactive purchase**: voluntary insurances enabling people who interrupted their professional activity for family reasons (including to raise a child) to complete their insurance records.
- **Additional periods**: periods not covered by contributions and which have less value, including periods of study and professional training.

Forms you may need to fill in

[The forms relating to pension claims can be downloaded from the CNAP website.](#)

Know your rights

The links below provide a legal definition of your rights. They are not European Commission websites and they do not represent the views of the Commission:

- [Further information is available in the Luxembourg State administrative guide.](#)
- [Old-age pension in Luxembourg information brochure available for download from the CNAP website.](#)

Commission publications and websites:

- [Retiring abroad: your rights as a European citizen](#)

Who do you need to contact?

Caisse Nationale d'Assurance Pension

Address: 1a boulevard Prince-Henri, L-2096 Luxembourg

Telephone number: +352 224141-1

Contact form: <https://www.cnap.lu/accueil-mail/>

Website: <http://www.cnap.lu>

[Page for directly contacting the relevant department](#)

Pensions in favour of survivors

This chapter provides information on all you need to know about claiming survivors' pensions.

If the deceased worked and paid social security contributions in another European Union country, the corresponding periods may be taken into account to determine your right to survivors' benefits in Luxembourg.

In what situation can I claim?

In the event of the death of a working insured person (employee) or of the beneficiary of an invalidity or old-age pension, their spouse or legal partner has, in principle, the right to a benefit known as the survivor's pension.

The following are liable to benefit from a survivor's pension:

- the surviving spouse (widow or widower);
- the surviving partner;
- the divorced spouse;
- the former partner;
- the direct or indirect relatives up to the second degree who lived with the insured person;
- orphans.

What conditions do I need to meet?

Conditions prior to allocation

There are several cases in which the spouse or partner of the deceased insured person or beneficiary of the pension may receive a survivor's pension:

- no waiting period is required if the deceased insured person was the beneficiary of an old-age or invalidity pension;
- in other cases, the deceased is required to have undergone at least 12 continuous months of compulsory insurance over the three years prior to their death;
- no waiting period is required if the death is due to an occupational accident or illness.

Conditions for the spouse (or legal partner)

In the event of the death of the insured party, the surviving spouse may claim a survivor's pension if:

- the marriage had lasted at least 1 year at the time of the death or after the retirement of the insured party owing to invalidity or age;

- the insured party was not the beneficiary of an invalidity or old-age pension at the time of the marriage;

except where the death came as a result of an accident occurring after the marriage or where a child was born or conceived during the marriage.

Conditions for a divorced spouse (or former partner)

- A divorced spouse or former partner must not have remarried or entered into a new legal partnership.
- The survivor's pension of a divorced spouse is established based on insurance periods completed by the insured spouse during the marriage in relation to the total duration of the insurance periods taken into account.
- If, at the time of death of the insured person, there was one (or more) divorced spouse(s) and a current spouse, the survivor's pension will be distributed between the claimants as a proportion of the duration of the various marriages.

Conditions for family members

To be considered as a person treated as the surviving spouse, all of the following conditions must be met:

- the person must have lived in cohabitation with the deceased insured party or beneficiary of the pension for at least 5 years before their death;
- have been part of their household during the same period;
- the insured person or beneficiary of the pension must have contributed a preponderant portion of their support during the same period;
- they must be over 40 years of age at the time of death of the insured person or beneficiary of the pension.

Conditions for orphans

Legitimate children have a right to an orphan's pension after the death of either their father or mother, as long as they are not married or engaged in a partnership (unless they are a student).

The orphan's pension is awarded up to the age of 18, and in the event that the person is a student, up to the age of 27.

What am I entitled to and how can I claim?

How is the pension calculated?

The survivor's pension is equivalent to a portion of the personal pension to which the deceased had a right or to which they would have had a right in the event of invalidity:

	Survivor's pension for spouse or partner	Orphan's pension
Flat-rate amounts	1	1/3
Proportional amounts	3/4	1/4
Special flat-rate amounts	1	1/3
Special proportional amounts	3/4	1/4

A survivor's pension may come in addition to a professional activity, personal benefits, replacement income or even with another pension. This falls within certain limits.

If the amount of the survivor's pension and the personal income of the beneficiary is above a certain amount, the amount will then be reduced.

Equally, the total of all survivors' pensions may not exceed 100% of the pension (or of the presumed pension) of the deceased. Likewise, it may not be greater than the average of

the highest five salaries of the deceased during their period of affiliation. The pensions are reduced proportionally if this is the case.

Please note that the orphan's pension may not be less than EUR 562.53 and the surviving spouse's or partner's pension may not be less than EUR 2,061.25, if the insured person had a full record of 40 years.

For orphans who lost both parents, the pension is double the determined amount.

Survivor's pension claims should be sent to the National Pension Insurance Fund (CNAP).

Jargon busters

- **National Pension Insurance Fund** (*Caisse Nationale d'Assurance Pension - CNAP*): Body managing all insured persons under the general pension insurance scheme from the private sector.
- **Legal partner**: Partnership (or common law union) shall be understood to mean the domestic cohabitation of two people of either the same or different genders, who live as a couple and who have declared their partnership before a Civil Registrar in the community where their place of domicile is located.
- **Legitimate children**: Legitimate children and children treated as equivalent, including legitimised, adopted, biological children and orphans without father or mother, on the condition that the insured party or the beneficiary of the pension had taken care of the wellbeing and education of said children during the 10 months prior to their death.

Forms you may need to fill in

[The form relating to claims for a survivor's pension can be downloaded from the CNAP website.](#)

Know your rights

The links below provide a legal definition of your rights. They are not European Commission websites and they do not represent the views of the Commission:

- [Further information is available in the Luxembourg State administrative guide.](#)
- [A Luxembourg survivor's pension information brochure can be downloaded from the CNAP website.](#)

Commission publications and websites:

- [Bereavement benefits: your rights as a European citizen abroad](#)

Who do you need to contact?

Caisse Nationale d'Assurance Pension

Address: 1a boulevard Prince-Henri, L-2096 Luxembourg

Telephone number: +352 224141-1

Contact form: <https://www.cnap.lu/accueil-mail/>

Website: <http://www.cnap.lu>

[Page for directly contacting the relevant department](#)

Social assistance

Social inclusion income and other social assistance benefits

This chapter provides information on everything you need to know about claiming a social inclusion income and other social assistance benefits.

If you have resided in another European Union country, these residence periods may be taken into account to determine your right to a social inclusion income and other social assistance benefits in Luxembourg.

In what situation can I claim?

Social inclusion income (*Revenu d'inclusion sociale - REVIS*)

If your income does not reach a certain threshold, deemed to be a subsistence level, the social inclusion income enables you to benefit from public financial assistance.

The REVIS aims to combat social exclusion, providing basic means of subsistence which can be associated to social and employment activation measures.

Cost-of-living subsidy (*Allocation de vie chère*)

To benefit from a cost-of-living subsidy, your household income must not exceed a certain threshold. The amount of the subsidy is determined based on the composition of your household (single or living with more than one other person).

Contribution to the cost of services provided as part of geriatric care

A "geriatric care" top-up may be paid to older people admitted to sheltered accommodation or living in hospital, but whose personal resources do not cover the accommodation costs (care costs) and personal needs.

Income for severely disabled people (*Revenu pour personnes gravement handicapées*)

Anybody may benefit from this allowance if they suffer from a severe disability which excludes them from a professional occupation corresponding to their individual needs or which prevents them from carrying out any work owing to the severity of their disabilities.

What conditions do I need to meet?

SOCIAL INCLUSION INCOME

Age conditions

You must be at least 25 years old, except:

- if you are raising a child for whom you benefit from family allowance;
- if you are pregnant (from 8 weeks prior to delivery);
- if you are a carer for a beneficiary of the long term care insurance;
- if you are unable to be in gainful employment following illness or disability.

Conditions of residency

- you must be domiciled and effectively reside within the Grand Duchy of Luxembourg;
- if you are not a national of Luxembourg, another Member State of the EU, the EEE or of the Swiss Confederation and you do not have refugee status, you must have resided in Luxembourg for at least five years over the course of the 20 years preceding the claim;
- if you are a national of another Member State of the EU, the EEE or the Swiss Confederation, you do not have the right to the REVIS benefits during the first three months of your stay in Luxembourg.

Income conditions

- you must have an income lower than the minimum wage set by law, either individually or with other people in your household. You can view the [conditions](#) on the Luxembourg government website;
- the REVIS is set based on the composition of your household.

Special conditions

To benefit from the REVIS, you must also:

- be seeking for a job while being registered as a job-seeker with the Agency for development of employment (*Agence pour le développement de l'emploi* – ADEM), unless exempt;
- be prepared to exhaust all other options provided by Luxembourg or foreign legislation to improve your situation;
- be fit to undergo occupational integration activities;
- respect the cooperation agreement signed with the ADEM and participate in active employment measures proposed by this Agency;
- collaborate with the National Social Inclusion Office (*Office national d'inclusion sociale* – ONIS);
- not have deliberately left your previous job;
- not benefit from any leave without pay;
- not have reduced your working hours on your own initiative;
- not have been dismissed for gross misconduct;
- not be subject to detention under remand or any penalty depriving you of your freedom;
- not leave the national territory for more than 35 days in a given calendar year and respond when summoned by the National Solidarity Fund (*Fonds national de solidarité* – FNS);
- not pursue higher education.

COST-OF-LIVING SUBSIDY

You must fulfil the following conditions:

- benefit from the right to stay in the Grand Duchy of Luxembourg, to be effectively domiciled and reside there;
- having resided in Luxembourg for an uninterrupted period of 12 months immediately preceding the month during which the claim is lodged;
- have, whether alone or jointly with people living with you, an annual income below a certain [threshold](#).

CONTRIBUTION TO THE COST OF SERVICES PROVIDED AS PART OF GERIATRIC CARE

To benefit from this allowance, you must:

- be admitted to a retirement home, a treatment centre, a medico-social establishment for an indeterminate period, or stay in a hospital and for this to be considered a case of simple accommodation;
- not have sufficient income and/or savings to cover the cost of geriatric care and accommodation.

INCOME FOR SEVERELY DISABLED PEOPLE

To benefit from this allowance, you must:

- be at least 18 years old;
- present at least a 30% reduced ability to work because of a physical, mental, sensorial or psychological disability and/or owing to psychosocial difficulties aggravating the disability (diagnosed before the age of 65);
- present a state of health incompatible with any strain of work;
- legally reside, be domiciled and effectively reside in Luxembourg. For their part, non-EU nationals must have legally resided in Luxembourg for at least 5 years in the course of the last 20 years.

The person recognised as a disabled employee, who, due to reasons beyond their control, does not have access to paid employment and has resources less than the income for severely disabled persons can also benefit from the allowance.

What am I entitled to and how can I claim?

SOCIAL INCLUSION INCOME

You can make a claim to access the REVIS at the National Solidarity Fund (*Fonds national de solidarité* - FNS).

The social inclusion income consists of either an inclusion allowance or an activation allowance:

- the **inclusion allowance** (*allocation d'inclusion*) is a financial support aimed at households, which ensures basic means of subsistence for persons who have no income or whose income does not reach a certain threshold;
- the **activation allowance** (*allocation d'activation*) is a pay indemnity for persons participating in an activation measure.

The **amount of the social inclusion income** depends on the composition of your household. It constitutes the lower limit of the resources, below which in Luxembourg you are deemed to be living in poverty.

Below is the monthly amount of the inclusion allowance:

Basic flat rate amount per adult	EUR 837.55
Basic flat rate amount per child	EUR 260.04
Increase per child in case of single-parent household	EUR 76.83
Amount for common expenses per household	EUR 837.55
increase in case of children	EUR 125.68

COST-OF-LIVING SUBSIDY

The amount of the allowance is determined based on the composition of your household. The allowance may only be granted once a year for each claimant. This also applies in the event of any change to the composition of your household and/or your income situation. [The allowance amounts can be viewed on the FNS website.](#)

CONTRIBUTION TO THE COST OF SERVICES PROVIDED AS PART OF GERIATRIC CARE

The amount of the supplement arises from the difference between the accommodation costs and the income of the applicant, minus a tax-free amount intended to cover personal needs (pocket money).

To calculate the supplement, all the applicant's income is considered; furthermore, the claimant must have exhausted all their assets up to a [certain threshold](#).

INCOME FOR SEVERELY DISABLED PEOPLE

Income for severely disabled people amounts to EUR 1,675.09.

Your potential professional or replacement income does have an impact on the amount of the benefit.

If your professional or replacement income amounts to less than 30% of the income for severely disabled people (i.e. EUR 502.53), it can be fully cumulated with the latter.

If your professional or replacement income is above EUR 502.53, the income for severely disabled people is decreased by the amount exceeding EUR 502.53.

Jargon busters

- **Agency for Development of Employment** (*Agence pour le développement de l'emploi - ADEM*): public service in charge with guiding job seekers, establishing and paying unemployment benefits;
- **National Solidarity Fund** (*Fonds National de Solidarité - FNS*): public institution with the role of managing and awarding social assistance benefits;
- **National Social Inclusion Office** (*Office national d'inclusion sociale – ONIS*): public service in charge of the intensive follow-up of beneficiaries and the organisation of the stabilisation and/or activation measures;
- **EU - EEE**: the 27 Member States of the European Union plus Norway, Iceland and Liechtenstein.

Forms you may need to fill in

- [The application form for the social inclusion income can be downloaded from the FNS website.](#)
- [The application form for the cost-of-living allowance can be downloaded from the FNS website.](#)
- [The application form for the supplement for geriatric care can be downloaded from the FNS website.](#)

Know your rights

The links below provide a legal definition of your rights. They are not European Commission websites and they do not represent the views of the Commission:

Social inclusion income:

- [Further information is available on the FNS website.](#)
- [Further information is available in the Luxembourg State administrative guide.](#)

Cost-of-living subsidy:

- [Further information is available in the Luxembourg State administrative guide.](#)
- [Further information is available on the FNS website.](#)

Contribution to the cost of services provided as part of geriatric care:

- [Further information is available in the Luxembourg State administrative guide.](#)
- [Further information is available on the FNS website.](#)

Commission publications and websites:

- [Social security services: your rights as a European citizen abroad](#)

Who do you need to contact?

Office national d'inclusion sociale

Address: 12-14, avenue Emile Reuter L - 2420 Luxembourg

Telephone number: +352 247-83636

Website: <https://onis.gouvernement.lu/en.html>

Fonds National de Solidarité

Address: 8-10, rue de la Fonderie L- 1531 Luxembourg

Telephone number: +352 49 10 81-1

E-mail: fns@secu.lu

Contact form: <https://www.fns.lu/contact/>

Website: <http://www.fns.lu>

[Social Security offices](#)

Unemployment

Unemployment

This chapter provides information on everything you need to know to claim unemployment benefits in Luxembourg.

If you have worked and paid social security contributions in another country in the European Union, the corresponding periods can be taken into account to determine your right to unemployment benefit in Luxembourg.

In what situation can I claim?

If you have contributed to social security and you have been involuntarily deprived of your job, you may, under certain conditions, access unemployment benefits.

What conditions do I need to meet?

To gain access to unemployment benefits, you must fulfil the following conditions:

Full unemployment (*Chômage complet*)

- be between 16 and 64 years old;
- have worked in Luxembourg for at least 26 weeks (at least 16 hours per week) over the course of the 12 months prior to the date of registering as a jobseeker. This condition is not required of young jobseekers;
- be involuntarily out of work;
- be domiciled in Luxembourg at the time of the notification of your dismissal;
- be fit for work, available for the job market and prepared to accept any suitable work;
- be registered as a jobseeker with the *Agence pour le Développement de l'Emploi (ADEM)*.

Early retirement (*Préretraite*)

Early retirement relates to private sector employees aged over 57 who have entered into a special agreement with their employer. There are several forms of early retirement:

- progressive early retirement (*préretraite-progressive*), which gives eligible companies a possibility to allow a salaried employee to gradually to reduce his/her degree of employment;
- early retirement-adjustment (*préretraite-ajustement*), which involves employees of a company in the event of the closure or restructuring of this company;
- the early retirement of shift workers and night workers relating to private and public sector employees having spent at least 20 years of their career in a fixed night shift or 15 years of shift work or night work during the 25 years immediately preceding their early retirement.

Further information about early retirement is available in the [Luxembourg State administrative guide](#).

What am I entitled to and how can I claim?

To register as a jobseeker, please contact the [relevant regional office of the Agence pour le développement de l'emploi \(ADEM\) linked to your place of residence](#). Registration will take place on the date of first personal presentation with ADEM.

Full unemployment

- The benefits period shall be equal to the duration of work, calculated in full months, carried out over the 12 months preceding the date of registration as a jobseeker.
- All jobseekers who meet the conditions of entry can receive benefits for 365 days per 24 month period.
- The maximum period of 12 months may be extended under certain conditions (age, ability to work or insurance period).

The amount of the benefits, within the limit of a certain threshold, is equal to:

- 80% of the gross salary of the last three months prior to becoming unemployed; or
- 85% of the gross salary of the last three months prior to becoming unemployed, if the person who is without work is responsible for at least one child for whom they receive family allowances and child benefits.

Under certain conditions, the reference period of three months may be extended to six months in the event of significant variations in the level of salary.

The amount of the benefits may not exceed 250% of the minimum wage, meaning EUR 5,968.49. This ceiling will be decreasing and reduced as the compensation continues.

Self-employed people covered for at least 2 years by compulsory insurance and who have stopped working owing to economic or financial difficulties, for medical reasons or in the event of force majeure, may also access these benefits, on the condition that they register with ADEM. The benefits are determined based on the income on which pension insurance contributions are calculated.

As a general rule, the benefits are paid without any tide-over period. However, for **young unemployed people**, unemployment benefits are paid after a period of 39 weeks (or 26 weeks in some cases) following the date of their registration as a jobseeker. Young unemployed people registered with ADEM within 12 months following their training may access benefits of 70% of the minimum wage (40% of the minimum wage for young people aged 16 or 17 and who have not passed an apprenticeship exam).

Early retirement

The payment period for early retirement may not exceed 3 years and the amount, which reduces every year, corresponds to:

- 85% of the reference salary for the first period of 12 months;
- 80% of the reference salary for the following 12 months;
- 75% of the reference salary for the last 12 months.

The monthly early retirement benefits are calculated based on the average gross salary for the 12 months immediately preceding the awarding of early retirement, capped at five times the monthly minimum wage (making EUR 11,937 in 2023). In the event of progressive early retirement (gradual reduction in working hours), the amount of the benefits is adapted to the employee's period of working hours, on a pro rata basis.

Jargon busters

- **Agence pour le Développement de l'Emploi (ADEM):** public service in charge with guiding job seekers, establishing and paying unemployment benefits.
- **Full unemployment:** workers in "full unemployment" are workers whose employment contract has come to an end, as compared with a worker in "partial unemployment", who is still bound by an employment contract but whose work is temporarily reduced or suspended.
- **Young unemployed person:** a young person who has just finished or interrupted their basic training and who is seeking a job. The waiting period before receiving benefits depends on the duration of studies or the fact that they have taken professional training courses or carried out a traineeship.

Forms you may need to fill in

The forms to be completed are available online on the [ADEM website](#).

Know your rights

The links below provide a legal definition of your rights. They are not European Commission websites and they do not represent the views of the Commission:

- Page about unemployment in [the Luxembourg State administrative guide](#).
- [Are you looking for a job? Welcome to ADEM](#).

Commission publications and websites:

- [Unemployment and social security benefits: your rights as a European citizen abroad](#)

Who do you need to contact?

Agence pour le Développement de l'Emploi (ADEM)

Address: 10, rue Bender L-1229 Luxembourg - For local agencies visit the website.

Telephone number

for jobseekers: +352 247 - 88888

for employers: +352 247 - 88000

E-mail: info@adem.public.lu

Website: <http://www.adem.public.lu/>

Moving abroad

Combining periods of insurance or residence abroad

This chapter provides information on your rights in terms of social security if you return or come to Luxembourg after having paid social security contributions in other European Union Member States, Iceland, Norway, Liechtenstein or Switzerland.

For the UK, 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 whether they fall within the scope of situations described in Art 32 of the Withdrawal Agreement and/or come under domestic legislation and the Protocol on Social Security Coordination attached to the Trade and Cooperation Agreement.

Social security and European regulations

If you have lived, worked and/or paid social security contributions in another EU country or in a country linked by European regulations, the period of your residence in any of these countries, the period during which you have worked or paid contributions there may be taken into account for the calculation of your benefits in Luxembourg.

European regulations guarantee equality of treatment, the unrestricted exporting of social security benefits and the totalisation of insurance or residency periods. Therefore:

- in Luxembourg you have the same rights and the same obligations in terms of social security as a Luxembourg citizen;
- you can receive social security benefits from your country of origin when you reside in Luxembourg;
- your insurance or occupational activity or residence periods in other countries will be added up, if necessary, to access social security benefits and to calculate the amount, for example for retirement pensions, in Luxembourg.

What are the benefits awarded?

European coordination regulations in terms of social security provide for application methods for the awarding of social security benefits. The benefits involved are:

- family benefits;
- healthcare benefits;
- sickness cash benefits (including maternity and paternity);
- care benefits (long term care);
- invalidity benefits;
- occupational accidents benefits;
- occupational illnesses benefits;
- unemployment benefits;
- retirement pensions;
- survivor's pensions;
- death allowances.

How can I claim?

In order to confirm insurance periods, the social security bodies use specific documents and forms: [structured electronic documents and portable documents](#).

Sickness and maternity benefits

- Periods of professional activity in another country are taken into account by the National Health Fund (CNS) to grant maternity benefits.

- To maintain your right to healthcare after your disaffiliation in Luxembourg, you must attest to a continuous insurance period immediately prior to the loss of coverage. Insurance in another country is also taken into account and must be stated on the European document.
- If you come from a European country or you were insured until the present time, you can voluntarily continue your health insurance in Luxembourg by presenting a certificate for your insurance periods spent in the previous country to the Joint Centre for Social Security (*Centre commun de la sécurité sociale - CCSS*).

Unemployment benefits

- If you have worked in Luxembourg and if you have lost your job, the periods during which you worked in another European Union country, Iceland, Norway, Liechtenstein or Switzerland will be taken into account in accessing unemployment benefits in Luxembourg.
- You should provide Agency for Development of Employment (ADEM) with portable document U1 certifying your insurance or professional activity periods. You can obtain this certification from the social security body and/or the job service of the country you have left. Check with them that you have all the necessary documentation.
- You have the right to increased unemployment benefit for children for whom you are responsible, even if your child resides in another State.
- If you benefit from unemployment benefits from another European country, you can come to Luxembourg to look for work without losing the payment of these allowances. You should register with ADEM services by presenting the portable document U2 completed by the body providing your unemployment benefits.

Old-age, invalidity and survivors' pensions

Upon your pension request sent to National Pension Insurance Fund (CNAP), you should provide information on:

- the country or countries in which you have worked;
- the name and address of your employers;
- the period during which you worked there;
- your social security number.

CNAP will then ask the pension funds of each State whether you have worked or lived there in order to obtain a certificate for the insurance periods P5000 you have completed. These periods will be added to your Luxembourg periods to gain access to a pension and for the calculation of this pension, except where the Luxembourg insurance period is less than 12 months. In this case, CNAP is not required to add the periods, but rather the other State(s) concerned must take into account these insurance months in their calculation of your pension.

Jargon busters

- **Coordination (in terms of social security):** All the rules shared by the Member States guarantee the continuity of social protection rights for people moving around Europe.

Know your rights

The link below provides a legal definition of your rights. It is not a European Commission website and it does not represent the views of the Commission:

- [Further information is available on the official presentation portal of the Grand Duchy of Luxembourg.](#)

Commission publications and websites:

- [Coordination of social security in the European Union](#)

Who do you need to contact?

Agence pour le développement de l'emploi (ADEM)

Address: 10, rue Bender L-1229 Luxembourg – For local agencies, visit the website.

Telephone number

for jobseekers: +352 247 - 88888

for employers: +352 247 - 88000

E-mail: info@adem.public.lu

Website: <http://www.adem.public.lu>

Caisse nationale de santé

Address: 125 route d'Esch, L-1471 Luxembourg

Telephone number (from Luxembourg): +352 27 57-1

E-mail: cns@secu.lu

Website: [CNS // Luxembourg](#)

[Page for directly contacting the relevant department](#)

Centre commun de la sécurité sociale

Address: 125, route d'Esch, L-2975 Luxembourg

Telephone number: +352 40 14 1-1

[Contact form: https://ccss.public.lu/fr/support/contact.html](https://ccss.public.lu/fr/support/contact.html)

Caisse pour l'avenir des enfants

Address: 6, boulevard Royal, L-2449 Luxembourg.

Telephone number: +352 47 71 53-1

Contact form: <http://www.cae.public.lu/fr/support/contact.html>

Website: <http://www.cae.public.lu/fr.html>

Caisse nationale d'assurance pension

Address: 1a, boulevard Prince Henri L-1724 Luxembourg

Telephone number: +352 22 41 41 -1

[Contact form: https://www.cnap.lu/accueil-mail/](https://www.cnap.lu/accueil-mail/)

Website: www.cnap.lu

Office national d'inclusion sociale (ONIS)

Address: 12-14, avenue Émile Reuter L - 2420 Luxembourg

Telephone number: +352 247-83636

Website: <https://onis.gouvernement.lu/en.html>

Fonds national de solidarité

Address: 8-10, rue de la Fonderie L- 1531 Luxembourg

Telephone number: (+352) 249-10811

E-mail: fns@secu.lu

Website: <http://www.fns.lu/>

[A list of Social Security offices and their addresses is available on the website of the Ministry of Family Affairs, Integration and the Greater Region.](#)

Main residence

Usual residence

This chapter provides information on the conditions required to establish your main residence in Luxembourg and the consequences on your rights to Luxembourg social security benefits.

What is a "usual residence"?

In Luxembourg, the "usual residence" is your legal place of domicile. To establish your legal place of domicile in Luxembourg, you must be permitted to live there, legally declared through registration in the community population register and have your main residence there.

As a citizen of an EU-EEE country or Switzerland, you have the right to stay in Luxembourg or establish your place of residence there, without prior authorisation, as long as you have a valid identity card or passport.

To establish your main residence in Luxembourg, you must first carry out a **declaration of arrival** with the local authorities in the area in which you live, within 8 days. The area in which you live may then provide you with a residence certificate, which will be useful for your employer and for your social coverage procedures.

Within a period of 3 months, you should then carry out a **registration declaration** for all the members of your family. This will enable you to obtain a registration certificate.

What conditions do I need to meet?

If you work in Luxembourg, either as a salaried employee or self-employed, you must be affiliated with social security for all branches: sickness-maternity insurance, workplace accident and occupational illness insurance, nursing care insurance, pension insurance, family benefits and unemployment coverage.

As a worker you can benefit from Luxembourg social security benefits, **even if you do not live in Luxembourg**, as long as you meet the required conditions: sickness benefits, maternity and workplace accidents, healthcare, funeral grants, accident and damage benefits, occupational integration measures, nursing care benefits, old-age and invalidity pensions, family benefits.

One single exception: in the event that you lose your job, you will get unemployment benefits in your country of residence. The same applies if you are self-employed. However, if there is no unemployment system for self-employed persons in the country in which you live, you may receive unemployment benefits in Luxembourg. You can, however, register as a jobseeker in both Luxembourg and in your country of residence.

Please note that your insurance also extends to **members of your family, even if they do not live in Luxembourg**, on the condition that they are not personally insured as part of their professional activity. Under certain conditions, they have the right to healthcare, funeral grants, survivors' pensions and benefits, psychological damage compensation, nursing care benefits and family allowance.

If you live in Luxembourg, you have the additional rights unrelated to your professional activity. Social assistance is paid in certain situations of need, potentially in addition to your professional income or to social security benefits: social inclusion income (REVIS), cost-of-life allowance, contribution to costs related to sheltered accommodation for elderly people, income for severely disabled people. These benefits are subject to conditions governing resources.

What am I entitled to and how can I claim?

You can view detailed information relating to the various benefits, along with the methods of putting in claims, in their respective chapters.

Know your rights

The link below provides a legal definition of your rights. It is not a European Commission website, nor does it represent the views of the Commission:

- [Further information is available in the Luxembourg State administrative guide.](#)

Commission publications and websites:

- [Coordination of social security in the European Union](#)

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.

