



EUROPEAN SOCIAL POLICY NETWORK (ESPN)

Making access to social protection for workers and the self-employed more transparent through information and simplification

Albania

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European Social Policy Network (ESPN)

**ESPN Thematic Report on
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protection for workers and the
self-employed more
transparent through
information and simplification**

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Summary

The purpose of this report is to identify and analyse policies put in place by the country to improve transparency in access to social protection, considering both access to information and simplification of access. The report focuses on the six social protection branches covered in the 2019 Council Recommendation on Access to social protection for workers and the self-employed (hereafter "2019 Council Recommendation") and covers policies and measures implemented between January 2017 and May 2022. The government of Albania is implementing an all-encompassing reform to digitalise all public services, with the aim to improve effectiveness, increase transparency and tackle corruption. As a result, starting from 1 May 2022 all frontline offices of all public institutions have been closed, and services can only be accessed online through the e-Albania portal. For people with digital skills, e-Albania is a user-friendly portal. However, for people with low or no digital skills or for people with disabilities, the portal does not provide easy access or support. Currently there is no information publicly available on the number of users of the e-Albania platform.

This reform has not improved access to general information on the six social protection branches. As was the case before the reform, general information can be accessed on the websites of the institutions providing services. The information is not provided in easily understood language, and therefore vulnerable groups are potentially excluded. As regards more personalised information, the reform has both improved and worsened the situation. Although citizens can access personalised information through e-Albania, such as their contribution history, the closure of the frontline offices of all institutions has left them with no means to get specific information on their rights, entitlements, and obligations.

With the exception of healthcare, there have been no awareness-raising campaigns on the social protection branches.

During the period covered, there have been no initiatives by the government to simplify access to social protection. The digitalisation reform has brought important improvements, as all applications now can be made online; and the administrative burden on citizens has been lowered thanks to the integration of the information systems of the majority of public institutions. However, with online applications being the only alternative, it could be argued that application processes have not been simplified for people with low or no digital skills as well as for vulnerable groups of society.

1 Current policies and practices to ensure information on, and to simplify access to, social protection for workers and the self-employed

In 2014 the government of Albania launched a wide and ambitious reform agenda with regard to public services. Within this framework, the government approved in 2016 a long-term policy document on the delivery of citizen-centric services by central government institutions in Albania.¹ Aimed at improving efficiency, increasing access and transparency, and fighting corruption, the reform has re-engineered and digitalised all public services. Until recently services were available either digitally through the e-Albania portal or physically at one of the one-stop-shops operated by the Agency for the Delivery of Integrated Services in Albania (ADISA), which served as e-Albania's frontline offices. However, the government announced that as of 1 May 2022 all frontline offices in all public institutions, including ADISA, were to be closed, and citizens could apply for and receive services only digitally through e-Albania. ADISA will continue to offer counselling to citizens through its call centre and chat services while its future role will be addressing citizens' complaints.

1.1 Policies and practices to ensure access to information on social protection rights, entitlements and obligations

Of the six social protection branches, healthcare benefits are administered by the Compulsory Healthcare Insurance Fund (CHCIF), unemployment benefits are administered by the National Agency for Employment and Skills (NAES) together with the Social Insurance Institute (SII), while the other benefits are all administered by the SII. Prior to the initiative to digitalise public services, general or personalised information could be accessed only at the institution providing the service. General information was accessible through the relevant institution's website, through meetings with frontline office personnel or through leaflets that could be collected at the institution's premises. On the other hand, personalised information was harder to obtain, as archives were not digitalised and the information systems of different institutions were not integrated. However, frontline office personnel would serve as navigators and provide citizens with counselling on specific issues/problems.

The full digitalisation of services under the e-Albania platform from 2017 onwards was accompanied by a full integration of the vast majority of government platforms and information systems, which drastically improved access to personalised information. This information could be accessed digitally through the e-Albania platform or by visiting the ADISA one-stop-shops. With the closing of all frontline offices, this information now is available only digitally. The situation with regard to general information, however, has remained the same. ADISA has prepared an information card on every service related to the six social protection branches. These cards, which are only available online, contain basic information on the service, the main eligibility criteria, the documents needed to obtain the service, and administrative procedures. However, the information on how schemes work, benefit levels or individual rights can only be accessed through the institutions' websites. For the services in focus, there are links on e-Albania to the relevant institution websites to help citizens find the information they need.

¹ <https://www.adisa.gov.al/wp-content/uploads/2016/10/GoA-Citizen-Centric-Service-Delivery-Policy-Documents-2c-April-2016.pdf>

1.1.1 Policies and practices to ensure access to general and personalised information

1.1.1.1 Unemployment benefits

In Albania, the amount of unemployment insurance is not linked to the level of contributions. The unemployment benefit is a flat-rate benefit unrelated to previous earnings, set by a decision of the Council of Ministers² at 50% of the gross minimum wage. To qualify for the benefit, job-seekers should: have at least 12 months of social insurance contributions; be involuntarily unemployed; be registered as unemployed at an employment office; be willing to undergo training and retraining; and not be entitled to any other social insurance benefits, except the partial disability pension. Unemployment insurance is granted for a limited duration, varying from three months for those who have paid social contributions for at least the previous 12 months, to a maximum of 12 months for those who have worked for 10 years or longer. The self-employed are not eligible for unemployment benefits.

From the start of the COVID-19 pandemic, the government doubled unemployment benefits from 50% of the gross minimum wage to 100% for three months, in order to mitigate the income losses of all those affected by the crisis. Unemployment benefits were doubled for all existing beneficiaries for the months of April, May and June 2020. The information provided on this new measure was shared through various channels of communications, such as government websites and media and social platforms.

The information on unemployment benefits is accessible via the NAES webpage and the e-Albania portal.³ To be able to receive unemployment benefit, applicants need to register as unemployed job-seekers at an employment office. The first step can be done through e-Albania, where unemployed job-seekers submit their applications online. There is no need to submit documents apart from the application, as the personal information from the civil registry is already digitalised. Once applications have been assessed, the employment offices notify the applicants if their applications have been accepted or rejected, along with the relevant justification. If an application is accepted, the employment office sets a date and time for an interview with the applicant and to withdraw the unemployed job-seeker document. The online application helps the employment office to make an assessment before the meeting and better organise their work, and the citizen to receive a timely service once the meeting is set. On the other hand, the specificity of this type of service requires face-to-face meetings with the applicant to assess their socio-economic situation, and to tailor an individual support services plan to suit their profile. The registered unemployed job-seeker then receives the benefit after up to two months from their registration.

The information provided at e-Albania is clear on the steps to be followed and contains information cards for each employment service. However, the NAES webpage information is very generic, and refers people to another page,⁴ which is not always accessible. However, given that the employment offices have been instructed to provide support for filling in the applications, the digital agenda should not significantly affect access. However, it is too early to make an adequate assessment of the impact.

1.1.1.2 Sickness and healthcare benefits

The healthcare system in Albania is organised in three levels – primary, secondary, and tertiary – based on pay-as-you-go principles and with universal coverage. The system is mainly public and is financed by health insurance contributions as well as the government budget. In theory, every citizen is a contributor to the health insurance system and can

² Decision of the Council of Ministers, No 158, dated 12 March 2022.

³ www.e-albania.al

⁴ www.puna.al

benefit from the scheme. Health insurance is regulated by the Law (10283/2011) "On Compulsory Healthcare Insurance in the Republic of Albania" (as amended).⁵ The health insurance scheme covers the employed, the self-employed, unpaid family workers, and other economically active people. The contribution rate is 3.4% of the gross wage, with employees paying 1.7% and employers the remaining 1.7%. The self-employed and the self-employed in agriculture pay contributions only according to the official minimum wage. In addition, the scheme covers several other categories⁶ whose contributions are paid by the government budget. Employees are generally entitled to 14 days of sick leave, paid at an 80% rate by employers.

Information regarding sickness benefits for workers and self-employed people can be obtained online through e-Albania, and the Ministry of Health and CHCIF websites refer to e-Albania. The CHCIF website includes information on each service available, including its access and eligibility criteria. However, all services are only accessible through e-Albania or directly through family doctors, in case of sickness.

The general information on the healthcare services available is shared through different channels of communication, such as e-Albania, media and social platforms. Most healthcare centres also provide printed information regarding the services and how to access them.

In addition, some companies and non-governmental organisations provide private health insurance to their employees. Information regarding healthcare benefits offered through private health insurance premiums is available to workers. Private insurance companies also provide different health insurance packages for anyone who wishes to have additional health insurance and access private healthcare services within the country or abroad.

Information on healthcare use or unmet need is not routinely collected in the household budget surveys used to analyse financial protection (WHO, 2020). These surveys indicate which households have not made out-of-pocket payments, but not why (WHO, 2020).

1.1.1.3 Maternity and equivalent paternity benefits

During the period covered there have been no important policies or practices designed to ensure access to general information. General broad information on maternity and equivalent paternity benefits that was accessible only through the SII website can now also be accessed through the ADISA information cards, which can be downloaded through the e-Albania portal. However, this information is very basic as it only covers the legislative framework, main eligibility criteria, documentation needed and administrative procedures. More detailed information on benefits, individual rights, entitlements, obligations and administrative procedures is available only on the SII website. This information is written in less technical language than the legislation, but is still complex to understand. No efforts have been made to make this information simpler or more user-friendly, such as through the preparation of guidelines or FAQs, or to make it available for people with low digital skills or people with disabilities.

On the other hand, important measures have been introduced to improve access to personalised information. With the full digitalisation of services, citizens now can access information on their personal history of social insurance contributions and maternity and equivalent paternity benefits, as well as online transcripts. This information can be accessed only through the e-Albania portal. Until 1 May 2022 consultations and personalised information on rights and obligations, specific issues or problems were

⁵ <https://fsdksh.gov.al/project/liqji-i-fondit/>

⁶ These categories include people benefiting from the social insurance scheme, people on social assistance benefits (*Ndihma Ekonomike*), people on disability benefits, people registered as unemployed job-seekers, asylum-seekers, children under 18, students under 25, victims of trafficking, and other categories determined by other specific laws.

available at the SII regional/local frontline offices. With the closing of all SII frontline offices, ADISA hotline or chat services can guide people through the administrative procedures or documents needed. However, ADISA staff do not possess the expertise on maternity/paternity benefits to provide adequate advice. There is no information on the number of citizens using these services and therefore it cannot be stated whether the services are well equipped to handle the amount of citizen contacts. The SII is planning to create its own hotline to provide counselling services. To conclude, while access to personalised information has improved, with regard to counselling a deterioration can be expected as a result of the closure of frontline offices, and the over-reliance on online service-providers who do not possess the technical expertise needed. The improvement of online services cannot entirely replace face-to-face personalised support. Only 15% of the population was able to submit an online application in 2021.

1.1.1.4 Invalidity benefits

The situation with regard to invalidity benefits is the same as for maternity benefits described above, as both schemes are part of the social insurance scheme administered by the SII.

1.1.1.5 Old-age benefits and survivors' benefits

The situation with regard to old-age and survivors' benefits is the same as for maternity benefits described above, as both schemes are part of the social insurance scheme administered by the SII.

1.1.1.6 Benefits in respect of accidents at work and occupational diseases

The situation with regard to benefits in respect of accidents at work and occupational diseases is the same as for maternity benefits described above, as both schemes are part of the social insurance scheme administered by the SII.

1.1.2 General awareness-raising campaigns

This section describes the initiatives targeted at improving information about the conditions and rules of access to one or more of the six branches.

1.1.2.1 Unemployment benefits

During the COVID-19 pandemic, the information related to this benefit was shared through various communication channels and was transparent. Social media became key communication channels and employment office staff tried to provide all the support they could via phone or e-mails.

1.1.2.2 Sickness and healthcare benefits

Periodic national campaigns to provide information, raise awareness about different health issues and promote access to services, are carried out by the Ministry of Health and Social Protection throughout the year. The campaigns are usually aligned to international health days and supported by donors.

The National Health Promotion Action Plan 2017-2021 was developed by the National Institute of Public Health, around the following three priority areas: (i) raising the awareness of the Albanian population about health issues, and orientating them towards a healthier lifestyle and proper use of health services; (ii) strengthening supportive environments and promoting efficient interventions for the implementation of education and health-promotion programmes; and (iii) establishing resilient (flexible) communities for protection (MoHSP, 2017).

A review⁷ of progress in the implementation of the action plan points out that the activities envisaged have been only partially implemented, and a few have not been implemented at all, due to the earthquake of November 2019 and the COVID-19 pandemic. Other factors that have hindered implementation include a lack of appropriate funding, insufficient human capacities, poor infrastructure, recent organisational changes (the establishment of health operators), and poor planning of some health-promotion interventions.⁸

The new action plan for 2022-2030 is aimed at renewing health promotion through social, political, and technical measures, and addressing the health challenges, in order to improve health and reduce health inequities of the Albanian population within the context of the 2030 agenda. This plan includes four strategic objectives, the first two remaining the same as in the previous plan, and the other two being: enhancing governance and inter-sectoral work to improve health and well-being and address the social determinants of health; and empowering health services and strengthening risk communication and emergency (MoHSP, 2022).

Finally, during the COVID-19 pandemic large campaigns were periodically implemented on prevention and support services, as well as awareness-raising campaigns on COVID-19 safety measures at work. These campaigns were implemented through media, billboards and a wider use of audio-visual and social media. During the first year of the pandemic, in particular, there were daily press conferences by the Ministry of Health and Social Protection and members of the Technical Group of Experts that was established to monitor the situation and adjust the measures accordingly. Community-based "door to door" information activities for hard-to-reach communities were also implemented by teams combining public servants and civil society organisations. Most of these activities were funded by international donors.

1.1.2.3 Maternity and equivalent paternity benefits

The last national campaign with regard to the social insurance system (which includes maternity benefits) took place in 2014-2015 to provide information, raise awareness and increase acceptance of the newly introduced social insurance reform. In the period covered there have been no awareness-raising campaigns with regard to maternity benefits.

1.1.2.4 Invalidity benefits

The last national campaign with regard to the social insurance system (which includes invalidity benefits) took place in 2014-2015 to provide information, raise awareness and increase acceptance of the newly introduced social insurance reform. In the period covered there have been no awareness-raising campaigns with regard to invalidity benefits.

1.1.2.5 Old-age benefits and survivors' benefits

The last national campaign with regard to the social insurance system (which includes old-age and survivors' benefits) took place in 2014-2015 to provide information, raise awareness and increase acceptance of the newly introduced social insurance reform. In the period covered there have been no awareness-raising campaigns with regard to old-age and survivors' benefits.

1.1.2.6 Benefits in respect of accidents at work and occupational diseases

The last national campaign with regard to the social insurance system (which includes benefits related to accidents at work and occupational diseases) took place in 2014-2015 to provide information, raise awareness and increase acceptance of the newly introduced

⁷ Included in the Action Plan on Health Promotion, Albania 2017-2021.

⁸ Ibid.

social insurance reform. In the period covered there have been no awareness-raising campaigns with regard to old-age and survivors' benefits.

1.2 Policies and practices to simplify access to social protection

In 2021, the government of Albania approved the **Law on Co-governance** (No 107/2021). The purpose of this law is to create the conditions for, and encourage, interaction between the state administration and individuals and interest groups, regardless their form of organisation, in order to increase their role in improving the quality of provision of public services, as well as the undertaking of initiatives, projects, programmes or joint ventures aimed at involving citizens in co-government. The law defines the rules for co-governance with citizens through their inclusion in policy-making and administrative procedures, and by increasing the accountability of the state administration through the platform "With you for the Albania we want". The Agency for Dialogue and Co-governance is the institution responsible for monitoring and reporting the implementation of deadlines for the delivery of services.

1.2.1 Simplification objective embedded in reforms of social protection schemes

1.2.1.1 Unemployment benefits

No initiatives to simplify access to unemployment benefits have been taken in the period covered.

1.2.1.2 Sickness and healthcare benefits

Compulsory medical examination package. The Albanian government on 2 April 2014 determined the parameters for basic medical examinations for citizens aged 35-70, as the first step towards universal coverage. All citizens with permanent residence in the Republic of Albania aged 35-70 have the right to a basic medical examination, without discrimination. Through the electronic service, citizens are informed of the date and results of screening tests. People without digital access receive some support through family doctors. No documentation is required in order to access this service. One issue with this measure is that the people aged over 70 are not eligible to benefit from it. However, simplification was not one of the intended objectives of the reform.

1.2.1.3 Maternity and equivalent paternity benefits

No initiatives to simplify access to maternity and paternity benefits have been taken in the period covered.

1.2.1.4 Invalidity benefits

No initiatives to simplify access to invalidity benefits have been taken in the period covered.

1.2.1.5 Old-age benefits and survivors' benefits

No initiatives to simplify access to old-age and survivors' benefits have been taken in the period covered.

1.2.1.6 Benefits in respect of accidents at work and occupational diseases

No initiatives to simplify access to benefits related to accidents at work and occupational diseases have been taken in the period covered.

1.2.2 Simplification of the application process for accessing benefits

The wide reform to digitalise all public services in Albania has as its main aims increasing transparency, improving efficiency by shortening waiting times, and fighting corruption.

Identifying potential beneficiaries and increasing the take-up of benefits were not explicitly stated as objectives. However, the reform has simplified application processes for benefits for all six social protection branches. All applications can only be made digitally now, through the e-Albania platform. As e-Albania integrates the vast majority of government platforms and information systems, exchange of information between institutions is now completely digital and very effective, which has lowered the administrative burden on citizens. An important number of documents that before had to be submitted with the application are now generated automatically by the public administration. Complaints can also only be filed digitally through e-Albania. The platform was especially used during the COVID-19 pandemic and served as a stress test for the system and a learning process for the transfer of other services online. As of today, there are no available data or studies on the positive or negative impact of this reform. To our knowledge there are no official plans to include people with low digital skills or vulnerable groups.

1.2.2.1 Unemployment benefits

The main initiative to simplify the application process for the unemployment benefit taken in the period covered is the online application by job-seekers through e-Albania. The interview continues to take place at employment offices.

1.2.2.2 Sickness and healthcare benefits

Within the framework of the initiatives for the health card and the health digital register, visits are booked online. The recommendations and referrals from Primary Health Care to Specialised Care are digital and medical prescriptions are now issued only digitally.

The main initiatives to simplify access to sickness benefits in the period covered are linked to the consolidation of services provided online, such as the health card, compulsory medical examinations, e-prescriptions and e-consultations. The main available online services for employed and self-employed workers are set out below.

Health cards. The identification of people insured under the compulsory health insurance scheme is done through the health card, which is a document that proves that its holder is an insured person and benefits from free health services. To obtain a health card, insured people can apply online⁹. The system verifies people's data and automatically determines the relevant category/categories. The card is distributed for free. This service is offered immediately online for employed and self-employed people and some other categories.¹⁰ Prior to applying for the health card, citizens need to be registered with a family doctor.

To apply online for this card, an ID card or biometric passport is required in order to log in to the e-Albania portal. However, after the online application for the health card, citizens need to present to the health centre the ID card or birth certificate for children up to the age of 16. In the absence of an ID card, a civil status certificate or passport is presented, which are documents that contain a personal identity number. For foreign nationals the residence permit or provisional residence permit issued by the local authority for border and migration is required. The health card also contains a barcode which serves to verify the validity of the card recognised by the CHCIF electronic health card system.

People who are provided with a health card for the first time must appear at their family doctor to verify the registration in their electronic register.

The information available at the CHCIF webpage says that health cards printed online have the same value as those issued at CHCIF counters, and are recognised by all healthcare-

⁹ www.e-Albania.al

¹⁰ Full/partial disability, war invalid, veteran, pensioner, unemployed/job-seeker, on maternity leave, beneficiaries of social assistance. All other categories can make a reservation online and must physically present themselves at a CHCIF office.

providers contracted with the fund. It is not clear whether, from May 2022, this document will be issued only online or also by family doctors.

Electronic prescriptions. Through e-Albania, employed and self-employed people can access data on their electronic prescriptions.

With the start of the pandemic, e-Albania became essential for accessing healthcare services, such as **COVID-19** vaccinations, medical appointments, electronic prescriptions, referrals and reimbursement of healthcare costs. Given the scope of this report, we will not focus on the adequacy of these services provided. The electronic "COVID-19 vaccination request" service enables all citizens to send their application online to the Ministry of Health and Social Protection. The applicant is then informed by SMS or contacted by the family doctor on the date and place of vaccination. A COVID-19 vaccination and healing certificate can be accessed and downloaded through e-Albania.

The electronic service also enables citizens to upload a **recommendation for consultation with a specialist doctor**, issued by a family doctor. Once logged in to the portal of e-Albania, personal data (such as health centre and family doctor) are filled in automatically. The recommendation given by the family doctor to the specialist doctor is valid for six days. Through e-Albania, citizens can also access the recommendations for consultation with a specialist doctor issued by the family doctor at the health centre where they are registered.

Citizens can also **access and reschedule consultations** with specialist doctors following the referral system. From the moment citizens use the service, all their examinations will be displayed. For each booked examination, citizens can access the details of the examination, such as the date of booking and the schedule.

The system also allows people to request a change in their family doctor, within the doctors available at the health centre of their permanent residence.

The e-Albania portal also offers access to online information on the prices of drugs listed as reimbursable in the Republic of Albania.

Moreover, the Programme on the Prevention and Control of Non-Communicable Diseases 2021-2030 envisages a further reduction of financial, administrative and geographical barriers. The key priorities identified for 2021-2024 focus on: (i) maintaining the system of free primary healthcare services for the uninsured population; (ii) services for promoting smoking cessation, through nicotine replacement in basic health services, without barriers for users; (iii) employing management mechanisms to integrate all available resources, and increase public and private hospital capacity, avoiding catastrophic costs for families; (iv) enabling access to a national network of advanced hospital treatment services in diagnosis and treatment for cardiology, health emergencies and oncology, promoting the qualification of new specialists and new specialised centres; and (v) reducing out-of-pocket payments for medicines for socially disadvantaged categories by expanding the list of essential medicines and managing the co-payment system. However, to date there has not been any monitoring of the implementation of these priorities.

Finally, research and reports on access to sickness benefits are not available. Research and data on the delivery of benefits through e-Albania are also not publicly available. Service performance indicators are not in place and do not contribute to policy-making processes designed to adjust and improve the system.

1.2.2.3 Maternity and equivalent paternity benefits

No initiatives to simplify the application process for accessing maternity and paternity benefits have been taken in the period covered.

1.2.2.4 Invalidity benefits

No initiatives to simplify the application process for accessing invalidity benefits have been taken in the period covered.

1.2.2.5 Old-age benefits and survivors' benefits

No initiatives to simplify the application process for accessing old-age and survivors' benefits have been taken in the period covered.

1.2.2.6 Benefits in respect of accidents at work and occupational diseases

No initiatives to simplify the application process for accessing accidents and work and occupational diseases benefits have been taken in the period covered.

1.2.3 Simplification of the structures within the social protection administration

In the period covered there have been no initiatives to simplify the structure of the social protection administration with regard to unemployment benefits, sickness benefits, maternity and equivalent paternity benefits, invalidity benefits, old-age and survivors' benefits, and benefits related to accidents at work and occupational diseases. The only exception is healthcare benefits and initiatives, which are described below.

1.2.3.1 Unemployment benefits

Under secondary legislation in support of the implementation of the Employment Promotion Law, the National Agency of Employment and Skills (NAES) was established through a decision of the Council of Ministers on 31 July 2019. The stated mission of the NAES is to become the partner of choice for all vocational students, adult trainees, job-seekers, job-changers and employers, through the provision of high-quality vocational education/training and employment services. The new proposed structure reflects better the functions of the agency and is in line with the NAES and its vision. The NAES is currently filling staff vacancies at the central and regional/local level, which should increase the efficiency of employment services and enable better targeting of job-seekers.

1.2.3.2 Sickness and healthcare benefits

In the healthcare sector some services were already in place and delivered online before 2022; however, no reports on the adequacy and efficiency of service delivery have been published.

1.2.3.3 Maternity and equivalent paternity benefits

No relevant simplification policy or practice with regards to administration has taken place.

1.2.3.4 Invalidity benefits

No relevant simplification policy or practice with regards to administration has taken place.

1.2.3.5 Old-age benefits and survivors' benefits

No relevant simplification policy or practice with regards to administration has taken place.

1.2.3.6 Benefits in respect of accidents at work and occupational diseases

No relevant simplification policy or practice with regards to administration has taken place.

2 Issues, debates and ongoing or planned reforms to ensure information on, and to simplify access to, social protection for workers and the self-employed

2.1 Issues, debates and reforms related to information

2.1.1 Issues

National minimum standards for services are still to be established, and there is a need for a policy to guide the integration of online and face-to-face services while following the highest standards of data protection (EC, 2021). Albania operates an electronic system for collecting and reporting health information for medical records based on European core health indicators (ECHI); but the system is not yet operational, while the progress in statistical governance, technologic infrastructure and human resources remains inadequate (EC, 2021).

An important challenge related to the improvement of access is the promotion of health services and patients' rights to them. One of the recommendations of the Ombudsman to the Ministry of Health and Social Protection is that awareness campaigns be undertaken for citizens benefiting from state reimbursement of the COVID-19 medicine package; in addition, the patient's rights card should be posted in all hospitals in an easy-to-read format (Ombudsman, 2021). Hospitals need to develop their own strategies for increasing patients' awareness of their rights. According to an assessment carried out by the Ombudsman, almost all hospital patients interviewed did not know their rights, and redress for grievances is also not regulated (Ombudsman, 2021). One of the challenges reported by the CHCIF is the need for information regarding prescriptions, including reimbursement procedures and how to access healthcare services during the pandemic (CHCIF, 2020). Another concern relates to the online system for acquiring a health card, for both foreign and Albanian citizens, which allows people to have medication costs reimbursed.

The fact that only 45% of people eligible for check-ups have been screened (WHO, 2018), or that people normally covered by health insurance report that they have no coverage, shows that there is still much to be done to inform the public and raise awareness, especially with regard to preventive services. Increasing public trust and changing the perception of the health system are key to increasing access to health services.

Family doctors have noted that the electronic prescribing system has reduced the administrative burden and increased patients' access to medicines (WHO, 2018). However, there is no integrated national information system of electronic medical records; primary healthcare data are therefore collected and transferred to government agencies on paper (WHO, 2018).

The Ombudsman's assessment highlights the persistent problems reported regarding the rights of people with disabilities, such as access to information and services (Ombudsman, 2021). Moreover, access to information and social protection services for older people has also been highlighted. Over the years, a considerable number of complaints have been received by the Ombudsman related to the incorrect calculation of pensions. Similarly, the need for information on social protection benefits has been a persistent request from citizens, along with the need to review the adequacy levels of these benefits.

Findings from the latest monitoring report for Albania (OECD SIGMA, 2021) suggest that, overall, citizens have a positive opinion of the accessibility of public information. However, the report argues that the mechanism for imposing sanctions for violation of the right to information is flawed and there is a lack of comprehensive transparency monitoring and data, which hinders further progress in this area (OECD SIGMA, 2021).

Another report points out that minority groups, such as people with disabilities, were less likely to state that they are aware that government administration offers electronic services

through the e-Albania portal (IDM, 2020). Government websites are not readily accessible for people with visual impairment (OECD SIGMA, 2021), while the needs of people with visual and hearing impairments are often not properly taken into consideration in measures to improve access to social protection services and service delivery. Although Albania's digital ecosystem has seen positive developments, access to and use of ICT in rural areas are considered to be a major gaps, hampering growth in the country (ITU, 2016). The available data highlight the existing gaps in connectivity, and more importantly the lack of adequate skills on the part of vulnerable segments of the population.

2.1.2 Debates

A review of the Open Government Partnership Action Plan 2020-2022 (Government of Albania, 2020c) found that the commitments were largely replicated from pre-existing government initiatives and strategies, rather than stemming from priorities identified through engagement with civil society and citizens. Furthermore, the same review pointed out that some milestones had already been implemented before the action plan consultation began.

The digitalisation of all public services has been accompanied by a still ongoing debate among media, experts and civil society organisations with regard to the security of information stored in e-Albania and on other government platforms. A massive data leak in early 2022 disclosed personal information related to phone numbers, workplaces, wages, car registration plates and other information for almost every citizen. Although the government maintains that digitalisation of information and services is the only way to obtain rapid improvements in the efficiency and transparency of public services, others argue that digitalisation and centralisation of information should be accompanied by measures to make citizens invulnerable to data leaks.

2.1.3 Ongoing or planned reforms

Apart from the digital agenda and e-Albania platform services, there are no other ongoing or planned reforms for improving access to general and personalised information about the six branches.

A revised action plan for the cross-sectoral strategy "Digital Agenda of Albania 2020-2022"¹¹ has been approved, and the National Agency for the Information Society (NAIS) is finalising the draft digital agenda for 2021-2025. The strategic priorities focus on the development of e-government and the provision of interactive public services for citizens and businesses, and the development of electronic communications infrastructure in all sectors (including health, education, environment, agriculture, tourism, culture, energy, and transport).

Some of the key objectives of this action plan focus on: innovation (one-stop centres); completing and improving the legal framework for e-government and the information society; improving ICT infrastructure in public administration; and improving the digital infrastructure in the health sector in order to increase the quality of medical services through a 30% increase in e-services (*hospital information system*).

Moreover, the government of Albania is also implementing The Open Government Partnership National Action Plan for Albania 2020-2022.¹² The plan entails four thematic components: (i) anti-corruption; (ii) digital governance; (iii) access to justice; and (iv) fiscal transparency. One of the challenges also identified in the plan remains the fact that activities related to ICT policies in Albania are mainly focused on the development of ICT infrastructure and the creation of the necessary systems for the implementation of sectoral policies. The plan also recognises that to create a transparency-oriented society, more

¹¹ Accessible at: <https://akshi.gov.al/wp-content/uploads/2021/08/vendim-2020-12-24-1081.pdf>.

¹² Accessible at: https://www.opengovpartnership.org/wp-content/uploads/2021/01/Albania_Action-Plan_2020-2022_EN.pdf.

emphasis should be placed on the development of an inclusive and citizen-centred society and knowledge-based economy, as well as a transparent and efficient public administration. Furthermore, in order to improve public service delivery there is a need to standardise requirements, unify application procedures, and establish the legal basis for reform. Finally, promoting public accountability and civic engagement/participation requires not only increased access to information and resources but also changing the mentality about public service delivery and raising citizens' awareness of their rights as beneficiaries of public services (Government of Albania, 2020c).

2.2 Issues, debates and reforms related to simplification

2.2.1 Issues

The decision by the government to close all frontline offices and digitalise all public services raises some important issues as to whether this will lead to increased access or not. Although the e-Albania platform has existed since 2012, and since 2017 some services have only be accessible through this platform, there are still significant numbers of citizens who are not familiar with how to use it, especially people aged 60+ who possess low digital skills. According to the Institute of Statistics (INSTAT), the number of citizens using e-government services increased from 14.9% in 2018 to 32.1% in 2021, while the number of citizens submitting completed forms or applications increased from 6.9% in 2018 to 15.7% in 2021 (INSTAT, 2021). In spite of this recent increase, the number of citizens who are familiar with e-government and online applications is extremely low. Thus, some argue that the decision to close all frontline offices was somewhat hasty, as this has left an important number of citizens with low digital skills with no access to public services.

Another issue is related to the costs of services for citizens. One of the reasons to fully digitalise all public services was to reduce the costs of these services. However, citizens with low digital skills who cannot access services through e-Albania are turning to relatives or emerging private businesses to submit their applications in exchange for a fee. These emerging businesses are filling in the gap left by the closure of all frontline offices, including those of ADISA, and sometimes they apply fees that are even higher than the fees that government agencies used to apply for the same service.

Despite the rapid digitalisation of services, the NAES continues in-person services to enable access and better support through employment offices. This is because employment offices have been instructed to provide support for filling in applications – the digital agenda should not significantly affect access.

2.2.2 Debates

Although the digitalisation of services has affected many citizens with low digital skills, the issue has not gained any media coverage or any reaction from civil society organisations. The media has mainly paid attention to issues regarding system failures of the e-Albania portal and complaints by business associations.

2.2.3 Ongoing or planned reforms

The government of Albania intends to continue its digitalisation agenda. In 2021, the 1,207 electronic services available on the e-Albania portal were of level 3 or 4, according to the UNPAN¹³ classification. For level-3 services the procedure only begins with an online application, while for level-4 services the procedure begins and ends online (OECD SIGMA, 2021). As of May 2022, all public services are of level 3, meaning they can be applied for

¹³ United Nation Public Administration Network.

online, and the government intends to increase the number of level-4 services where procedures begin and end online.

Out of the six social protection branches, healthcare is a frontrunner in terms of digitalisation. There is no official information as to which social protection branch will be fully digitalised in the near future, but the agenda is set.

2.3 Suggestions for improvements

Although digitalisation of services increases access and improves transparency, the fact that only 15.7% of the population completed online applications in 2021 makes it imperative for the government to start a nationwide campaign on how to use the e-Albania portal and how to access services digitally, targeting specifically people with low digital skills, people aged 65+, and people with disabilities. In addition to a general campaign on the e-Albania portal it might be useful to have specific campaigns on groups of services, such as healthcare, social services, social insurance.

The closure of all frontline offices has left citizens with no source of counselling except the ADISA hotline or live chat, which cannot be accessed easily, and which are not very useful when there is a need to review documentation in a specific case. The people best fitted to provide counselling are the employees of the institutions providing the services, and therefore a suggestion is for the government to think of a way to arrange for such a service to be provided.

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