



EUROPEAN SOCIAL POLICY NETWORK (ESPN)

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

Lithuania

Laimutė Žalimienė und Jekaterina Navickė



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Directorate D — Social Rights and Inclusion
Unit D.2 — Social Protection

Contact: Flaviana Teodosiu

E-mail: flaviana.teodosiu@ec.europa.eu

*European Commission
B-1049 Brussels*

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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L. Žalimienė, J. Navickė, Vilnius University

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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 main stakeholders providing information on social protection benefits and healthcare services in Lithuania include the Ministry of Social Security and Labour (MoSSL), the State Social Insurance Fund Board of the Republic of Lithuania under the MoSSL (Sodra), the Ministry of Health (MoH), and the National Health Insurance Fund under the MoH (NHIF). Municipalities also play an important role in providing information on social protection benefits for their residents. There are three main ways in which information is provided: using the digital environment, by phone, and face-to-face. It is possible to receive both general and individual-level information on social protection benefits and healthcare services.

The main simplification of the application process for accessing social benefits is related to the development of digital services by Sodra, MoSSL and MoH since around 2004, the time of Lithuania's accession to the EU. There are also efforts to automate the application process for different regular and one-off payments, which accelerated with the COVID-19 pandemic. The latest successful example of automated payments was related to benefits for single people (pensioners) in 2021-2022.

Good practices in providing access to general and personalised information on social protection rights, entitlements and obligations include the following.

- A special MoSSL website (kasmanpriklauso.lt) on all types of social benefits, compensation and services was launched in 2021. Information there is organised according to social risks and life-course situations, and is simplified and explained with examples and illustrations.
- The "Your Sodra" directory is available on the Sodra webpage dedicated to public e-services for insurers and insured people. The webpage provides detailed personalised information, including on contributions paid, and social benefits and pensions granted. Applications can be submitted for 12 types of benefits. There are also 12 calculators for social benefits and social insurance contributions on this webpage.
- In the sphere of non-contributory benefits, the electronic family support information system (SPIS) was launched by the MoSSL in 2008 and continues to be developed. The SPIS includes several modules and allows residents to apply for more than 30 non-contributory social benefits.

A good example of successful general awareness-raising campaigns was the occasion in 2018 when Sodra sent letters known as "cherry envelopes" to employees and self-employed individuals who had earned less than the minimum wage over the previous 12 months. These were intended to remind employees that their future pension depends on their current insurance contributions, as well as to highlight the possible consequences of the shadow economy.

The main reform in the sphere of simplification of social protection can be traced back to the pension reform in 2018 (i.e. introducing a simplified pension formula and a single provider of the pension annuities – Sodra – by mid-2020).

The main issue related to the functioning of information systems is in the area of healthcare. The development of the e-health system since 2005 has been complicated, with persistent quality issues related to its functioning. Although the system has constantly been improved, especially since 2015, patient organisations criticise access to information provided through the system.

The COVID-19 pandemic accelerated the development of digital services. When developing access to information, it is important to pay attention to gaps in digital literacy and access to the internet among socially vulnerable groups, and to improve the situation.

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

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

This section provides information on the main policies and practices aimed at improving information about the conditions and rules of access to social protection for workers and the self-employed. We provide a general overview and information on six social protection branches.

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

The main stakeholders providing information on social protection benefits and healthcare services in Lithuania are: the MoSSL, Sodra, MoH and NHIF. Municipalities are also important in providing information on social protection benefits for their residents. The general aspects of policies and practices of these actors to ensure access to general and personalised information are described below; information on the policies and practices of the MoH and the NHIF are described in Section 1.1.1.2.

The **MoSSL** website¹ provides extensive information on social protection, in Lithuanian and English. It provides information on social insurance contributions, entitlement and eligibility conditions, and the duration and amount of each benefit, in the “activities” section (*veiklos sritys*), which contains broad information on all fields of social protection that are under the competence of the MoSSL. This information is, however, more targeted at professionals and people with high literacy skills, and includes detailed information on rules, references to laws, and other specific and rather technical information.

A new initiative of the MoSSL was to launch a special website (kasmanpriklauso.lt) with information on all types of social protection benefits (contributory and non-contributory), compensation and services. The website was launched in 2021.² Information there is organised according to social risks and life-course situations, and is simplified and explained with examples and illustrations. The information is available in Lithuanian, and also in Ukrainian since 2022.

Besides this information, the MoSSL publishes social protection news both on its website and through social media. The ministry makes extensive use of its own Facebook account for short, eye-catching announcements on new decisions by the authorities on social protection.

Sodra provides information on pensions and other social insurance benefits, in Lithuanian, English and Russian.³ There are online application forms as well, but only in Lithuanian. It also provides information for employees, self-employed people and employers about social insurance contributions, including detailed instructions on how to pay them. There is a new section for Ukrainian migrants about social contributions and social benefits. Information is available in Lithuanian, English and Russian.

The main information for residents is provided in a reader-friendly mode avoiding legal terms. Several titles of sections with detailed information are: “I want to receive a pension”, “I got sick or am looking after a sick family member”, “I want to receive a maternity, paternity or child maintenance benefit”, “What to do if I lost my job?”, “What to do if I lost my relatives?”, “For people living and working abroad”, and so on.

¹ URL: <https://socmin.lrv.lt/>

² URL: <https://socmin.lrv.lt/lt/naujienos/viskas-vienoje-vietoje-apie-ismokas-skirtingais-gyvenimo-atvejais-www-kasmanpriklauso-lt>

³ URL: <https://www.sodra.lt/en/>

There are also 12 calculators that can be accessed through Sodra.⁴ These include: a pension annuity calculator; a calculator of projected pensions; a sickness benefit calculator; a childcare benefit calculator; a maternity/paternity benefit calculator; a workplace calculator; a self-employment tax calculator; a calculator of child maintenance; a business testimony calculator; an unemployment benefit calculator; a pension age calculator; and a work experience conversion calculator.

With regard to individualised information, the **Your Sodra** directory is available on Sodra's website.⁵ This directory provides access to the electronic insurers' service system (*elektroninė draudėjų aptarnavimo sistema – EDAS*) and the electronic residents' service system (*elektroninė gyventojų aptarnavimo sistema – EGAS*).

- **EDAS** was implemented back in 2006.⁶ It is a public e-services initiative for insurers. As a result of the EDAS project implementation, the processes of acceptance and storage in the databases of Sodra have been automated, and there have been improvements to social insurance contribution payment control, debt rating, the correct and timely transfer of pension contributions to the pension funds, and the use of human resources of the Sodra territorial offices. The quality and efficiency of the services rendered while using data from the Sodra information system have been improved and customer awareness has been raised; also, necessary measures for the implementation of e-government have been taken.
- **EGAS** was implemented in 2009.⁷ This is a digital service system for residents. New applications can be submitted for 12 types of benefits. Customers can also check their eligibility for an old-age pension, their official income and contributions to Sodra, information on contributions to the second-pillar pension funds, and information about benefits granted, etc. Information is available in Lithuanian and English. Other sections include reports on benefits and pension rights, payment of contributions, and voluntary insurance.

Both systems are constantly improved in terms of their design⁸ and functionalities.⁹ Both use a qualified e-signature technology, which ensures the legal validity of digital documents, as required by Lithuanian and EU legislation.

People may also receive general and individualised information from Sodra and the Employment Service (formerly the Labour Exchange) by phone, e-mail or face-to-face (pre-registration is needed) using a toll short number¹⁰ and a toll-free long number. A call-back function and online pre-registration have been available since 2018.¹¹ Sodra and the Employment Service started using a single information line in 2018; since 2017, Sodra has been co-operating with the State Tax Inspectorate by exchanging officers providing information on social insurance and taxes in both institutions. Automatic messages are sent to those who are late in paying their social insurance contributions, so that people remain insured and eligible for benefits and services; this particularly concerns self-employed people and those who have to pay compulsory health insurance contributions themselves. Sodra also applies forced recovery of debts through its system.¹²

Moreover, it is important to ensure access to information on social protection at municipal institutions and on their websites. There has been no detailed research on the extent to which municipalities do that. However, individual examples show that municipalities do offer user-friendly, clear and regularly updated information on their own websites and

⁴ URL: <https://www.sodra.lt/en/calculators>

⁵ URL: <https://www.sodra.lt/en/#>

⁶ URL: <http://draudejai.sodra.lt>

⁷ URL: <http://gyventojai.sodra.lt>

⁸ URL: <https://www.sodra.lt/lt/naujienos/sodra-atnaujino-paskyros-draudejams-dizaina>

⁹ URL: <https://www.sodra.lt/lt/naujienos/gyventojamsnaujausi-sodros-duomenys-apie-ju-staza-ir-apskaitos-vienetus->

¹⁰ 1883, €0.09 per minute.

¹¹ URL: <https://www.sodra.lt/lt/naujienos/sodra-emesi-taupyti-lientu-laika>

¹² URL: <https://www.sodra.lt/lt/naujienos/sodra-siekia-efektyviai-administruoti-psd-imokas-ir-valdyti-skola>

through external links to national information sources (e.g. on the websites of Kaunas, Vilnius and other municipalities). The websites of the municipal administrations also provide addresses and phone numbers where people can apply for social benefits.¹³ However, information from some municipalities is not provided in a simple, user-friendly form, and seems to be more oriented towards professionals and administrators. Municipalities are also encouraged to add banners promoting the dedicated MoSSL website (kasmanpriklauso.lt) on their webpages (see Section 1.1.2): the website provides information on unemployment benefits and employment services in one place.

Similarly, there are alternative sources of information that can be seen as good examples. An example of systematic information provided using the one-stop-shop principle is the “**Choose Lithuania**” (*Renkuosi Lietuvą*) website of the Migration Information Centre, which has functioned since 2017. This centre provides free one-stop consultations and information to returning Lithuanians and foreigners arriving in Lithuania on various issues related to local realities, including detailed information on social protection benefits.¹⁴

1.1.1.1 Unemployment benefits

Information on unemployment benefits is provided on two main portals – the websites of the MoSSL and Sodra. The Employment Service also provides very brief information about entitlement conditions to social insurance employment benefit; however, the administration and payment of benefits is currently under the competence of Sodra.

The MoSSL provides information on unemployment benefits according to the main activities of the ministry, as well as by life-course situations, through kasmanpriklauso.lt.¹⁵

Furthermore, information is provided by Sodra, where it is easy to find by selecting “What to do if I lost my job”.¹⁶ Detailed and reader-friendly information is provided on how to apply for the benefit, entitlement conditions, what documents are required, etc. The size of the benefit is also explained and a calculator is provided. In addition, benefit applications can be submitted online by connecting to EGAS.

1.1.1.2 Sickness and healthcare benefits

Information on sickness benefits is provided on three main portals – the Sodra, MoH and NHIF websites. Information on healthcare services is also available on the dedicated portal esveikata.lt.¹⁷

The programme for improving quality in personal healthcare services (*asmens sveikatos priežiūros paslaugų kokybės gerinimo programa*) and its implementation during 2018-2020 was the responsibility of the MoH. The programme stated that it is important to provide the public with the necessary information about the quality of services that can be expected, and the possible outcomes of healthcare, when choosing a service-provider. The **MoH** website provides information according to the main activities of the ministry;¹⁸ the “personal healthcare” section (*asmens sveikatos priežiūra*) provides a list of different health services. For each type of health service, a brief description and regulatory legislation is provided. Those who are less proficient in technology can find a link on the MoH website, listing the names and telephone numbers from which the necessary information on health-related issues can be obtained.¹⁹

¹³ URL: <http://www.kaunas.lt/seniunijos/informacija-apie-ismokas-skirtingais-gyvenimo-atvejais/>;

<https://vilnius.lt/lt/2022/01/04/gaunantiems-socialines-ismokas-kas-aktualu-ir-nauja-nuo-2022-01-01/>

¹⁴ URL: <https://www.renkuosilietuva.lt/>

¹⁵ URL: <https://socmin.lrv.lt/lt/veiklos-sritys/socialinis-draudimas/socialinio-draudimo-ismokos/nedarbo-socialinis-draudimas?lang=lt>

¹⁶ URL: <https://www.sodra.lt/lt/situacijos/informacija-gyventojams/ka-daryti-jei-netekau-darbo-3>

¹⁷ URL: <https://www.esveikata.lt/>

¹⁸ URL: <https://sam.lrv.lt>

¹⁹ URL: <https://sam.lrv.lt/lt/struktura-ir-kontaktai/gyventoju-priemimas>

The **NHIF** provides information to the population on: healthcare services reimbursed by the NHIF; compulsory health insurance; patients' rights and obligations; the list of personal healthcare institutions operating in Lithuania; and the services covered by insurance (the list is regularly supplemented and updated). Since 2017 the NHIF has provided the results of surveys of how well society is informed about different types of compulsory health insurance services. For example, about 62% of respondents state that they are informed, or very well informed, about the healthcare insurance system in Lithuania; 24% of research participants state that they had to pay for healthcare services during the previous 12 months, and only half of them received an explanation of the reason for this payment.²⁰

Both the MoH and NHIF websites contain links to the **e-sveikata** webpage,²¹ where the "services for patients" (*paslaugos pacientams*) link provides information about services, instructions and educational videos on how to use the e-services portal for patients or whom to call if in doubt.²² This page also contains descriptions of services, and information on: the waiting times for services and operations; the prices of medicines and aids; and the costs of treatments.

An important source of information about healthcare for patients is information provided by each healthcare institution. The law even regulates how such information is to be provided (e.g. it states that basic information about the care provided in an institution must be described in internal rules that must be accessible and visible to patients). On the other hand, patient organisations criticise these rules for often being difficult to find and written in language that is difficult to understand.

In the sphere of healthcare, the "self-help" (*pagalba sau*) campaign (a national mental health website) started functioning in 2020, providing up-to-date and reliable information in one place on emotional and mental health, as well as on psychological support. In order to inform the population about the availability of psychological help and to encourage them to apply for it, a national unified telephone number (1809) connecting various support lines has been established (MoH, 2020, 2021).

1.1.1.3 Maternity and equivalent paternity benefits

Information on maternity, paternity and childcare benefits is provided on two main portals – the MoSSL and Sodra websites. The MoSSL website provides general information on these benefits according to the main activities of the ministry as well as by life-course situations, through kasmanpriklauso.lt.^{23/24} The latter provides information in one place on both contributory and non-contributory social benefits and on available services.

Furthermore, information on contributory social benefits is provided by Sodra, where it is easy to find by selecting an appropriate life-course situation. Detailed and reader-friendly information is provided on how to apply for the benefit, entitlement conditions, what documents are required, etc. The size of the benefit is also explained and a calculator is provided. In addition, benefit applications can be submitted online by connecting to EGAS.

1.1.1.4 Invalidity benefits

The same situation applies as for maternity and equivalent paternity benefits, except there is no calculator for disability-related pensions.

1.1.1.5 Old-age benefits and survivors' benefits

The same situation applies as for maternity and equivalent paternity benefits. In addition, EGAS provides information on the number of accumulated pension points and the length

²⁰ <https://liqoniukasa.lrv.lt/lt/struktura-ir-kontaktai/ziniasklaidai-ir-visuomenei/tyrimai>

²¹ URL: www.e-sveikata.lt

²² URL: <https://www.esveikata.lt/#pacientams>

²³ URL: kasmanpriklauso.lt

²⁴ URL: <https://socmin.lrv.lt/lt/veiklos-sritys/socialinis-draudimas/socialinio-draudimo-ismokos/nedarbo-socialinis-draudimas?lang=lt>

of the social contribution record. A calculator is provided for estimating the pensionable age, and the size of the projected pension and annuity payment.

1.1.1.6 Benefits in respect of accidents at work and occupational diseases

The same situation applies as for maternity and equivalent paternity benefits, except there is no calculator for benefits in respect of accidents at work and occupational diseases.

1.1.2 General awareness-raising campaigns

The main broad-spectrum initiative of the MoSSL to raise general awareness and provide simplified and comprehensive information on social protection benefits and services to the public was to provide the special kasmanpriklauso.lt website, launched in 2021. The launch was followed by some media coverage and publicity. A banner for the website was distributed to all municipalities and also to relevant institutions under the MoSSL. The MoSSL chased up municipalities to ensure the banner was placed on their websites. The launch of the website was also followed by the distribution of printed flyers in 2021 and 2022, as well as informational visits by MoSSL representatives to municipalities in both years. Visualisations used on the website are also regularly published through social media and in the news section of the MoSSL website.

Sodra has a regular practice of raising awareness by publishing news and developments on its website, organising press conferences, issuing news articles in the mass media, etc. Some specific examples are provided below, by type of benefit.

Finally, there were a number of general awareness-raising campaigns conducted by the MoSSL, Sodra and MoH in 2020-2021 related to changes in social benefits due to the COVID-19 pandemic. Both the MoSSL and Sodra experienced an increase in the number of subscribers to their news and social media channels.²⁵

1.1.2.1 Unemployment benefits

Apart from the general information provided in Section 1.1.2, no additional information on unemployment benefits is available.

1.1.2.2 Sickness and healthcare benefits

The NHIF website shows that the fund is very active in using various tools and publicity channels to reach the widest possible public with information about these benefits.²⁶ The NHIF provides this information through social networks (Facebook, Instagram, YouTube, Flickr), the media, social advertising and special publications.²⁷ The publication "Citizens' Compulsory Health Insurance Fund" (*Piliečių privalomojo sveikatos draudimo fondas*) was also prepared and published on the website in addition to an information leaflet entitled "I just want to ask, or what patients usually care about" (*Aš tik noriu paklausti, arba kas dažniausiai rūpi pacientams*).

In order to find out what information the population needs about these benefits and what is the most acceptable way to receive it, the NHIF has included an online questionnaire on its website since 2020. Using the questionnaire, users can evaluate the quality of the information received, as well as the quality of services, at their own convenience.²⁸

A new public information service was launched in 2020: information on the NHIF digital services by e-mail. Notices were sent to all people registered in Lithuania as covered by

²⁵ Based on an interview with representatives of the MoSSL.

²⁶ URL: www.vlk.lt

²⁷ <https://liqoniukasa.lrv.lt/lt/struktura-ir-kontaktai/ziniasklaidai-ir-visuomenei/leidiniai>

²⁸

<http://old.vlk.lt/apklauso/Lists/2021%20M%20GYVENTOJ%20APTARNAVIMO%20VERTINIMO%20APKLAUSA/NewForm.aspx?Source=http%3A%2F%2Fwww%2Evlk%2Elt%2Fapklauso%2FLists%2F2021%2520M%2520GYVENTOJ%2520APTARNAVIMO%2520VERTINIMO%2520APKLAUSA%2FAllItems%2Easpx>

compulsory health insurance about the facility to check which healthcare services were provided to them and how much was paid for them from the NHIF.²⁹

The NHIF uses a variety of occasions (e.g. city festivities, events of non-governmental organisations, visits to various social and educational institutions) for publicity and to raise public awareness of information about the services of the NHIF.³⁰

1.1.2.3 Maternity and equivalent paternity benefits

Apart from the general information provided in Section 1.1.2, no additional information on maternity and equivalent paternity benefits is available.

1.1.2.4 Invalidity benefits

Apart from the general information provided in Section 1.1.2, no additional information on invalidity benefits is available.

1.1.2.5 Old-age benefits and survivors' benefits

In Lithuania, several initiatives have been taken to raise public awareness of the importance of declared income for pensions. In 2017, Sodra sent letters known as "cherry envelopes" to 138,000 employees and 84,000 self-employed individuals who had earned less than the minimum wage over the previous 12 months. The envelopes reached around 92% of potential recipients.³¹ These were intended to remind employees that their future pension depends on their current insurance contributions and help them to negotiate higher salaries with their employers, as well as to highlight the possible consequences of the shadow economy. It was followed by a change in legislation requiring employers to pay social insurance contributions based on at least the minimum wage, irrespective of the employee's working hours (European Commission, 2018). As a result of these and other measures implemented at the time, the number of enterprises paying below the minimum wage fell by 12.7% (from 18,902 to 16,503) in nine months (European Commission, 2020, p. 27).

1.1.2.6 Benefits in respect of accidents at work and occupational diseases

Apart from the general information provided in Section 1.1.2, no additional information on benefits in respect of accidents at work and occupational diseases is available.

1.2 Policies and practices to simplify access to social protection

1.2.1 Simplification objective embedded in reforms of social protection schemes

1.2.1.1 Unemployment benefits

The main reforms of social protection schemes aimed at simplification in the sphere of unemployment protection took place in 2020-2021 in relation to the COVID-19 pandemic. At that time, a job-seekers' allowance and a lump-sum payment for the self-employed were introduced. Instead of numerous eligibility conditions applied to contributory unemployment benefits, these new benefits were semi-universal, with few conditions and simple application procedures. However, these were temporary reforms, and hence not a subject of this report.

²⁹ <http://old.vlk.lt/naujienos/Puslapiai/Daugiau-nei-milijonas-gyventoj%C5%B3-pakviesti-pasitikrinti,-kiek-kainavo-1%C5%B3-gydymas.aspx>

³⁰ European Day – information on Patient Funds' services (*Europos dienoje- informacija apie ligonių kasų paslaugas*). URL: <https://ligoniukasa.lrv.lt/lt/naujienos/europos-dienoje-konsultacijos-apie-ligoniu-kasu-paslaugas>.

³¹ URL: <https://www.sodra.lt/lt/naujienos/-vysninio-voko-iniciatyvos-finisas-informacija-pasieke-92-proc-gaveju>

1.2.1.2 Sickness and healthcare benefits

Legislation has been supplemented to improve the availability of vaccines (i.e. to give access to some of them through pharmacies). From 2021, a pharmacy with a licence from a personal healthcare institution has been granted the right to vaccinate the adult population against tick-borne encephalitis, as well as against seasonal influenza and COVID-19.

1.2.1.3 Maternity and equivalent paternity benefits

From 1 July 2017, with the entry into force of the new version of the labour code, the procedure for parental leave changed, allowing men to take 30 calendar days of paternity leave at any time before the child reaches the age of 3 months.³² This reform was aimed at increasing the flexibility of the benefit and access to it. Previously men had to take their paternity leave during the first month after the birth of the child.

1.2.1.4 Invalidity benefits

The pension scheme was reformed in 2018 with the explicit objective of increasing transparency, by the introduction of a simplified pension formula for the earnings-related part. It is now a points-based system that reflects the ratio of individual contributions paid in the past and the average contributions paid overall into the system (European Commission, 2018; p. 144). Acquired, notional or replacement points are used for estimating invalidity pensions.

1.2.1.5 Old-age benefits and survivors' benefits

The pension scheme was reformed in 2018 with the explicit objective of increasing transparency, by the introduction of a simplified pension formula for the earnings-related part. It is now a points-based system that reflects the ratio of individual contributions paid in the past and the average contributions paid overall into the system (European Commission, 2018; p. 144).

Moreover, the reform foresaw a single provider of all pension annuities – all annuities were to be paid by Sodra by mid-2020, instead of individual private pension funds. This reform was aimed at consolidating and reducing administration costs for annuity payments. It was also intended to simplify the choice of an annuity-provider for pensioners.

1.2.1.6 Benefits in respect of accidents at work and occupational diseases

There was no simplification objective embedded in reforms in respect of accidents at work and occupational diseases.

1.2.2 Simplification of the application process for accessing benefits

The main simplification of the application process for accessing social benefits is related to **EDAS** and **EGAS**, systems described in Section 1.1 of this report. Both systems were implemented by Sodra, in 2006 and 2009 respectively, and are constantly being developed and improved. New applications can be submitted for 12 types of benefits through EGAS. Sodra also administers many non-contributory benefits (e.g. child maintenance benefits since 2017), which simplifies access for potential recipients.³³

In the sphere of non-contributory benefits, the main effort by the MoSSL was to create the **SPIS system**.³⁴ The system has been functioning since 2008 and is constantly being developed.³⁵ The SPIS includes several modules (for residents, and for representatives of

³² URL: <https://www.sodra.lt/lt/naujienos/nuo-lieposlankstesne-tevystes-atostogu-skyrimo-tvarka>

³³ URL: <https://www.sodra.lt/lt/naujienos/nuo-2018-m-ismokas-vaiko-islaiikymui-mokes-sodra>

³⁴ URL: <https://spis.lt/>

³⁵ On the approval of the Regulations of the Family Support Information System and the Data Security Regulations of the Family Support Information System. [*Dėl Socialinės paramos šeimai informacinės sistemos*

municipalities, educational and other institutions) and also functions as a data portal. The SPIS gives residents access to a set of digital public services (residents can submit online applications for more than 30 non-contributory social benefits).

With regards to the co-ordination of social protection benefits with other EU Member States, the MoSSL, together with Sodra, the Labour Exchange (currently the Employment Service), and the NHIF, launched the project on the national part of the electronic exchange of social security information (EESSI) system in 2017. The project was implemented in 2019. It resulted in citizens' applications being processed more quickly, with shorter waiting times for approval of social security records in other Member States, and in the calculation of benefits and payments.³⁶

There are also efforts to automate the application process for different regular and one-off payments. This was especially true in 2020-2021 in the context of the COVID-19 pandemic. One recent example is benefits for single people (pensioners). This benefit was automatically assigned to all eligible recipients using the administrative records of Sodra in 2020 and 2021. It is granted on the basis of people's marital status data contained in the population register – there is no need to apply to Sodra or submit a written or telephone application. Only in cases where it turns out that there is not enough information in the population register, or it is inaccurate, does Sodra ask for additional data or determine that these data be entered in the population register.³⁷

1.2.2.1 Unemployment benefits

A person can apply for unemployment benefits to either the Employment Service or Sodra, whichever is more convenient. Information is co-ordinated between these two authorities. Upon receipt of an application for an unemployment social insurance benefit, the Employment Service transmits the data to Sodra, which grants and pays the benefit.³⁸

1.2.2.2 Sickness and healthcare benefits

The electronic medical prescriptions for sick leave and maternity leave certificates management application system (EPTS) was developed and implemented back in 2010 in order to digitalise the process of issuing medical prescriptions for sick leave and to improve services provided by Sodra to insured people during temporary incapacity for work. This system enables the staff of healthcare establishments to receive information automatically about people's insurance, previously registered periods of incapacity for work, and other data required to create digital medical prescriptions for sick leave and maternity leave, sign them by digital signature and automatically transfer them to the Sodra information system. After the implementation of the system on 1 July 2010, non-digital medical prescriptions for sick leave were completely eliminated in Lithuania (ISSA, 2022). This also means that, since 2018, a person can apply for sickness benefit by filling out a general form once, after which it is no longer necessary to apply for it after each illness, as information is automatically processed and applicable benefits calculated and paid. The application can be submitted without leaving home, through connecting to Sodra's personal account online.³⁹

Analysing the development of the legal regulation of health services in Lithuania, the legislator has progressively clarified the concepts of quality and accessibility in relation to healthcare services, as well as providing more detailed information about services which helps patients to obtain important information (Astromskė, 2018). For instance, amendments to the Law on Healthcare Institutions of the Republic of Lithuania in 2018

nuostatų ir Socialinės paramos šeimai informacinės sistemos duomenų saugos nuostatų patvirtinimo.] 29 May 2008, A1-172. URL: <https://e-seimas.lrs.lt/portal/legalActEditions/lt/TAD/TAIS.321513>.

³⁶ URL: <https://www.sodra.lt/lt/naujienos/sodra-dalyvauja-elektroniniu-socialines-apsaugos-informacijos-mainu-eessi-sistemos-projekte->

³⁷ URL: <https://www.sodra.lt/lt/naujienos/vieniso-asmens-ismoka-bus-mokama-paskutine-kovo-savaite>

³⁸ URL: <https://socmin.lrv.lt/lt/veiklos-sritys/socialine-parama-kas-man-priklauso/netekau-darbo?lang=lt>

³⁹ URL: <https://www.sodra.lt/lt/naujienos/sirgotenepamirskite-paprasyti-ismokos->

provided for a timeline within which patients have to be provided with healthcare services at all levels, tests and procedures, etc. In addition, this law identified the authorities responsible for publishing and providing information to patients on cross-border healthcare, healthcare quality and safety standards, and so on.

1.2.2.3 Maternity and equivalent paternity benefits

The EPTS system was developed and implemented back in 2010 in order to digitalise the issuing process of medical prescriptions for sick leave and to improve the services provided by Sodra to insured people during temporary incapacity for work. This system enables the staff of healthcare establishments to receive information automatically about people's insurance status, previously registered periods of incapacity for work, and other data required to create the electronic medical prescriptions for sick leave and maternity leave, sign them by digital signature and automatically transfer them to the Sodra information system. After the implementation of the system on 1 July 2010, non-digital medical prescriptions for sick leave were completely eliminated in Lithuania (ISSA, 2022).

1.2.2.4 Invalidity benefits

A long awaited improvement for people with disabilities was implemented in 2022 – the level of working capacity or disability and special needs is now determined on the basis of personal health data contained in the information system of electronic health services and collaboration infrastructure (ESPBI IS). People with disabilities need to complete an electronic form provided on the website of the Disability and Working Capacity Assessment Office (DWCAO). The DWCAO takes its decision on the basis of the electronic documents provided by the ESPBI IS. The person does not need to go to a doctor or the DWCAO in order to complete the documents.⁴⁰

1.2.2.5 Old-age benefits and survivors' benefits

An opt-in system for participating in the second-pillar funded pension scheme was replaced by the automatic enrolment for all workers below 40, with a right to opt out, defer or temporarily suspend payments. The enrolment procedure is repeated every three years until people reach the age of 40. People over 40 who do not contribute to the funded statutory pension scheme can voluntarily enrol in the accumulation process. It should be noted that the opt-out system simplifies enrolment for those willing to enrol. However, it complicates the process for those who do not want to be enrolled, as they need to opt out several times. Those who are automatically enrolled into the second-pillar funded pension scheme are notified through EGAS and also by registered mail, and can opt out through EGAS by submitting a pre-filled online request.

1.2.2.6 Benefits in respect of accidents at work and occupational diseases

There was no simplification of the application process for accessing benefits in respect of accidents at work and occupational diseases.

1.2.3 Simplification of the structures within the social protection administration

The structure of Sodra was simplified by merging its territorial units. At the first stage of the reform, 50 territorial units were transformed into 11, with a further merging to four territorial units as of 1 July 2021. Sodra implemented the reorganisation in order to better organise its work and use its human and material resources more efficiently. This reorganisation should not affect residents (i.e. Sodra services should remain of the same quality and be provided by the same institutions).⁴¹

⁴⁰ URL: <https://sam.lrv.lt/lt/naujienos/aktualu-zmonems-su-negalia-mazesne-administracine-nasta-ir-zmoqui-ir-istaigoms>; <https://ndnt.lrv.lt/lt/prasymai>

⁴¹ URL: <https://www.sodra.lt/lt/naujienos/sodra-pertvarke-teritorinius-skyrius-qyventojai-bus-aptarnaujami-iprastai>

The administration of the specific types of benefits is now also assigned to different specialised units of Sodra. For example, the Alytus unit deals with applications and information requests for payments from the Guarantee Fund; the Utena unit deals with unemployment benefits; and the Klaipeda unit deals with child maintenance payments. Such profiling is expected to become common practice for the payment and administration of benefits.

Moreover, a new initiative as of 2022 is **the identification code of a legally working person** – hereinafter the “legally working code” (*skaidriai dirbančiojo kodas*).⁴² It is a unique QR code that encrypts data making it possible to verify if someone is officially employed under an employment contract, is a self-employed person, or a person who has been seconded to the Republic of Lithuania. The validity of the legally working code can be verified online⁴³ with the help of a telephone or other computer device with a camera, after scanning the QR code.

1.2.3.1 Unemployment benefits

The administration of unemployment benefits has been transferred from the Employment Service to Sodra. Nevertheless, a person can apply for unemployment benefits to either the Employment Service or Sodra. Information is co-ordinated between these authorities. Upon receipt of an application for unemployment social insurance benefit, the Employment Service transmits the data to Sodra, which grants and pays the benefit.⁴⁴

1.2.3.2 Sickness and healthcare benefits

Some simplification of administrative structures was implemented in relation to the management of the COVID-19 pandemic and has already become customary. For example, in 2020, remote consultation with doctors and other professionals was introduced to provide patients with the necessary personal healthcare during the lockdown. The procedure for this consultation has now been approved and remote consultation with a specialist doctor is included in the list of specialised out-patient personal healthcare services, the costs of which are paid from the NHIF.⁴⁵

1.2.3.3 Maternity and equivalent paternity benefits

There was no simplification in the structures within the social protection administration specifically related to maternity and equivalent paternity benefits.

1.2.3.4 Invalidity benefits

There was no simplification in the structures within the social protection administration specifically related to invalidity benefits.

1.2.3.5 Old-age benefits and survivors’ benefits

There was no simplification in the structures within the social protection administration specifically related to old-age and survivors’ benefits.

⁴² URL: <https://www.sodra.lt/en/benefits/information-for-insurers/lwc/legally-working-code>

⁴³ URL: www.sodra.lt/tikrinti

⁴⁴ URL: <https://socmin.lrv.lt/lt/veiklos-sritys/socialine-parama-kas-man-priklauso/netekau-darbo?lang=lt>

⁴⁵ Order No V-436 of the Minister for Health of the Republic of Lithuania of 9 May 2008, On the approval of the list of specialised out-patient personal healthcare services (*LR sveikatos apsaugos ministro 2008 m. gegužės 9 d. įsakymas Nr. V-436, Dėl Specializuotų ambulatorinių asmens sveikatos priežiūros paslaugų, kurių išlaidos apmokamos Privalomojo sveikatos draudimo fondo biudžeto lėšomis, ir jų bazinių kainų sąrašo patvirtinimo*), the costs of which are reimbursed by the budget of the compulsory health insurance fund, and the list of their basic prices (as amended by Order No V-3064 of 30 December 2020):

https://sam.lrv.lt/uploads/sam/documents/files/Administracine_informacija/Veiklos%20ataskaitos/SAM%20VEIKLOS%20ATASKAITA%202020%20METAI.pdf.

1.2.3.6 Benefits in respect of accidents at work and occupational diseases

There was no simplification in the structures within the social protection administration specifically related to benefits in respect of accidents at work and occupational diseases.

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

The main issues relating to the functioning of information systems are in the area of healthcare. The implementation of the e-health system since 2005 has been complicated, with various quality-related problems arising constantly. The fourth stage of e-health development (2015-2025) is currently underway, involving the improvement and expansion of the functionality and user-friendliness of the system. In 2017, the National Audit Office reported that the system was not operating at full capacity; that its use was minimal, with pharmacies and medical institutions reluctant to provide information to the system; and that the IT literacy of doctors and patients was an obstacle.⁴⁶ Also, the number of patients connected to the system portal was relatively small.⁴⁷ However, an increase in this number can be observed: about 23% of the population used the system in 2019, rising to 64% in 2021 (but only 40% of the population aged 65-74).⁴⁸

Legislation has been passed aimed at improving patients' access to information. The programme for improving quality in personal healthcare services approved in 2017 stipulates that written information on preparation for various procedures, laboratory tests, use of drugs, prevention, and patients' responsibilities and rights, must be prepared and made accessible for patients in a timely manner.⁴⁹ According to researchers, there is a tendency in Lithuania for the concepts of the quality and accessibility of healthcare services to be increasingly clarified (Astromskė, 2018). On the other hand, in many strategic pieces of legislation there is no focus on the issues of access to information for patients about healthcare services – for example, the Lithuanian health programme 2014-2025 (*Lietuvos sveikatos 2014-2025 metams programa*) and the Law on the Health System, 2022 (*Sveikatos sistemos įstatymas, 2022*).

MoH annual reports⁵⁰ on the achievements of the e-health system primarily see the system as a tool to improve the performance of health professionals and administrators (e.g. by highlighting the growing number of documents submitted through the system, and of professionals or pharmacies using the system). However, the benefits of the system in providing as much information as possible to the patient fade into the background.

The websites of some healthcare institutions providing information about their services are not adapted for people with disabilities. A study by Staševičienė and Fatkulina (2021) emphasised that there is a greater focus on access to services for people with reduced mobility, and the needs of other people with disabilities are often overlooked. The study

⁴⁶ URL: <https://www.lrt.lt/naujienos/lietuvoje/2/1202071/lietuviskoji-e-sveikata-per-15-metu-lydejo-korupcijos-tyrimai-bei-skandalai-o-savaitei-nuplove-vasariska-liutis>

⁴⁷ Creation of an electronic health system: National Audit Report (*Elektroninės e sveikatos sistemos kūrimas: Valstybinio audito ataskaita*) 26 April 2017. No VA-2017-P-900-3-12.

⁴⁸ URL: <https://osp.stat.gov.lt/skaitmenine-ekonomika-ir-visuomene-lietuvoje-2020/gyvenimas-internete>

⁴⁹ On the Approval of the Programme for Improving Quality in Personal Healthcare Services (*Dėl asmens sveikatos priežiūros paslaugų kokybės gerinimo programos patvirtinimo*). 15 November 2017. No V-1292. URL: <https://e-seimas.lrs.lt/portal/legalAct/lt/TAD/3ca52110caac11e782d4fd2c44cc67af/asr>.

⁵⁰ MoH (2021). Activity Report 2020 (*2020 metų veiklos ataskaita*). URL: https://sam.lrv.lt/uploads/sam/documents/files/Administracine_informacija/Veiklos%20ataskaitos/SAM%20VEIKLOS%20ATASKAITA%202020%20METAI.pdf.

also reported that individuals with visual impairments consider themselves to be most discriminated against not only in terms of the provision of services but also the provision of information in a way that is accessible to them, and that there is a lack of understanding of the information environment suitable for blind people. Note, though, that both the MoSSL and MoH websites have information about all social protection benefits adjusted for people with visual impairments (website versions “for people with disabilities”).⁵¹

Patient organisations could play a greater role in overcoming information barriers. The programme for improving quality in personal healthcare services (2017) states that there is a lack of co-operation between healthcare professionals and patient organisations in Lithuania, and improvements in this area could contribute to the dissemination of objective patient-oriented information. It is argued that the websites of both professionals’ and patients’ associations do not provide sufficient information relevant to patients.⁵²

In the area of social benefits, there are no major issues reported with respect to general and personal information and applications for social benefits provided by Sodra. The main issue in this sphere is related to the need for more effective administration of child maintenance benefits⁵³ and continuous dissatisfaction with the forced recovery of debts owed to Sodra and other stakeholders.⁵⁴

However, the long standing issue in the sphere of access to, and information on, social benefits relates to social assistance benefits and difficulties in applying for them via the SPIS. In terms of access to information on social assistance, municipalities were evaluated as scoring on average 4.6 points out of possible 10 in 2020 (MoSSL, 2021). The assessment measured how information on social assistance was shared on municipal websites and through other municipal information channels. A survey in 2022 showed that even people who are already receiving cash social assistance benefits are badly informed about the rules, amounts, requirements and services that they are eligible for.⁵⁵

2.1.2 Debates

Although the e-health system is constantly evolving, patient organisations quite often publicly criticise the availability of information using this system. According to them, the functionalities created by the system are difficult to use; there is a lack of information on how to use the system; and information is outdated and not updated quickly enough (POLA report, 2020). In the development of the e-health system, the main debate arises as to who is the beneficiary of this system. Some stakeholders believe that the patient is the main beneficiary, so the convenience of the system for patients is paramount. Others believe that doctors are the main beneficiaries, hence it is important to make the job easier for them (Jankauskienė *et al.*, 2015). Another approach is that the system is designed to facilitate the administration of health services, since the criteria for assessing the quality of the e-health system are not focused on the needs of users, but on the formal inputs and outputs of the e-health system (e.g. the ability to generate e-statistical reports and e-prescriptions) (Vedlūga, 2021). Although various pieces of legislation regulate the security and privacy of patients' personal data,⁵⁶ research shows that there are security issues due to legal uncertainty/inadequacy, and technical or human factors (Jankauskiene *et al.*,

⁵¹ https://socmin.lrv.lt/lt/?disabilities_action=enable; https://sam.lrv.lt/lt/?disabilities_action=enable

⁵² On the Approval of the Programme for Improving Quality in Personal Healthcare Services (*Dėl asmens sveikatos priežiūros paslaugų kokybės gerinimo programos patvirtinimo*). 15 November 2017. No V-1292. URL: <https://e-seimas.lrs.lt/portal/legalAct/lt/TAD/3ca52110caac11e782d4fd2c44cc67af/asr>.

⁵³ BNS (2022). Seimas Committee on Social Affairs and Labour in favour of more efficient administration of child maintenance benefits (*Seimo Socialinių reikalų ir darbo komitetas – už efektyvesnį vaikų išlaikymo išmokų administravimą*). 28 April 2022. URL: <https://sc.bns.lt/view/item/424743>.

⁵⁴ URL: <https://www.tv3.lt/naujiena/verslas/tele2-vadovas-petras-masiulis-apie-pripratima-prie-telefono-kartais-tai-taip-nervina-n1165343>

⁵⁵ URL: <https://qlik-public.socmin.lt/sense/app/3e5e3c84-e376-464f-b397-7b8a19c7e096/sheet/ba24c288-de75-4930-839d-6fb40d1489d8/state/analysis>

⁵⁶ URL: <https://www.esveikata.lt/duomenuSauga>

2015). For example, minor cyber incidents are recorded from time to time, in which patient data are disclosed.⁵⁷

2.1.3 Ongoing or planned reforms

In the sphere of social benefits, the EGAS, EDAS and SPIS information systems are constantly being developed and modernised. Beside the six branches in the scope of this report, there is a plan to create single digital case-management files for the recipients of social assistance by mid-2023.⁵⁸ This would allow the elimination of paperwork and physical documents as well as ensuring better co-ordination between social service providers.

In its National Recovery and Resilience Plan (RRF),⁵⁹ Lithuania's focus is on digital transformation, including further development of digital public services and information systems. For instance, investment in the "customer-oriented services" reform will focus on the development of contactless services and public administration processes, abandoning the still existing non-digital processes.

The procedure for improving access to effective healthcare for people with disabilities described in the action plan for reducing health inequalities 2014-2023 provides for investment in not only physical but also information measures to improve access to healthcare. Seeking to improve access to general and personalised information, Lithuania is implementing a number of EU structural assistance projects aimed at adapting not only the physical, but also the information, environment for people with disabilities in personal healthcare institutions. For instance, the share of people with special needs evaluating the adaptation of the physical and informational environment as good or very good in primary health institutions receiving EU structural support should be 60% at the end of 2023.⁶⁰ Seeking to ensure transparency of the conditions and rules for access to healthcare services, the country has been developing corruption-prevention programmes in healthcare since 2015, which are still ongoing in 2022. In 2020, a new sectoral programme for the prevention of corruption in the healthcare system for 2020-2022 was approved, with one of the planned tasks being to increase the publicity and openness of the activities of personal healthcare institutions.⁶¹

In order to ensure a transparent registration process for medical services, in July 2018 the MoH approved the procedure for registering patients for personal healthcare, which provides clarity on how patients are registered and on what they can expect.

2.2 Issues, debates and reforms related to simplification

2.2.1 Issues

Research publications (e.g. Matulionytė and Navickė, 2018), reports (e.g. NSMOT, 2021) and audits (e.g. National Audit Office of Lithuania 2019, 2021) persistently show that procedures and rules for accessing social assistance benefits in Lithuania are complicated.

⁵⁷ eHealth: System Gaps and Cyber Security, 2018. URL: https://sam.lrv.lt/uploads/sam/documents/files/Veiklos_sritys/E.%20sveikata/1%20priedas%20prie%20LP-289_eSveikatos%20sistemas%20spragos.pdf.

⁵⁸ Based on an interview with the representatives of MoSSL.

⁵⁹ URL: https://ec.europa.eu/info/business-economy-euro/recovery-coronavirus/recovery-and-resilience-facility/lithuanias-recovery-and-resilience-plan_en#:~:text=Lithuania's%20recovery%20and%20resilience%20plan%20supports%20the%20digital%20transition%20with,in%20rural%20and%20remote%20areas

⁶⁰ 2014–2020 m. ES fondų investicijų veiksmų programos 8 prioriteto 8.1.3 uždavinio įgyvendinimo priemonės nr. 08.1.3-cpva-v-607 „Sveikatos priežiūros paslaugų prieinamumo gerinimas neįgaliesiems“ projektas. [Project "Improving access to healthcare services for people with disabilities" to implement Measure No 08.1.3-cpva-v-607 of Specific Objective 8.1.3 under Priority Axis 8 of the Operational Programme for the European Union Funds' Investments in 2014-2020]:

https://www.esinvesticijos.lt/lt/patvirtintos_priemones/sveikatos-prieziuros-paslaugu-prieinamumo-gerinimas-neigaliesiems.

⁶¹ URL: <https://sam.lrv.lt/lt/korupcijos-prevencija/korupcijos-prevencijos-programos>

An assessment carried out by the MoSSL (2020) showed that the non-take-up of social assistance benefits was around 20% (as of 2016). This rate fluctuates and is higher during periods of economic expansion and lower during economic crises (when there is probably less stigma attached). The rate of non-take-up was higher among single people and single parents with children than among other family types (e.g. couples and couples with children). The new findings of a research project on the non-take-up of social assistance carried out by the Mykolas Riomeris University⁶² showed similar non-take-up rates.

2.2.2 Debates

At present, old-age pensions can be delivered at home to: recipients over the age of 80; the disabled or those in need of permanent care; those living in areas where it is not possible to access cash machines; and those who opted for home delivery before December 2009. Almost 240,000 people receive pensions and other benefits at home every month (i.e. more than a third of all old-age pensioners). Sodra pays for the delivery of pensions – it cost about €5.9 million in 2021.⁶³ During the 2020 pandemic, Sodra has made it easier for older people to apply for their pensions to be transferred to a bank account. The application can be submitted simply by calling Sodra at 1883. It is also possible to submit an application online. It is noted that the number of such requests has increased.⁶⁴ Nevertheless, there is an ongoing debate in the Seimas Committee on whether the number of pensions not transferred directly to bank accounts should be reduced, in order to simplify the payment process and reduce the associated costs.⁶⁵

2.2.3 Ongoing or planned reforms

Although not one of the six branches in the scope of this report, it is also interesting to note that, in its RRF plan, Lithuania is aiming at simplifying its social assistance system. The aim of the guaranteed minimum income protection reform project (*garantuota minimalių pajamų apsauga*) is to comprehensively assess the minimum income system in Lithuania, to identify directions for its improvement in order to reduce poverty, and to ensure more efficient use of funds. During the implementation of the reform, a study of the minimum income will be carried out, recommendations will be formed, an action plan for their implementation will be prepared, and draft amendments to the relevant legal acts will be adopted to enter into force in 2024. It is hoped that the above-mentioned project will substantially simplify the system of providing social support in Lithuania.

The SPIS system is being updated to make it more user-friendly and easier for residents to submit applications for financial social support or social services and to get a faster response about designated services. It is planned to modernise 13 digital services and to create 14 new and six pro-active digital services by mid-2023. It is estimated that this measure will save 20 minutes of time for the users of the service.⁶⁶

In order to transfer as much information as possible to the e-health system, the conditions are created in advance for patients to find all the information they need in one place (but obviously favouring those proficient in using IT). In March 2020, an EU structural assistance project was launched to improve the attractiveness and usability of e-health tools by ensuring their dissemination and usability (MoH, 2021).

⁶² URL: <https://www.mruni.eu/events/pinigines-socialines-paramos-nepaemimas-lietuvoje-priezasciu-ir-masto-identifikavimo-galimybes/>

⁶³ URL: <https://www.sodra.lt/lt/naujienos/sodra-pensijos-i-namus-bus-pristatomos-tokia-pat-tvarka-kaip-iki-siol>

⁶⁴ URL: <https://www.15min.lt/verslas/naujiena/finansai/pensijas-i-namus-gaunantiems-seniorams-svarbi-sodros-zinia-662-1296718?copied>

⁶⁵ URL: <https://www.lrt.lt/naujienos/verslas/4/1620154/seime-zadama-aiskintis-del-i-namus-nesiojamu-pensiju>

⁶⁶ URL: <https://socmin.lrv.lt/lt/naujienos/socialine-parama-salies-gyventojams-taps-labiau-prieinama>

2.3 Suggestions for improvements

It would be useful to have some national guidance framework for municipalities on how they need to provide information to their residents about all social protection benefits, considering that people seek help primarily in their immediate environment. Municipalities should at least provide links to national information channels.

The digital space is playing an increasingly important role in the life of modern society, but the level of digital literacy among individuals or social groups (especially socially vulnerable groups), as well as access to the internet, varies greatly. Therefore, in order to improve access to information, it is important to pay sufficient attention to such things as training and raising awareness of specific information systems, as well as ensuring the existence and quality of alternative information channels (information by telephone, direct contact). In the last few years, many institutions (including the MoH, MoSSL and NHIF) have established standards of service provision to the population, which govern the functioning and quality of these alternative information channels.⁶⁷

⁶⁷ See e.g.: <https://ndnt.lrv.lt/uploads/ndnt/documents/files/Klientu%20aptarnavimo%20standartas-VIE%C5%A0INIMUI.pdf>; <https://e-seimas.lrs.lt/portal/legalActPrint/lt?ifwid=2h7uv12kt&documentId=72e353f0561a11e98bc2ba0c0453c004&category=TAD>.

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