



Your social security rights in Slovenia



EUROPEAN COMMISSION

Directorate-General for Employment, Social Affairs and Inclusion
Directorate C — Social Affairs
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Your social security rights in Slovenia

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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

Child benefit

This chapter covers the **child benefit** (*otroški dodatek*).

In what situation can I claim?

One of the parents or the guardian of the child is entitled to child benefit. The child must be below 18 years of age and have (permanent or temporary) residence in Slovenia. Income for the family member may not exceed EUR 1,019.86 (January 2018).

Child benefit is not valid for a child who:

- is in employment or carries out farming or sole trader activities or is a company partner;
- receives full care as a result of treatment, education, school or training in an institution where full-time free care lasts for more than 30 days;
- is in foster care;
- has the right to child benefit on the basis of an international agreement;
- does not live with both parents and only one of the parents is entitled to parental rights, if maintenance is not agreed by the Centre for Social Work or defined by a court ruling except in cases where paternity is not registered.

What conditions do I need to meet?

Parents are entitled to child benefit from the day of birth of the child until the first day of the following month in which they no longer fulfil conditions.

A parent has the right to child benefit from 30 days following the birth of the child, which is claimable from the month of the child's birth. In the case of later entitlement to rights the latter will be recognised in the first day of the following month following submission of the application.

The right to child benefit is valid for a maximum of 1 year. For renewed entitlement a parent must submit a form within the month in which the right to child benefit expires.

What am I entitled to and how can I claim?

The amount of child benefit is defined regarding the average net monthly income for the individual member of the household, for which all income and payments are counted (except for payments covering specific needs). For this, household property and the number of children will be counted. Conditions which are (not) accepted in defining the amount of child benefit are listed on the [MDDSZ web site](#).

Allocation information for qualification according to income group can be found on the [MDDSZ web site](#).

Exceptional amount of child benefit will be defined as:

- 30% increase in the case of a single parent family;
- 20% increase in the case where a pre-school child is not included in early childhood education.

Jargon busters

- CSD - [Centre for Social Work](#);
- MDDSZ - [Ministry of Labour, Family, Social Affairs and Equal Opportunities](#)

Forms you may need to fill in

- Unified form for right to public funds;
- [Application for renewal of child benefit and nursery school grant](#)

Know your rights

The links below listing your rights are not European Commission pages and do not represent the view of the Commission:

- [Further information about child benefit](#)
- [Exercise of Rights to Public Funds Act](#)

European Commission publications and web pages:

- [Family benefits: your rights as an EU citizen abroad](#)

Who do you need to contact?

The right to child benefit is examined through the [Centre for Social Work](#) where the child has permanent residence or spends the majority of his/her time.

Other family allowances

This chapter covers other family allowances (*drugi družinski prejemki*):

- **parental allowance** (*starševski dodatek*)
- **childbirth allowance** (*pomoč ob rojstvu otroka*)
- **large family allowance** (*dodatek za veliko družino*)
- **child care allowance** (*dodatek za nego otroka*) and
- **partial payment for loss of earnings** (*delno plačilo za izgubljeni dohodek*)

In what situation can I claim?

Family allowances are intended for parents or guardians as lump sum or monthly allowances for child birth and child care.

Family allowances include:

- [parental allowance](#): a monthly allowance for parents who are not entitled to childbirth allowance;
- [childbirth allowance](#): a lump sum for the purchase of clothing and other necessities, received by one of the parents;
- [large family allowance](#): an annual payment for families with three or more children;
- [child care allowance](#): a monthly payment for a child requiring special care;
- [partial payment for loss of earnings](#): a monthly payment for parents or guardians/foster parents caring for a child with a serious mental developmental disorder or serious physical impairment.

What conditions do I need to meet?

Parental allowance is a right which lasts for 365 days following the birth of a child or longer in case of birth of twins, triplets or premature birth. Both the mother and child must be permanent residents of Slovenia and be currently residing in Slovenia.

For the first 77 days following birth the mother generally has the right to payment (or the father as an exception in the case of the mother's absence). Following 77 days of the child's birth one of the parents can receive payment on the basis of transitory agreement. This right may be attributed to the child's current guardian instead of the parents.

Those not entitled to parental allowance are persons receiving benefits, partial payment for loss of earnings or payment of social security contributions in the case of four or more children, for which the partner receives child care allowance, right of payment for social security contributions as a result of the right to shortened working hours due to parenthood, payment of social security contributions in the case of four or more children or partial payment for loss of earnings for the same child.

Persons entitled to parental allowance are included in pension and disability insurance.

Applications for cash benefit must be submitted a minimum of 30 days prior to or 30 days after birth of the child, upon which the right to benefits will be recognised.

Childbirth allowance is a one-off payment intended for the purchase of required items for the new-born. This right is valid for one of the parents with permanent residence in Slovenia currently residing in Slovenia, for whom the average monthly income for the family member may not exceed 64% of the average monthly salary in Slovenia or EUR 648.47 (January 2017).

Applications for cash benefit must be submitted a minimum of 60 days prior to the anticipated birth date or at the latest 60 days after the birth of the child (for an adoptive parent 30 days following placement of the child in the family at the latest).

Large family allowance is an annual payment intended for families with three or more children under 18 years of age (or 26 years of age if their parents must maintain and protect the child).

The allowance may be received by one of the parents having joint permanent residence as well as the children currently residing in Slovenia or other person (e.g. foster carer), where three or more children from the family live without parents where the average monthly income for the family member may not exceed 64% of the average monthly salary in Slovenia or EUR 648.47 (January 2017).

Applications for the current year are to be filed in the current year.

Child care allowance is a right which may be accessed by one of the parents or other party for a child requiring special care if the child has permanent residence in Slovenia and currently resides in Slovenia. Parents for whom the child is fostered or in an institution with full time free care are not eligible.

The right to the allowance is valid for the period in which the child requires special care up to 18 years of age, and after 18 years of age if the parents must maintain and protect the child.

The opinion of a medical commission is required for the assessment of rights.

Rights enter into effect on birth of the child and are recognised from the first day of the following month on submission of the application.

Partial payment for loss of earnings is the right for one of the parents or other persons who are stopping employment (leaving current job or data from ZRSZ unemployment record) or beginning reduced working hours as a result of caring for a child with a serious mental developmental disorder or serious physical impairment, or a child with a specific illness from the list of serious illnesses. The right to partial payment can also be granted to one of the parents caring for two or more children with a moderate or serious mental developmental disorder or serious physical impairment. In this instance the mother or father of the child also receive the right if they have two or more children who do not have serious developmental disorders.

Conditions for assessment of the recipient are that the child and parent are permanent residents and currently live in Slovenia. The right lasts until the child reaches 18 years of age or maximum 2 months following the death of the child. Parents for whom the child is in an institution with full time free care or in foster care are not eligible.

Applications for cash benefit must be submitted 30 days prior to or at the latest 30 days after stopping employment and last until the child reaches 18 years of age.

What am I entitled to and how can I claim?

Parental allowance

Monthly payment

Per child EUR 252.04

Parental allowance is adjusted twice annually in accordance with the retail price index.

Childbirth allowance

Lump sum payment

Per child EUR 280

Large family allowance

Annual payment

Family with three children EUR 395

Family with more than three children EUR 480

Child care allowance

Monthly payment

Child care allowance	EUR 100
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Child care allowance for a child with a serious mental developmental disorder or serious physical impairment or a child with a specific illness from the list of serious illnesses	EUR 200
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Partial payment for loss of earnings

Monthly payment

Full child care	EUR 734.15 gross
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Reduced working hours	Pro rata partial payment for loss of earnings
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Jargon busters

- MDDSZ - [Ministry of Labour, Family, Social Affairs and Equal Opportunities](#)

Forms you may need to fill in

- [Form for entitlement to parental grant](#) (form DP-1)
- [Form for entitlement to childbirth allowance](#) (form DP-2)
- Form for assessment of right to child benefit - unified form for entitlement to public funds
- [Form for entitlement to large family allowance](#) (form DP-4)
- [Form for entitlement to childcare allowance](#) (form N-1)
- [Form for entitlement to partial payment for loss of earnings](#) (form N-2)

All forms can be found on the [MDDSZ web site](#).

Know your rights

The links below listing your rights are not European Commission pages and do not represent the view of the Commission:

- [Information on family income supplements;](#)
- [Rules amending the Rules on procedures for exercising rights to family benefits;](#)
- [Parental Protection and Family Benefits Act \(ZSPD-1\).](#)

European Commission publications and web pages:

- [Social security: Your rights as an EU citizen abroad](#)

Who do you need to contact?

The right to cash benefit can be assessed at the [Centre for Social Work](#).

Parental protection

This chapter covers parental protection (*starševsko varstvo*):

- **maternity leave** (*materinski dopust*), **paternity leave** (*očetovski dopust*) and **parental leave** (*starševski dopust*) and parental right to reduced working hours resulting from parenthood (*pravica staršev do krajšega delovnega časa zaradi starševstva*);
- the **right to the payment of social security contributions as a result of parenthood in the instance of four or more children** (*pravica do plačila prispevkov za socialno varnost zaradi starševstva v primeru štirih ali več otrok*) and the **right to benefits during nursing** (*pravica do nadomestila v času odmora za dojenje*).

In what situation can I claim?

All persons [included in the insurance list for parental protection](#) are entitled to parental protection and social security contributions for parental protection. They must be covered from the day prior to starting parental leave or for at least 12 months in the past 3 years.

The following are covered by the extent of rights for parental care cover:

- the right to [leave](#);
- the right to [benefit](#) (*starševsko nadomestilo*);
- [the right to part-time work](#) and the right to payment of social security contributions owing to parenthood;
- [the right to the payment of contributions](#) in the instance of four or more children;
- the right to [benefits during nursing](#) and the right to payment of social security contributions during nursing.

What conditions do I need to meet?

Leave is the right to be absent from work as a result of birth and child care and is divided into the following:

- [Maternity leave](#) (*materinski dopust*) as a rule begins 28 days prior to the anticipated date of birth and amounts to 105 calendar days. The mother must compulsorily make use of 15 days of maternity leave. As an exception the father or guardian is entitled to leave in the case of absence (death of mother or abandonment) or incapacity of the mother.
- [Paternity leave](#) (*očetovski dopust*) is the right of the father and is not transferrable. The father is entitled to leave amounting to 30 calendar days.
- [Parental leave](#) (*starševski dopust*) is intended for further care of the child and begins on expiry of maternity leave. Each of the parents is entitled to child care leave (130 days each, of which the mother may transfer 100 days to the father so that the father may use 230 days; the father may transfer all 130 days so that the mother may use 260 days) or the adoptive parent or guardian/foster parent. Leave for an adoptive parent takes effect at the latest 15 days following the placement of the child in the adopted family with the intention of adoption or on announcement of adoption.

[Benefit](#) is compensation or a special payment within the scheme of insurance for parental protection. The types of compensation connected to individual types of leave are:

- maternity allowance during maternity leave;
- paternity allowance during paternity leave for 30 days;
- parental allowance during parental leave.

[The right to part-time work resulting from parenthood](#) (not less than half of full working hours) may be granted to one of the parents caring for:

- a child under 3 years of age;
- moderate or serious physical impairment or moderate or serious mental handicap up to 18 years of age;

- at least two children up until completion of the first year of primary education of the youngest child (1 year of the right is non-transferrable for each of the parents).

Part-time work must include at least half of the weekly working obligations. Rights are to be recognised from the day when the parent begins part-time work if the right has been assessed at least 30 days following the commencement of part-time work. If this is not the case, the right will be recognised from the date of submission of the application.

The [payment](#) of social security contributions in the instance of four or more children belongs to one of the parents leaving employment to care for four or more children. The conditions for receiving this right are that:

- both the child and parent have permanent residence in Slovenia;
- the parent was covered by parental protection or has been actively seeking employment for at least 12 months in the last 3 years.

Entitlement is recognised upon submission of the application, 30 days at the latest following cessation of work and lasts until the completion of the first year of primary education of the youngest child.

What am I entitled to and how can I claim?

Leave

Number of calendar days	
Maternity leave	105 (at least 15 days must be taken)
Paternity leave	30 (15 days prior to the child reaching 6 months of age and 15 days after the parental leave and before the child completes the first year of primary education)
Parental leave	260

Benefit

The base for individual types of benefit is a base from which contributions to social security are calculated for parental care in 12 consecutive months from which the last month is counted as a base from contributions in the month prior to the month of first application for leave. The benefit may not be lower than 55% of the value of minimum wage for ZUTPG indexation and may not be higher than double the value of the average monthly wage for ZUTPG indexation in Slovenia.

Type of benefit	Amount of benefit
Maternity compensation	100% of average base
Paternity compensation	90% of average base (or 100% if the base does not exceed minimum wage – EUR 804.96 gross)
Parental compensation	90% of average base (or 100% if the base does not exceed minimum wage – EUR 804.96 gross)

Right to payment of social security contributions in the instance of four or more children.

The parent has the right to payment of contributions for social security for the minimum wage.

The right to benefit during nursing.

On the basis of confirmation of a specialist paediatrician the mother is entitled to a 1-hour nursing break up until the child reaches 18 months of age.

Age of child	Benefit amount
Up to 9 months	1/8 of the value of minimum wage according to ZUTPG
9 to 18 months	Pro rata minimum wage value excluding benefit according to ZUTPG

Jargon busters

- MDDSZ - [Ministry of Labour, Family, Social Affairs and Equal Opportunities](#)
- ZUTPG - [Act regulating adjustments of transfers to individuals and households in the Republic of Slovenia](#)

Forms you may need to fill in

- [Mother's form for benefit entitlement on childbirth](#) (form S-1/1)
- [Father's form for benefit entitlement on childbirth](#) (form S-1/2)
- [Form for entitlement to maternity leave and childbirth allowance for the father, other person or one of the child's grandparents](#) (form S-1/1-0)
- [Form for entitlement to parental leave and parental allowance for the father, other person or one of the child's grandparents](#) (form S-1/3)

All required forms can be found on the [MDDSZ website](#).

Know your rights

The links below listing your rights are not European Commission pages and do not represent the view of the Commission:

- [Details on rights for insurance for parental care;](#)
- [Parental Protection and Family Benefits Act \(ZSDP-1\).](#)

European Commission publications and web pages:

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

Who do you need to contact?

Rights for insurance for parental care are assessed by the [Centre for Social Work](#), which is locally responsible in regard to the mother's permanent or temporary residence. If the mother is not resident in Slovenia, the authorised Centre for Social Work in the last instance will consider: the headquarters of the mother's place of work or activity, the place of the child's birth and the permanent residence of the child's adopted family.

Health

Carers

This chapter covers the **rights of carers** (*družinski pomočnik*).

In what situation can I claim?

The appointment of a [carer](#) substitutes full-time institutional care with the aid of care at home.

The carer is a person who has the same permanent residence as the disabled person or is a family member of the disabled person.

A person can only become a carer if they have left employment or have declared themselves unemployed with the intention of becoming a carer, as well as persons who are employed part-time.

The right to have a carer is available to disabled persons:

- with permanent residence in Slovenia;
- for whom a parent or guardian has previously cared and who has received partial payment for loss of earnings;
- who are classified as disabled according to ZDVDTP and require help in carrying out all basic living requirements;
- for whom a competence commission has ruled that the person has a serious mental developmental disorder or serious physical impairment requiring help in carrying out all basic living requirements.

What conditions do I need to meet?

A carer ensures personal care in the home environment. The carer must have a suitable relationship to the disabled person and be competent for work and communication with the disabled person.

A carer carries out the following tasks:

- personal care: help in carrying out basic living requirements, feeding, hydrating, dressing and undressing, washing, movement, turning over, using the bathroom, protection of the entitled person;
- medical care: cooperation with the disabled person's personal physician, organising access to required medical services, help with prescribed therapy and taking of medicine, carrying out defined physiotherapy duties, wound care, prevention and care of bedsores, purchasing prescription medicine and recommended accessories, help in moving and help in the use and cleaning of accessories;
- social care and organisation of free-time activities: help in setting up and maintaining a network of friends, organising leisure activities, organising the disabled person's post, informing institutions of the condition and needs of the disabled person;
- domestic help: food and drink preparation, maintenance of the area in which the disabled person lives, cleaning and changing of bedding, cleaning and ironing laundry, tidying of the living area according to the disabled person's requirements.

What am I entitled to and how can I claim?

EUR 734.15 gross per month

In addition to a monthly payment for loss of earnings (or pro rata payment for loss of earnings in the instance of part-time work to the amount of the partial monthly payment) the carer is entitled to:

- compulsory health, disability and pension insurance;
- unemployment insurance;
- parental protection.

Jargon busters

- MDDSZ - [Ministry of Labour, Family, Social Affairs and Equal Opportunities](#)
- ZDVDT - [Act Concerning Social Care of Mentally and Physically Handicapped Persons](#)
- ZPIZ - [Pension and Disability Insurance Institute of Slovenia](#)

Forms you may need to fill in

- [Form for entitlement to choice of a carer](#)
- [Declaration from the disabled person](#)
- All forms can be found on the [MDDSZ web site](#)

Know your rights

The links below listing your rights are not European Commission pages and do not represent the view of the Commission:

- [Further information about carer appointment](#)
- [Rules on conditions and procedure for exercising the right to choose a family assistant](#)
- [Social Security Act](#)

European Commission publications and web pages:

- [Social security: your rights as an EU citizen abroad](#)

Who do you need to contact?

The right to have of a carer is examined by the [Centre for Social Work](#) which is responsible at the local level with regards to the disabled person's residence.

The right to choice of a carer is decided by the ZPIZ disability Commission.

Sick pay

This chapter covers your **rights during a work-related illness** (*nadomestilo plače za čas bolezni*).

In what situation can I claim?

The following are entitled to wage compensation for temporary absence from work due to illness or injury according to the compulsory health insurance system:

- employed insured persons;
- sole traders;
- partners in unincorporated companies, partners in limited liability companies and institution founders, if the company partners or institution founders are managers who regulate business functions as one of the chief members;
- top athletes and chess players;
- farmers paying contributions according to the base defined for pensions and disability insurance;
- unemployed persons with right to benefits determined by ZUJF.

What conditions do I need to meet?

Entitlement to benefit is assessed by a [general physician](#), designated physician or medical commission on the first working day of absence from work.

Reasons for entitlement are:

- transplant of organs and living tissue for the benefit of another person;
- after-effects of giving blood;

- care for an immediate family member;
- isolation and accompaniment on the order of a general physician;
- injury at work or work-related illness;
- other reasons for absence from work.

What am I entitled to and how can I claim?

Work-related illness or injury at work

In the instance that the injury or illness is a consequence of work, the insured person is entitled to benefit until he or she is able to return to work. The first 30 days of benefit are paid by the employee; in the case of further absence benefit will be covered by the compulsory health insurance system.

Illness or injury outside of work

The insured person is also entitled to wage compensation in the case of illness or injury occurring outside work.

If the insured person ceases employment during the time of absence from work, he or she is still entitled to benefit for a maximum of 30 days following termination of employment. If the absence from work is the result of injury or illness from work the insured person is entitled to benefit also on termination of employment until once again able to work.

Care for an immediate family member

One of the parents or guardian of a child younger than 18 years of age is entitled to wage compensation while the child is being cared for.

Benefit length	
Child or immediate family member	up to 7 working days
Child under 7 years of age or older child with moderately serious or serious physical or mental handicap	up to 15 working days

In exceptional cases the general physician may extend the period of entitlement.

Category	Period of care
Care for a child under 7 years of age or older child with moderately serious or serious physical or mental handicap	maximum of 30 working days
Care for other immediate family members	maximum of 14 working days
Care for a child resulting from a serious brain damage, cancer or other particularly serious worsening of health on the advice of an expert paediatric college at a university clinical centre	Maximum of 6 months

Longer benefit periods as a result of the child's health conditions are approved by a medical commission or expert college of the University Medical Centre Ljubljana paediatric clinic.

Benefit amount

The amount of wage compensation is dependent on the compensation base, reason and length of temporary absence from work and method of indexation. Compensation may not be less than the guaranteed minimum wage or higher than the employee's regular wage. The compensation base is the average monthly wage or average base for payment of contributions in the calendar year prior to the year in which the temporary absence from work occurred.

Benefit totals:

- 100% of the base for absence from work resulting from work-related illness, injury at work, transplant of living tissue and organs for the benefit of another person and the after-effects of giving blood or isolation ordered by a physician;
- 90% of the base for absence from work resulting from illness;

- 80% of the base for absence from work resulting from injury outside of work or care and accompaniment for a family member, where ordered by a physician.

As general rules, the first 90 days of benefit amount to:

- 90% of the base in the instances of the first bullet point of the previous paragraph except where, in the case of absence from work, this results from work-related illness or injury at work;
- 80% of the base in the instances of the second bullet point of the previous paragraph;
- 70% of the base in the instances of the third bullet point of the previous paragraph, except in the case where absence from work is due to care for a family member.

As an exception, war disabled servicemen and war-disabled civilians have the right to benefit in the amount of 100% of the base also in after the first 90 days. During the first 90 days, the benefit amounts to 90% of the base in all cases, except in the instance of absence from work as a result of work-related illness, injury at work and care for a family member where the benefit amounts to 100% of the base since the beginning.

Forms you may need to fill in

- completed confirmation of approved absence from work;
- in the case of blood donation: signed form confirming that the insured person has given blood.

Know your rights

The links below listing your rights are not European Commission pages and do not represent the view of the Commission:

- [Details](#) concerning wage compensation as a result of illness or injury;
- [Instructions](#) for entitlement to temporary absence from work and benefit.

European Commission publications and web pages:

- [Social security: your rights as an EU citizen abroad](#)

Who do you need to contact?

The right to compensation is determined by the decision of a general physician, designated physician or medical commission.

Health care

This chapter covers rights to **health care** (*pravica do zdravstvenega varstva*).

In what situation can I claim?

[Insured persons](#) and members of their family are included in compulsory health insurance coverage. The following persons are covered: hired and self-employed workers, farmers, persons receiving benefits, (pension, incapacity benefit, survivor's pension, unemployment benefit or permanent social assistance), etc.

The individuals liable for registration of the insured person are the [legal or physical persons](#) which are defined as liable for the payment of compulsory health insurance contributions.

Entitlement to compulsory health insurance is shown by a [health insurance card](#).

What conditions do I need to meet?

Personal entitlement to rights for compulsory health insurance begins from the day upon which the prescribed conditions are fulfilled and lasts until the day when the prescribed conditions are no longer fulfilled.

As a rule, a transitory period for payment of contributions is not required for entitlement to health care services or benefits.

Entitlement to an individual's right is determined by a [general physician](#) (general physician, gynaecologist, paediatrician or dentist), designated physician or medical commission.

A list of healthcare centres and a list of named doctors are available.

What am I entitled to and how can I claim?

[Rights to compulsory health insurance](#) are divided into:

- rights to health care services;
- rights to benefits and reimbursements.

Rights to health care services include:

- [basic healthcare activities](#);
- [dental services](#);
- [specialist outpatient, hospital and tertiary activities](#);
- [health services in defined social institutions](#);
- [medical treatment](#);
- [follow-up rehabilitation](#);
- [transport by ambulance and other vehicles](#);
- treatment overseas;
- [prescriptions for medicine and foodstuffs for special purposes](#);
- [medical accessories](#).

Benefits and reimbursements from the set of mandatory health insurance are:

- benefit payment in the case of temporary absence from work;
- reimbursement of travel expenses in connection with receiving health care services;
- [reimbursement of other fees](#).

Know your rights

The links below listing your rights are not European Commission pages and do not represent the view of the Commission:

- [Health Care and Health Insurance Act](#)
- [Rules on compulsory health insurance](#)

European Commission publications and web pages:

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

Who do you need to contact?

The right to benefit payment is allocated on the basis of a decision from a personal physician, designated physician or medical commission.

Long-term care, home help, institutional care

This chapter covers rights connected to **long-term care** (*dolgotrajna oskrba*):

- home **help** (*pomoč na domu*)
- the **community nursing service** (*patronažna služba*) and
- **institutional care for children, adults and the elderly** (*institucionalno varstvo otrok, odraslih in starejših*)

In what situation can I claim?

Long-term care is a system of services which persons who as a result of various reasons are dependent on the help of others for a long-term period to ensure assistance for everyday living. Long-term care is carried out at home or in special institutions.

When a person is provided with housing and other conditions for living in the community, but for various reasons is unable to care for themselves, they may request [home help](#). In this way they are assured help in daily activities, domestic assistance and help with social contact.

Distance assistance is operated through a telephone alarm (red button) 24 hours a day throughout the whole year.

Home nursing is a medical service prescribed by a specially chosen physician and is carried out in the form of care procedures such as: personal hygiene and healthcare for the patient, therapy programmes, injections, bandaging and others.

[Institutional care](#) is treatment in a special institution (home), other community or other form of set-up which substitutes for or ensures the function of a family. It covers primary care as well as social and health care.

For children and young people with specific needs, institutional care as well as education are included.

Adults with physical or mental development disorders are assured further specific care within the framework of institutional care.

What conditions do I need to meet?

Home help

Persons who live in their own accommodation but as a result of old age, illness, or disability require care assistance, but do not have suitable help from relatives, are entitled to home help. Those entitled are:

- persons over 65 who are unable to live fully by themselves;
- disabled persons with disabled status according to ZVDTP, who are unable to live by themselves;
- disabled persons with rights to benefits for [foreign assistance and care](#) to carry out the majority of living functions;
- seriously ill children or children with serious physical or mental development disorders, who are not included in organised forms of care.

Home help begins with a request from a person, carer or relative and is carried out by the provider in an individual manner. Providers may also be the centre for social work, and public or private sheltered housing, or activity of an established institution.

Community nursing service

This service is intended for all persons who require home help in overcoming an illness, condition or chronic disability. Care also covers preventative care for disabled persons, persons with chronic illnesses and persons with developmental disorders.

Health care for a patient at home is carried out on the basis of an order given by a selected physician. Home care may also be continued with hospital health care; in this case the hospital will inform the community nurse.

[The provider](#) is the community nursing service working at a primary health care level (municipal level).

Institutional care

Those entitled to institutional care are:

- children and young persons and persons under 26 who are included in special educational programmes;
- adults with mental development disorders, with mental health difficulties, physical disorders or sensory or other disorders;
- persons, who as a result of old age or other reasons, are unable to live entirely independently and require further or less direct help and care.

The acceptance, relocation and release of the user entitled to rights to institutional care are carried out on the basis of the [procedures](#) for exercising the right to institutional care. The process for acceptance into a [residential care home](#) begins with submitting a [request](#) for acceptance into institutional care.

Institutional care is also assured by [sheltered housing](#) (*oskrbovana stanovanja*).

What am I entitled to and how can I claim?

Home help

This social assistance is tailored to the needs of the entitled individual, for which the extent of help includes basic domestic daily operations and the maintenance of social contact.

If the service is carried out within the framework of public services, part of the fee for services (at least 50%) is covered by the authority and part by the user.

Community nursing service

Preventative and treatment services are carried out by a community nurse. In connection with long-term care treatment, visits are arranged and cover the care of the patient at home, wound care, injections, taking samples for laboratory examination, etc.

Institutional care for the elderly

Institutional care covers: [social and basic care](#) as well as health care.

Care services are paid by the entitled person or with the aid of relatives of the authority.

Health care is assured by the compulsory health insurance system.

Persons entitled to social care services may request [partial or full exemption from payment](#), which depends on their material position. Persons who are included in the compulsory health insurance system are entitled to free community nursing aid.

Jargon busters

- ZDVTDP - [Act Concerning Social Care of Mentally and Physically Handicapped Persons](#)

Forms you may need to fill in

The form for admission into institutional care is available at the following address:

[form for admission into sheltered accommodation](#)

The form for provision of home help services can be accessed through your home provider.

The list of providers is available at the following address:

<http://www.irsv.si/index.php/pomoc-na-domu>.

Know your rights

The links below listing your rights are not European Commission pages and do not represent the view of the Commission:

- [Rules](#) on procedures concerning the exercising of the right to institutional care;
- [Rules](#) concerning standard and normative social care services;
- [Act](#) Concerning Social Care of Mentally and Physically Handicapped Persons;
- [Health Care and Health Insurance Act](#).

European Commission publications and web pages:

- [Social security: your rights as an EU citizen abroad](#)

Who do you need to contact?

In the case that you have decided on social care at home, you can submit the form for inclusion in services at the provider's office in writing, by telephone or in electronic format. More information can be obtained from the provider.

An application for receiving institutional care can be given personally or by post to the service provider or by email at the address: <https://servis.ssz-slo.si/Prosnje/>.

Health services, which are assured by compulsory health insurance on the basis of health activities (community nursing and home care services) can be accessed through your selected personal physician.

The form for exemption from payment for social care services can be submitted at your centre for social work, for which further information is available on the MSSDZ web site.

Incapacity

Occupational injury and occupational diseases

This chapter covers your rights in the case of **occupational injury** (*poškodba pri delu*) and **occupational diseases** (*poklicna bolezen*).

In what situation can I claim?

[Compulsory](#) and [voluntary insured](#) persons are included in two systems of insurance in the instance of occupational injury and occupational diseases.

The system for [compulsory health insurance](#) covers risks regarding the inability to work, while the risk of disability or death of the insured person is covered by the [compulsory pension and disability insurance](#) system.

Occupational injuries are all injuries which occur as a result of work or whilst carrying out work.

Occupational diseases are defined in the [Rules concerning the list of occupational diseases](#).

What conditions do I need to meet?

Other persons who are not included in compulsory or voluntary health insurance and who perform work or activities are included in insurance in the case of occupational injury or occupational diseases.

For these persons contributions for individual cases of insurance in flat-rate sums or particular pension contribution rates are paid in accordance with the [decision determining the contributions for special insurance cases](#).

The period for such insurance is not counted in the insurance period.

Persons included in particular cases of insurance are insured in the case where occupational injury or occupational diseases occur during performance of particular work or activities outside of compulsory insurance, in which case they are entitled to a disability pension, or, in the case of death, surviving family members obtain the right to a widow's or survivor's pension if assessed for a pension to which the insured person would be entitled on death in the case of compulsory insurance.

What am I entitled to and how can I claim?

In the case of occupational injury or occupational disease the insured person is entitled to the cost of all essential treatment and medical rehabilitation from the compulsory health insurance system.

Temporary inability to work

Compensation in the case of illness is paid by the employer for the first 30 days and then by ZZZS. The right to compensation lasts until the ability to work returns. In the case where the insured person leaves employment during the period of being unable to work, the insured person is entitled to 30 further days of compensation for inability to work on terminating employment.

Disability

In the case of disability the insured person is entitled to a disability pension and various disability compensations.

If disability is the result of occupational injury or occupational disease, the disability pension shall be calculated at 57.25% of the pension base. If it is more beneficial to the insured person, the disability pension may be [assessed according to completed retirement age](#).

Death

In the case of death of the insured person, surviving family members are entitled to a widow's or survivor's pension upon fulfilling the required conditions.

Jargon busters

- ZPIZ - [Pension and Disability Insurance Institute of the Republic of Slovenia](#)
- ZZZS - [Health Insurance Institute of Slovenia](#)

Know your rights

The links below listing your rights are not European Commission pages and do not represent the view of the Commission:

- [Pension and Disability Insurance Act \(ZPIZ-2\)](#)
- [Health Care and Health Insurance Act](#)

European Commission publications and web pages:

- [Unemployment and benefits: your rights as an EU citizen abroad](#)

Who do you need to contact?

Rights to health insurance are assessed through a chosen general physician or other physician in the case of urgent assistance.

Requests for assessment in the case of disability or death of the insured person must be submitted to the [ZPIZ regional unit](#).

Rights for disability insurance

This chapter covers:

- **disability pension** (*invalidska pokojnina*)
- **vocational rehabilitation** (*poklicna rehabilitacija*)
- **disability allowance** (*nadomestilo za invalidnost*)
- **partial benefit** (*delno nadomestilo*) and
- **disability benefit for physical impairment** (*invalidnina za telesno okvaro*)

In what situation can I claim?

Persons classed as disabled are entitled to different rights to disability insurance. Disability is assessed by the ZPIZ disability commission.

Given the remaining capability to work, persons are classified in three categories:

- category I (is no longer able to work);
- category II (working capability is reduced by 50% or more);
- category III (working capability is reduced by less than 50%, work for at least half working hours is not possible or the person is no longer capable of working at the current place of employment).

What conditions do I need to meet?

Persons categorised with the following disabilities are entitled to a [disability pension](#):

- category I;
- category II, if without vocational rehabilitation another suitable job with full working hours would not be possible, however, this is not guaranteed where the person is above 55 years of age;
- category III, if without vocational rehabilitation another suitable job with part-time working hours would not be possible (minimum 4 hours a day), however, this is not guaranteed where the person is above 50 years of age;
- category II or category III if suitable work has not been assured where the person has reached 65 years of age.

The person must also fulfil [other conditions](#).

An insured person is entitled to [vocational rehabilitation](#) if they:

- have a category II disability;
- have on the day of the onset of the disability not yet reached 55 years of age;
- can carry out other work which would be carried out with full-time hours, given the remaining work capabilities.

The right to vocational rehabilitation can also be received by an insured person:

- who has a category II disability;
- who on the day of onset of the disability has not yet reached 50 years of age;
- who given the remaining work capabilities can carry out other work, which would be carried out with shorter working hours than full-time at a minimum of 4 hours daily.

An insured person is entitled to [disability allowance](#):

- with the recognised right to relocation on completion of vocational rehabilitation;
- with category II invalidity on reaching 55 years of age;
- with category III invalidity with a working capability of less than 50%;
- if full-time work is possible, but at the onset of the disability the insured person was not employed or affiliated, or if they terminated employment or were employed at another place of work.

Persons with category III of disability are entitled to reduced working hours and benefit in the instance that they are not able to work full time or to carry out work without vocational rehabilitation.

In the case of injury at work or work-related illness, insured persons or retired persons are entitled to [disability benefit for physical impairment](#) if they suffered physical impairment during the insurance period or during receipt of a survivor's pension. In the instance that physical impairment is a result of injury at work or a work-related injury, the person shall receive the right to 30% disability benefit for physical impairment.

What am I entitled to and how can I claim?

Disability pension

A disability pension is calculated on the basis of: the pension base amount, cause of disability, additional pension period and age of the insured person on the day of onset of the disability. Exceptionally, a disability pension may be paid as a result of injury at work or work-related illness. [More on calculation of disability pensions](#).

Vocational rehabilitation

The cost of vocational rehabilitation is borne by ZPIZ. The insured person is also entitled to benefit during the period of vocational rehabilitation and labour rights of employment. [More on allowance definition](#).

Disability allowance

The amount of disability allowance is measured according to the base amount of disability pensions to which the insured person would be entitled on the day of the onset of the disability, with the reason for the onset of disability also being taken into account. [More on definition of benefit amounts](#).

Partial benefit

Number of working hours per day	Benefit amount
4	Up to 50% of disability pension
5	Up to 37.5% of disability pension
6	Up to 25% of disability pension
7	Up to 12.5% of disability pension

Disability benefit for physical impairment

The amount of disability benefit is measured according to a defined percentage of the base for measuring further rights to and cause of the assessed extent and cause of the physical injury. [More on definition of disability benefit amounts.](#)

Jargon busters

A disabled person (male or female disabled worker) - is an insured person who has been assessed for disability in accordance with ZPIZ-2 and who has been granted rights to disability insurance.

- ZPIZ - [Pension and Disability Insurance Institute of the Republic of Slovenia](#);
- ZPIZ-2 - [Pension and Disability Insurance Act](#)

Forms you may need to fill in

- [Request for entitlement to a disability pension](#);
- [Request for entitlement to a partial disability; pension/partial allowance](#);
- [Request for entitlement to disability allowance](#).

All required forms can be found on the [ZPIZ website](#).

Know your rights

European Commission publications and web pages:

- [Social security: Your rights as an EU citizen abroad](#)

Who do you need to contact?

Different rights for disability insurance are assessed on the basis of a decision of the ZPIZ disability commission, which assesses disabilities.

Requests must be submitted to the [ZPIZ regional unit](#).

Old-age and survivors

Widows' pensions and survivors' pensions

This chapter covers **widows' and survivors' pensions**.

In what situation can I claim?

For payment of a pension to surviving family members, family members are entitled if the deceased insured person:

- fulfilled conditions for receipt of a pension, early retirement pension, or disability pension; or
- was already a recipient of a pension, early retirement pension, or disability pension or other rights from disability insurance.

In the instance of fulfilment of the general conditions, fulfilment of additional particular conditions is also required for the receipt of a widow's or survivor's pension.

For a [widow's pension](#) (*vdovska pokojnina*) the following family members are entitled:

- a surviving partner;
- a cohabiting partner (with whom the deceased insured person had lived for at least 3 years or 1 year before his/her death if they have a child together); or
- a maintained divorced spouse.

For a [survivor's pension](#) (*družinska pokojnina*) the following family members are entitled:

- children (legitimate, illegitimate or adopted);
- stepchildren, grandchildren or other children without parents if they have outlived the insured person;
- parents (father, mother or stepparent), if they have outlived the insured person.

What conditions do I need to meet?

In the instance of fulfilment of the general conditions, fulfilment of certain additional conditions is also required for the receipt of a widow's or survivor's pension.

Surviving family members are entitled to a survivor's pension in the case where:

- they have reached a defined age, which for the period 2014-2021 will increase to 58 (in 2018, 56 is the required age);
- they are completely unable to work or become unable to work within a year following the death of the insured person;
- they are caring for a child who is entitled to a survivor's pension or who is born within 300 days of the death of the insured person.

Children are entitled to a survivor's pension up to the age of 15 years, or up to the age of 18 years (if they are unemployed) or until finishing school, with an upper age limit of 26 years. A child who is completely unable to work is entitled to a survivor's pension until able to work.

Parents are entitled to a survivor's pension if they have reached the required age of 60 years on the death of the insured person or are fully unable to work.

In addition, entitled persons must have been permanently jointly resident with the deceased insured person and their income must not exceed 29% of the lowest pension base.

What am I entitled to and how can I claim?

Widow's pension

A widow's pension amounts to 70% of the pension that the insured person was entitled to on the day of their death.

If the widow or widower has the right to their own pension, they are entitled to 15% of the widow's pension. The total sum of both pensions may not exceed the male pension amount measured from the highest pension base for 40 years of pensionable service.

Survivor's pension

Number of surviving family members	Percentage of survivor's pension for base
One	70%
Two	80%
Three	90%
Four or more	100%

For a child who has lost both parents - the insured person(s) or person(s) entitled - the survivor's pension shall be calculated according to the parent who is most beneficial, at a rate of 100% of the base.

For a larger number of children if both parents have died, two survivors' pensions will be calculated according to each at the amount of 100% of the base. Both pensions will be divided into equal shares given the number of children. If division into equal parts is not possible, the remaining sum will be given to the eldest child.

Jargon busters

ZPIZ - [Pension and Disability Insurance Institute of the Republic of Slovenia](#)

Forms you may need to fill in

[Request for a survivor's or widow's pension for an insured person or pensioner.](#)

Know your rights

The links below listing your rights are not European Commission pages and do not represent the view of the Commission:

- [Further information on widow's pensions](#)
- [Further information on survivor's pensions](#)

European Commission publications and web pages:

- [Death grants: your rights as an EU citizen abroad](#)

Who do you need to contact?

A request for a widow's or survivor's pension must be submitted to the [ZPIZ regional unit](#).

Pensions

This chapter covers:

- **Old age pensions** (*starostna pokojnina*)
- **early retirement pensions** (*predčasna pokojnina*)
- **partial pensions** (*delna pokojnina*) and
- **annual grants** (*letni dodatek*)

In what situation can I claim?

Every person reaching the defined age and fulfilling the required number of years from the pension qualifying period is entitled to an old age [pension](#).

Persons entitled to a pension also have the right to a [partial pension](#) in the instance that they remain employed for at least a quarter of full coverage time.

Those entitled to an [early retirement pension](#) are persons who have reached the defined age and who fulfil the required number of years from the pension qualifying period but who do not yet have the right to a pension.

Entitled persons also have the right to a lump-sum annual grant.

What conditions do I need to meet?

Pensions

Women (2018)

Age	Pension qualifying period
59 years 8 months	40 years without additional payment
64	Minimum 20 years
65	Minimum 15 years insurance period

Men (2018)

Age	Pension qualifying period
60	40 years without additional payment
65	Minimum 15 years insurance period

Reduction of the lowest pension age is possible in the case of:

- care for each child born or adopted;
- a period of compulsory military service;
- employment between the ages of 15 and 18;
- labour in workplaces harmful to health, where an increased pension qualifying period is valid;
- extenuating circumstances (health).

Partial pensions

For a partial pension all persons fulfilling the conditions for receiving a pension or early retirement pension and remaining in employment for a minimum of 2 hours a day or 10 hours a week are entitled.

Early retirement pensions

	Age	Pension qualifying period
Women (2018)	59 years and 8 months	40 years
Men (2018)	60 years	40 years

Annual grant

For an annual grant, all survivors' pensions and some survivors claiming benefits for disability insurance are entitled (in different amounts, depending on the amount of the pension).

What am I entitled to and how can I claim?

Pensions

The pension amount is assessed on the basis of pensionable earnings.

Pensionable earnings are calculated on the basis of the monthly average earnings from those which have been paid from the most suitable unbroken 24-year period of insurance from 1970 onwards, from which contributions for pension and disability insurance were paid. Earnings shall be calculated minus tax and contributions.

The lowest pensionable earnings amount to 76.5% of the average monthly wage in Slovenia in the previous calendar year, minus tax and contributions.

The highest pensionable earnings amount is four times the lowest pensionable earnings amount.

Further information concerning pensionable earning amounts and pensions can be found on the [ZPIZ web site](#).

Partial pensions

Pension amount	Extent of employment
12.5%	7 hours daily or 35 to 39 hours weekly
25%	6 hours daily or from 30 to 34 hours weekly
37.5%	5 hours daily or from 25 to 29 hours weekly
50%	4 hours daily or from 20 to 24 hours weekly
62,5%	3 hours daily or from 15 to 19 hours weekly
75%	2 hours daily or from 10 to 14 hours weekly

Early retirement pensions

An early retirement pension is assessed on the basis of pensionable earnings in the same manner and to the same extent as a pension, which shall be reduced for each month by 0.3% to fulfilment of conditions for a retirement pension (64 years for women and 65 years for men in 2018).

The pension reduction may not amount to more than 5 years of deficit years, meaning 18%.

Pension reduction is permanent.

Annual grant (for 2018)

Pension amount	Annual grant amount
Up to EUR 430	EUR 400
From EUR 430.01 to 530	EUR 260
From EUR 530.01 to 630	EUR 200
From EUR 630.01 to 760	EUR 150
Above EUR 760	EUR 90

The amount of the annual grant is assessed individually every year and as a rule is paid together with the pension for the month of May. The annual grant may be paid in several instalments or with a delay.

Jargon busters

ZPIZ - [Pension and Disability Insurance Institute of Slovenia](#).

Forms you may need to fill in

- [Request](#) for a pension or early retirement pension;
- [Request](#) for a family or a widow's pension for an insured person or pensioner;
- [Request](#) for assessment of entitlement to a pension grant;
- [Request](#) for assessment of entitlement to a partial pension;
- [Request](#) for payment of part of a pension/early retirement pension (20%).

All required forms can be found on the [ZPIZ web site](#).

Know your rights

The links below listing your rights are not European Commission pages and do not represent the view of the Commission:

- [Information on pensions](#)
- [Information on partial pensions](#)
- [Information on early retirement pensions](#)
- [Information on annual grants](#)

European Commission publications and web pages:

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

Who do you need to contact?

Pension requests can be submitted at the [local ZPIZ office](#).

Social assistance

Minimum resources

This chapter covers:

- **social assistance** (*socialna pomoč*)
- **income support** (*varstveni dodatek*)
- **bereavement payment** (*posmrtnina*) and
- **funeral payment** (*pogrebna*)

In what situation can I claim?

Persons are entitled to [social assistance](#) and income support if they are not able to assure their own physical safety as a result of circumstances which they are unable to change.

Social assistance is intended to provide resources so that minimum living requirements are met.

Income support is intended to cover long-term living expenses (accommodation expenses etc.) and is not expenses for meeting minimum living requirements.

The right to [bereavement and funeral payment](#), which falls within the framework of financial social assistance, is held by a family member of the deceased person arranging a funeral (funeral payment) or requiring financial assistance following death of a family member (bereavement payment). This right may only be claimed by one member of the deceased person's family.

What conditions do I need to meet?

The general conditions for receiving social assistance and income support are permanent residence in the Republic of Slovenia. Citizens of Slovenia and foreigners who have indefinite duration residence entitlement, both with permanent residence in Slovenia, persons on the basis of international acts to which Slovenia is bound and persons who have been granted international protection and members of their family with temporary or permanent residence in Slovenia are also entitled to assistance.

Those entitled to social assistance are persons who:

- are not able to ensure their own survival (from work, right to work or insurance, etc.);
- are unable to assure means for the minimal income for themselves and their family for reasons which they are unable to change.

Those entitled to income support are persons:

- who are permanently unemployable or permanently unable to work or women over 63 or men over 65;
- who are entitled or could be entitled to social assistance;
- for whom income does not exceed the threshold for income support (EUR 470.76).

A family member of the deceased person is entitled to bereavement payment if on the day of death they would be entitled to social assistance or income support or if their income [does not exceed the legally allowed threshold](#).

A family member of the deceased person is entitled to funeral payment if they have:

- arranged a funeral in Slovenia and;
- on the day of the funeral would be entitled to social assistance or income support or the person's income does not exceed the legally allowed threshold (EUR 606 for an individual or EUR 909 for a family).

What am I entitled to and how can I claim?

Social assistance

The amount of social assistance depends on the income, number of family members, property, savings, care entitlement and possible existence of fault-based grounds.

[Further information on the MDDSZ web site.](#)

Income support

The amount of income support is defined on the basis of the same measures which are valid for assessing entitlement to social assistance and must not exceed the amount of minimum income of a single person or family.

[Further information on the MDDSZ web site.](#)

Bereavement payment

The amount of the bereavement payment is defined as a sum up to the amount of the basic minimum income sum, which is EUR 288.81.

Funeral payment

The amount of the funeral payment is defined as double the sum of the minimum income, which currently amounts to EUR 577.62; however this may not exceed the actual cost of the funeral.

Jargon busters

- CSD - [Centre for Social Work](#)
- MDDSZ - [Ministry of Labour, Family, Social Affairs and Equal Opportunities](#)

Forms you may need to fill in

- Unified form for entitlement to public funds (for social assistance and income support);
- [Application](#) for funeral or bereavement payment.

Know your rights

The links below listing your rights are not European Commission pages and do not represent the view of the Commission:

- [Exercise of Rights to Public Funds Act](#)

European Commission publications and web pages:

- [Social security: your rights as an EU citizen abroad](#)

Who do you need to contact?

The right to payment for assuring minimum income is assessed by the [Centre for Social Work](#), which has local responsibility regarding permanent residency.

Unemployment

Unemployment benefits

This chapter covers **unemployment benefit** (*denarno nadomestilo za čas brezposelnosti*).

In what situation can I claim?

Unemployed persons who were compulsorily insured and who became unemployed against their own will or not as a result of their own fault are entitled to unemployment benefits.

What conditions do I need to meet?

For unemployment benefit, persons are entitled who:

- were insured for at least 9 months in the previous 2 years prior to unemployment (or at least 6 months in the last 2 years if they are under 30);
- have applied to ZRSZ and submitted a request for unemployment benefit within 30 days of unemployment arising.

What am I entitled to and how can I claim?

Unemployment benefit amounts to: 80% of the basis (which is the average monthly salary received by an insured person during the eight months prior to unemployment, including compensation of salary, health insurance, family protection insurance, old-age and invalidity insurance) for the first 3 months; 60% for the following 9 months; and 50% of the basis after 12 months.

Benefit may not be lower than EUR 350 gross and may not exceed EUR 892.50 gross.

An insured person is entitled to benefit from the day following termination of compulsory insurance, if the insured person has submitted unemployment documentation and a request for benefit within 30 days of terminating compulsory insurance.

The length of benefit payment depends on the previous insurance period:

- 2 months for an insured person younger than 30 who has been insured for at least 6 months in the last 2 years prior to unemployment;
- 3 months for an insurance period of 9 months to 5 years;
- 6 months for an insurance period of 5 to 15 years;
- 9 months for an insurance period of 15 to 25 years;
- 12 months for an insurance period of more than 25 years;
- 19 months for an insurance period of more than 25 years (if the age of the insured person is over 50); and
- 25 months for an insurance period of more than 25 years (if the age of the insured person is over 55).

During the period of accepting benefits, ZRSZ will pay all social security contributions.

Jargon busters

- ZRSZ - [Employment Service of Slovenia](#)

Forms you may need to fill in

[Application for entitlement to unemployment benefit in the case of unemployment.](#)

Know your rights

The links below listing your rights are not European Commission pages and do not represent the view of the Commission:

- [Relevant legislation](#)
- [Further information on unemployment benefit.](#)

European Commission publications and web pages:

- [Unemployment and benefits: your rights as an EU citizen abroad](#)

Who do you need to contact?

Requests must be submitted to one of the ZRSZ labour offices or through the ZRSZ web site.

Contact phone numbers and e-mails:

http://www.ess.gov.si/o_zrsz/naslovi_in_uradne_ure

Moving abroad

Previous coverage abroad can count

This chapter covers residence in different EU countries and the influence of this on social security rights.

In what situation can I claim?

If you have returned from work in an EU or EEA country or Switzerland, you will be subject to legislation of the host country and as a general rule will no longer be part of the social security system in Slovenia.

If you have lived, worked or paid insurance in another EU or EEA country or Switzerland, your paid contributions can be respected as part of your rights in Slovenia.

What conditions do I need to meet?

EU provisions concerning social security coordination are valid for:

- illness benefit;
- maternity and paternity benefits;
- occupational injury and occupational disease;
- disability benefit;
- pensions and early retirement benefits;
- benefit for surviving family members and death grant;
- unemployment benefit;
- family benefit.

More can be found in the publication *The EU provisions on social security: Your [rights](#)* when moving within the European Union.

What am I entitled to and how can I claim?

If you have lived in an EU or EEA country or Switzerland and return to Slovenia, you must bring with you:

- proof of your paid social security contributions as a U1 (previously E301) form, which can be obtained at the local social security office. Please check that you have obtained all the necessary information.

If you have already been receiving unemployment benefit in an EU or EEA country or Switzerland for at least 4 months, you may transfer the right to benefit to Slovenia for 3 to 6 months while you are seeking employment. You must bring a completed U2 form with you (previously E303).

Upon registration in the Slovenian social security system you will also have to provide information about your employment in the EU:

- country of employment;
- name and address of employer;
- length of employment;
- your social security system identification number.

In the case where you ask for any kind of rights, your contributions paid in an EU or EEA country or Switzerland will also be taken into account.

You will also be insured in the case of change of employer.

Jargon busters

- EEA - [European Economic Area](#)
- EU - European Union

Know your rights

The links below listing your rights are not European Commission pages and do not represent the view of the Commission:

- [Return from employment abroad.](#)

European Commission publications and web pages:

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

Who do you need to contact?

You may be entitled to rights at the following institutions:

- [Centre for Social Work](#);
- [Pension and Disability Insurance Institute of Slovenia](#);
- [Employment Service of Slovenia](#);
- [Health Insurance Institute of Slovenia](#).

Main residence

Habitual residence

This chapter covers habitual residence (temporary and permanent) and rights resulting from it.

In what situation can I claim?

Habitual residence (*običajno prebivališče*) in Slovenia may be temporary or permanent.

The difference between forms of residence takes into account 1 year of residence at an address, which is current as well as intended for the future.

The form of residence is important in obtaining rights to social security.

What conditions do I need to meet?

Permanent residence

[Permanent residence](#) (*stalno prebivališče*) is the residence of a person at a recorded address for at least 1 year, for which the person has the intention to reside permanently.

Permanent residence or change of residence must be notified at any [administrative unit or local authority](#) in Slovenia within 8 days of establishment or receipt of foreigner indefinite duration residence entitlement. In the case of permanent emigration from Slovenia you must de-register permanent residence before leaving.

In the case of a change of the address of permanent residence, personal documentation must also be changed.

Application for permanent residence may be carried out by any adult. In the case of children and persons unable to work this will be carried out by the parent or guardian or person with whom the person permanently resides.

A [shared housing community](#) (*skupna gospodinjska skupnost*) may also be linked to the address of permanent residence which affects the defined entitlement to acquiring social security rights.

Temporary residence

[Temporary residence](#) (*začasno prebivališče*) is any temporary residence (a minimum of 60 days to 1 year) for a person having an address of permanent residence outside of Slovenia. If the person lives at the address of permanent residence for more than a year, the application for temporary residence may be renewed.

Temporary residence or change of residence must be applied for at any [administrative unit or local authority](#) in Slovenia within 3 days of having established or received foreigner indefinite duration residence entitlement or confirmation of an application to reside in Slovenia. In the case of leaving the address of temporary residence the person must de-register prior to leaving. Temporary residence outside of Slovenia lasting more than 3 months must be declared to the administrative unit or local authority in Slovenia.

Application for temporary residence may be carried out by any adult. In the case of children and persons unable to work this will be carried out by the parent or guardian or person with whom the person permanently resides.

What am I entitled to and how can I claim?

The following rights are connected to permanent residence:

- financial social assistance;
- dependence allowance;
- allowance for foreign care and help;
- home care assistant;
- funeral payment and death grant;
- income support;

- institutional care;
- family benefits:
 - childcare allowance: permanent residence in Slovenia and currently living in Slovenia;
 - parental allowance: permanent residence in Slovenia and currently living in Slovenia;
 - childbirth allowance: permanent residence in Slovenia and currently living in Slovenia;
 - large family allowance: joint permanent residence in Slovenia and currently living in Slovenia;
 - partial payment for loss of earnings: permanent residence in Slovenia and currently living in Slovenia;
- pension*;
- widow's and survivor's pensions*;
- rights to disability insurance*.

* From the point of view of entitlement to pension and disability insurance, the status of the insured person is important. Permanent residence is expressly defined only for voluntary application for compulsory pension and disability insurance and dependence allowance.

For temporary residence, the following rights are valid:

- family allowance: child benefit; application for residence in Slovenia and right to currently live in the Republic of Slovenia;
- rights to parental care: rights connected to paid contributions;
- unemployment benefit: rights connected to paid contributions.

Forms you may need to fill in

Application for permanent residence:

- [E-form for permanent residence application](#);
- [E-form for permanent residence application - for another person](#).

De-registration of permanent residence:

- [E-form for permanent residence de-registration from the RS](#);
- [E-form for permanent residence deregistration from the RS - for a child or other person](#).

Application for temporary residence:

- [E-form for application for temporary residence](#);
- [E-form for application for temporary residence for a child or other person](#).

De-registration of temporary residence:

- [E-form for de-registration of temporary residence](#);
- [E-form for de-registration of temporary residence for a child or other person](#).

Know your rights

The links below listing your rights are not European Commission pages and do not represent the view of the Commission:

- [Further information on application and de-registration of residence](#)
- [Residence Registration Act](#)

European Commission publications and web pages:

- [Social security: your rights as an EU citizen abroad](#)

Who do you need to contact?

Application and de-registration of permanent or temporary residence can be carried out at [any administrative unit or local authority](#) in Slovenia.

