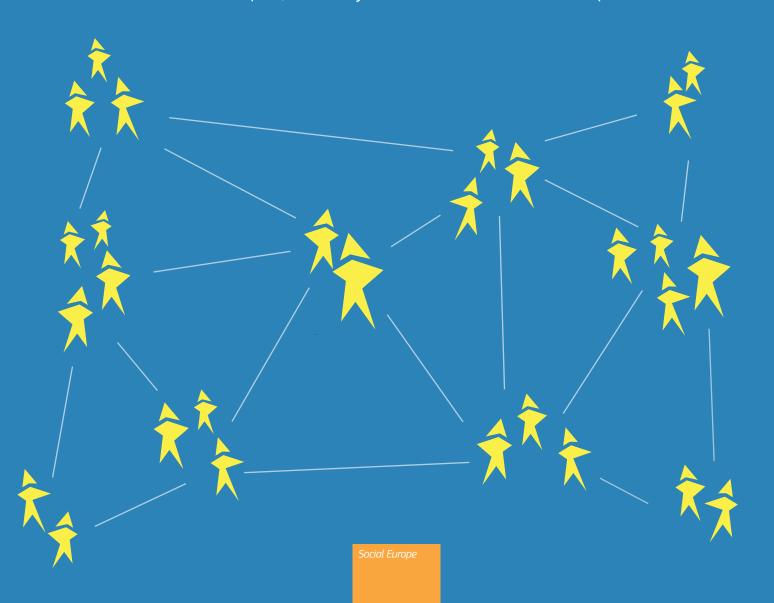


**EUROPEAN SOCIAL POLICY NETWORK (ESPN)** 

## Social protection for people with disabilities

## Slovenia

Nada Stropnik, Boris Majcen and Valentina Prevolnik Rupel



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### **European Social Policy Network (ESPN)**

# ESPN Thematic Report on Social protection for people with disabilities

**Slovenia** 

2022

Nada Stropnik, Boris Majcen and Valentina Prevolnik Rupel

The European Social Policy Network (ESPN) was established in July 2014 on the initiative of the European Commission to provide high-quality and timely independent information, advice, analysis and expertise on social policy issues in the European Union and neighbouring countries.

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#### **Summary**

This report analyses some important cash and in-kind social protection provisions available to adults with disabilities (i.e. aged 18 or over). There are other important provisions available to them in other areas not covered in this report. In line with Article 1 of the UN Convention on the Rights of Persons with Disabilities (CRPD), "people with disabilities" should be understood as "those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others".

Disability insurance provides various benefits that depend on a reduction in assessed work capacity, including the *Invalidska pokojnina* (disability pension) and the *Dodatek za pomoč in postrežbo* (assistance and attendance allowance). Slovenia does not have any statutory disability-specific old-age pension scheme besides the disability pension. After reaching retirement age, disability pensioners do not switch to the *Starostna pokojnina* (old-age pension) programme, as they have a permanent right to the disability pension. There is no disability-specific housing benefit either. Eligibility conditions for the *Denarno nadomestilo* (unemployment benefit) do not differ for people with or without disabilities. In the means test for *Denarna socialna pomoč* (cash social assistance), more income and assets are exempt in the case of people with disabilities, particularly if their work capacity has been permanently reduced – in which case they are also eligible for the means-tested *Varstveni dodatek* (income supplement).

People with sensory impairments needing medical devices and assistive technology in everyday life to overcome communication barriers, and so enable safe and independent living, are eligible for technical aids. Practically all people with permanent residence in Slovenia are eligible since they only need to be covered by health insurance.

An adult with a severe mental or physical disability who needs help with all basic necessities of life is eligible for a homecare assistant. Personal assistance has been available since 1 January 2019. Users of homecare assistants are not entitled to personal assistance. Personal assistance can be combined with home-based help under the Social Assistance Act. Municipalities are responsible for home-based help to families with a person with disabilities, which is usually provided for one hour per day or a few hours per week

Some major reforms implemented since 1 January 2017 have had a positive impact on the access of people with disabilities to social protection or the amount of disability benefits. In late 2021, the Long-term Care Act was adopted, which also amended the Social Inclusion of Disabled People Act (2018). The Personal Assistance Act (2017) was amended and considerably improved.

Important gaps in the social protection of people with disabilities include: a) disability insurance is linked with pension insurance; b) the system is more generous for occupational injuries and diseases than for non-occupational ones, despite the long standing under-identifying occupational diseases; c) the disability insurance system allows for preferential treatment of workers aged over 50; d) disability benefits are low, in stark contrast to much higher sickness benefits; and e) a benefit for home adaptations, particularly for low-income people, is needed.

The national debate does not take into account the complexity of the social insurance system, the disconnection between health (sickness) and disability insurance, and thus the need for greater co-operation and co-ordination between the most important actors – the Pension and Disability Insurance Institute, the Health Insurance Institute, the public Employment Service, and employers. Proposals on disability insurance in the white paper on pensions reform go in the right direction but are, unfortunately, too narrow. A holistic approach to the social protection system for people with disabilities is urgently needed to solve accumulated problems regarding the efficiency and adequacy of the current system. The Slovenian government is planning a new pension reform, which will also modify access to the social protection schemes for people with disabilities.

#### 1 Access to disability-specific income support<sup>1</sup>

The Slovenian disability insurance system provides various benefits that depend on an assessment of reduced work capacity: including the *Invalidska pokojnina* (disability pension) and the *Dodatek za pomoč in postrežbo* (assistance and attendance allowance). It is a contributory system, covering people with adequate insurance periods gained through employment or self-employment. Non-eligible people may join compulsory and disability insurance schemes on a voluntary basis (ZPIZ-2, 2012, Article 25). Social security contributions (24.35% of gross wages) are paid to the Pension and Disability Insurance Institute of Slovenia (PDIIS) and used to cover old-age, disability and survivors' insurance. The assistance and attendance allowance is also administered by the PDIIS.

Disability benefits within the framework of the disability assistance scheme are administered by local centres for social work (CSWs) in co-operation with the PDIIS and the University Institute of the Republic of Slovenia (SOČA). Guaranteed minimum income schemes and personal assistance are also administered by local CSWs.

The *Denarno nadomestilo* (unemployment benefit) is administered by local employment offices.

## 1.1 Disability-specific benefits/pensions available to working-age people

#### 1.1.1 Invalidska pokojnina (Disability pension)

#### a) Eligibility conditions (ZPIZ-2, 2012)

Disability-related qualifying criteria: Disability category I – loss of all capacity to engage in gainful employment or self-employment and no remaining capacity for work; category II – work capacity in own occupation reduced by 50% or more; category III – capacity to work on a full-time basis lost, but capable of working at a certain post on at least a half-time basis or work capacity in own occupation reduced by less than 50%; or able to continue working in own occupation on a full-time basis, but having lost the capacity to work at the assigned post. Preferential treatment of workers over 50 is reflected in their potential eligibility for the disability pension despite their remaining work capacity, or their possibility of regaining work capacity through vocational rehabilitation.

Age: No restriction for category I disability. People with a category II disability who are not capable of performing other full-time/half-time work without an occupational rehabilitation are entitled over age 55/50. People with a category II or III disability who are not provided with appropriate employment are entitled over age 65. See "Qualifying criteria" for disability categories.

Nationality and/or residence: Not applicable (disability insurance covers all insured people).

Waiting period: Rights under the disability insurance system are acquired from the day the disability occurs. The deadline for issuing a decision is four months from the day when all documentary evidence was completed. In practice, the process takes about

<sup>1</sup> For the sake of completeness, it should be mentioned that Slovenia has four Acts on disabilities resulting (also) from the 1991 war (War Veterans Act, War Disability Act, Victims of War Aggression Act and Special Rights of Victims in the War for Slovenia 1991 Act). These are not described in the present report because of the extremely low numbers of beneficiaries: there are currently only 49 people who are receiving a specific benefit as military war "invalids" of the 1991 war (communication to the author from the Ministry of Defence).

eight months on average. The claimant is expected to receive the first disability pension payment within one month of the decision being notified.

Contribution history: Not relevant if disability results from occupational injury/disease. If the disability results from a non-work injury or disease, the person must have been insured for at least one third of the period from age 20 to the occurrence of the disability. The required contribution history is shorter for younger people with disabilities: three months for those under 21 and one-quarter of full years of service for those aged 21-30.

Level of financial resources: None (i.e. the benefit is not means-tested).

Other: None.

Gaps/obstacles: The system is more indulgent and generous in respect of occupational injuries/diseases than non-occupational ones, as the accrual rate used for the disability pension is equal to that for 40 years of service. However, under-identification of occupational diseases is a long standing practice in Slovenia. For non-occupational diseases/injuries, eligibility for disability insurance depends on the contribution period, age and gender, which results in lower disability pensions. An additional disadvantage is that disability insurance is linked with pension insurance (for more information, see the paragraph on challenges below).

#### b) Disability assessment framework

Type of assessment: Assessment involving different approaches (medically based assessment of disability, and functional capacity assessment).

Responsible authorities: The PDIIS.

Method: The disability assessment process may be requested by the insured person (or their legal representative), a personal doctor or designated doctor, or the occupational medicine provider in agreement with the personal doctor. The proposal is submitted to the PDIIS together with documentary evidence. Applicants who are found to be unable to work for four hours per week for medical reasons do not have their work capacity quantified, and are directly categorised as having a full (category I) disability. All other applicants are assessed for their work capacity and are placed in disability categories II or III, as appropriate.

Supporting evidence: Complete medical and work documentation, employer's statement and a personal examination.

Assessor: Disability committee at the PDIIS, composed of at least two experts. An employer's representative has the right and duty to participate in the procedure.

Decision-maker: Disability committee at the PDIIS.

Critical analysis: Not documented.

#### c) Benefit entitlements

Level of the benefit: For disability caused by an occupational injury/disease – a percentage of the pension assessment base determined for 40 years of service (63.5% for both genders from 2023 on). For disability caused by non-work-related injuries or diseases – a percentage of the pension assessment base, depending on the number of completed years of service and the "added period".<sup>3</sup> For a person who acquires a disability before age 65, the minimum pension is 41% of the pension assessment

<sup>&</sup>lt;sup>2</sup> Disability insurance covers people in most forms of employment or self-employment, student work and farmers. Non-eligible people may join compulsory disability insurance schemes on a voluntary basis.

<sup>&</sup>lt;sup>3</sup> The added period is a fictitious pension period, which is considered when assessing rights if an insured person has not reached the age of 65 on the day the disability occurs.

base. For a person who acquires a disability after reaching 65, the pension cannot be lower than the *Starostna pokojnina* (old-age pension) for 15 years of insurance.

Duration of the benefit: As long as the state of disability, on the basis of which the right was acquired, lasts (except in the case of loss or restriction of the right).

Interactions with other income or other income-related benefits: Disability pension beneficiaries are also eligible for the *Invalidnina za telesno okvaro* (disability allowance) (see Section 1.1.4). A person who, due to disability, needs assistance and care by another person for the basic necessities of life, has, in addition to the right to disability benefits, the right to the assistance and attendance allowance (see Section 1.1.5). Beneficiaries of the disability pension lose their right to it if they start gaining income from work covered by compulsory insurance. An exemption is provided for: 1) people with a category II disability who are over 55; and 2) people with a category II or III disability performing non-standard work that matches their remaining work capacity.<sup>4</sup>

Challenges: As disability insurance is linked with pension insurance, the tightening of eligibility conditions brought about by the 2000 and 2012 pension reforms has resulted in a fall in the value of disability pensions relative to net earnings (by around 13%, from 50.6% to 44.0%, over 2011-2020; PDIIS, 2022a). The reasons can be found in a gradual increase in the number of best consecutive years for the calculation of the pension assessment base (from the best 10 to the best 24 years), and a sharp increase in the share of new disability pensioners whose pension has been calculated from the minimum pension assessment base (from 43.8% to 65.7% for men, and from 60.3% to 71.6% for women, over the period 2013-2020; PDIIS, 2020). Lower average new disability pensions – 72.5% of average old-age pensions for pensioners who retired in 2020 (PDIIS, 2020) – are the result of a very low recognition rate of occupational injuries or diseases, <sup>5</sup> and high proportions of disability pensions calculated from the minimum pension assessment base. <sup>6</sup>

#### 1.1.2 Nadomestilo za invalidnost (Disability benefit) - insurance-based

#### a) Eligibility conditions (ZPIZ-2, 2012)

Disability-related qualifying criteria: Insured people with remaining work capacity who cannot work at their current post but could work at another post, or were not in employment when the disability occurred, or have involuntarily or voluntarily lost their job. In addition they must: a) have a recognised right to another post (*pravica do premestitve*) after the completion of vocational rehabilitation; or b) have a category II disability that occurred after age 55; or c) have a category III disability, if their work capacity for their occupation is reduced by less than 50% or they can work in their occupation full-time but are not able to work at their current post, *provided* (in the case of a-c):

- they were not employed or compulsorily insured at the time the disability occurred;
- their employment was terminated on the basis of a positive opinion of the committee for determining the grounds for termination of their employment contract, or independently of their will or fault;

<sup>4</sup> By law, the PDIIS may at any time invite the beneficiary of a disability pension to a check-up, at which the state of their disability is re-established (MLFSAEO, 2022).

<sup>&</sup>lt;sup>5</sup> From 1 January 2003 on, occupational injuries or diseases accounted for only 3.3% of all causes for classifying insured people into the three disability categories (PDIIS, 2020). This low share reduces the years of pensionable service through the introduction of the added period.

<sup>&</sup>lt;sup>6</sup> The difference is much lower (86.7%) if we compare average disability and old-age pensions for newly retired people, while excluding pensions calculated from the minimum or maximum pension assessment base (PDIIS, 2020).

• they terminated their employment through their own will or fault; or

they took up another job.

Age: Over 55 if category II disability; 7 no age condition if category III disability.

Nationality and/or residence: Not applicable (disability insurance covers all insured people).

Waiting period: See Section 1.1.1.

Contributory history: None (i.e. no minimum contributory record is required).

Level of financial resources: None (i.e. the benefit is not means-tested).

Other: None.

Gaps/obstacles: As the *Nadomestilo za invalidnost* (disability benefit) is linked to the disability pension, which is linked to pension insurance, the worsening of eligibility conditions due to the pension reforms has also resulted in lower disability benefits.

#### b) Disability assessment framework

Type of assessment: Assessment involving different approaches (medically based assessment of disability, and functional capacity assessment).

Responsible authorities: The PDIIS.

Method: See Section 1.1.1.

Supporting evidence: Complete medical and work documentation and a personal

examination.

Assessor: See Section 1.1.1.

Decision-maker: The disability committee at the PDIIS.

Critical analysis: Not documented.

#### c) Benefit entitlements

Level of the benefit: 1) 80% or 60% of the disability pension (if the beneficiary was not employed or had not involuntarily lost their job; depending on the residual work capacity and age); 2) 40% or 25% of the disability pension (if the beneficiary has voluntarily terminated their employment); or 3) 20% or 35% of the disability pension (if the beneficiary has taken up another job).

The basis for the disability benefit assessment cannot be less than 63.5% of the lowest pension assessment base, or  $\le$ 563.86 per month in November 2021 (PDIIS, 2021). For people not covered by compulsory insurance, disability benefits cannot be less than the lowest pension, or  $\le$ 260.61 per month in November 2021 (PDIIS, 2021).

Duration of the benefit: As long as the state of disability on the basis of which the right was acquired lasts (except in the case of loss or restriction of the right).

Interactions with other income or other income-related benefits: 1) Disability benefit beneficiaries are also eligible for the disability allowance (see Section 1.1.4); and 2) disability benefits are assessed relative to the disability pension.

Challenges: As disability insurance is linked with pension insurance, stricter eligibility conditions brought in by the 2000 and 2012 pension reforms also resulted in lower disability benefits (compared with net earnings).<sup>8</sup> In the first 11 months of 2021, the

<sup>&</sup>lt;sup>7</sup> People with a category II disability that occurred before age 55 have the right to vocational rehabilitation, and can then obtain a disability benefit if they acquire the right to another post.

 $<sup>^8</sup>$  The disability benefit was 22.7% of the average net salary in 2013 and 20% in 2020, a fall of 12% (PDIIS, 2020).

average disability benefit was 38.5% of the average disability pension, suggesting a high number of voluntarily unemployed claimants, or lower salaries of disability benefit recipients compared with disability pension recipients (PDIIS, 2021).

#### 1.1.3 Delno nadomestilo (Partial benefit)

#### a) Eligibility conditions

Disability-related qualifying criteria: An insured person with a recognised right to work part time (at least four hours a day or 20 hours a week).

Age: None (i.e. there are no age requirements to access this benefit).

Nationality and/or residence: Not applicable (disability insurance covers all insured people.)

Waiting period: See Section 1.1.1.

Contributory history: None (i.e. no minimum contributory record is required).

Level of financial resources: None (i.e. the benefit is not means-tested).

Other: None.

Gaps/obstacles: As the *Delno nadomestilo* (partial benefit) is linked to the disability pension, which is linked to pension insurance, the worsening of eligibility conditions due to the pension reforms has also resulted in lower partial benefits.

#### b) Disability assessment framework

Type of assessment: Assessment involving different approaches (medically based assessment of disability, and functional capacity assessment).

Responsible authorities: The PDIIS.

Method: See Section 1.1.1.

Supporting evidence: Complete medical and work documentation and a personal examination.

Assessor: See Section 1.1.1.

Decision-maker: The disability committee at the PDIIS.

Critical analysis: Not documented.

#### c) Benefit entitlements

Level of the benefit: Reduced as a proportion of the disability pension as working hours increase. People working 20 hours a week receive 50% of the disability pension, and those working 35 hours receive 12.5%. The partial benefit is increased by 30% if the person is no longer able to work at their current post and starts working at another post or starts working at another post after vocational rehabilitation (maximum 80% of disability pension on the day the disability occurred).

The partial benefit equals 80% of the disability pension that would have been due to the insured person on the day the disability occurred, if the employee involuntarily loses a job or was not employed or compulsorily insured (25% of invalidity pension if the insured person terminated their employment voluntarily). For the base for the assessment of partial benefit, see Section 1.1.2.

Duration of the benefit: See Section 1.1.2.

Interactions with other income or other income-related benefits: Eligibility for disability allowance.

Challenges: Partial benefits are assessed relative to the disability pension. As disability insurance is linked with pension insurance, worse eligibility conditions brought about by the 2000 and 2012 pension reforms reduced partial benefits relative to net

earnings.<sup>9</sup> The average partial benefit amounted to 60% of the average disability pension in the first 11 months of 2021 (PDIIS, 2021).

#### 1.1.4 Invalidnina za telesno okvaro (Disability allowance)

#### a) Eligibility conditions (ZPIZ-2, 2012)

Disability-related qualifying criteria: Loss of individual organs or parts of the body (or a major injury to, or major incapacitation of, them), which demands greater effort in satisfying people's vital necessities, irrespective of whether such a physical impairment causes disability or not. If the physical impairment occurs while a person is insured, they acquire the right to a cash benefit (disability allowance) subject to the same qualifying period that applies to the disability pension. The types and percentages of physical impairment giving a right to the disability allowance are determined by the minister responsible for labour, after considering the opinion of the minister responsible for health.

Age: None (i.e. there are no age requirements to access the allowance).

Nationality and/or residence: Not applicable (disability insurance covers all insured people.)

Waiting period: See Section 1.1.1.

Contributory history: Not relevant in the case of at least 30% physical impairment resulting from a work-related injury/disease, and in the case of a pension beneficiary. Claimants must have completed the qualifying period for the disability pension if the disability was caused by a non-work injury or illness resulting in at least 50% physical impairment, regardless of whether the physical impairment caused disability or not.

Level of financial resources: None (i.e. the allowance is not means-tested).

Other: None.

Gaps/obstacles: The Pension and Disability Insurance Act (ZPIZ-2, 2012) temporarily limited access to the disability allowance to cases of injury at work or occupational diseases (see explanation in Section 4.2).

#### b) Disability assessment framework

Type of assessment: Medically based assessment of disability.

Responsible authorities: The PDIIS.

Method: A list of physical impairments is the basis for deciding the right to the disability allowance. Based on the regulation on the kinds and degrees of physical impairments, a disability committee gives an expert opinion. On this basis, the PDIIS takes a decision.

Supporting evidence: Complete medical documentation and a personal examination.

Assessor: The disability committee at the PDIIS.

Decision-maker: The PDIIS.

Critical analysis: Not documented.

#### c) Benefit entitlements

Level of the benefit: Physical impairments are classified according to eight degrees of severity: from the first degree (100%) to the eighth (30%). The disability allowance is assessed according to the degree and cause of the physical impairment at the time of

 $<sup>^{9}</sup>$  An average partial benefit amounted to 32.3% of the average net salary in 2013 and 29.3% in 2020, which was a decrease of 9% (PDIIS, 2020).

its occurrence: a) for an impairment resulting from a work-related injury/disease, it is calculated as a certain percentage of the minimum pension for the full pension qualifying period (from 24% for the first degree to 10% for the eighth degree); and b) for an impairment caused by an injury/illness not related to work, it is 70% of the amount specified for a work-related impairment of the same degree. The monthly disability allowance for work-related injuries/diseases, after the adjustment as of 1 January 2019, ranges from €42.58 to €102.17, while for injuries not caused by work, recognised under ZPIZ-1 (1999) until 31 December 2012, it ranges from €29.80 to €71.52.

Duration of the benefit: See Section 1.1.2.

Interactions with other income or other income-related benefits: The disability allowance can be cumulated with any other right under the Pension and Disability Insurance Act (ZPIZ-2, 2012). Entitlement to the disability allowance is conditional on the same qualifying period as that for the disability pension.

Challenges: No evidence (reports, papers...) was identified on adequacy challenges related to this benefit.

## 1.1.5 Dodatek za pomoč in postrežbo (Assistance and attendance allowance)

#### a) Eligibility conditions

Disability-related qualifying criteria: Need for assistance by another person – to meet basic living needs (for pensioners); for blindness or vision impairment (for people who are economically active); for blindness (for economically inactive people); or for at least 70% physical disability (for people who are economically active).

Age: No age requirements.

Nationality and/or residence: Permanent residence in Slovenia or another  $EU/EEA^{10}$  country. The allowance is not paid if the beneficiary lives abroad permanently, even if their residence is in Slovenia. The allowance is not paid if the beneficiary spends more than six consecutive months in a hospital or other care institution.

Waiting period: The beneficiary is entitled to the allowance from the day the need arises, but it can be back-dated for the six months before the first day of the month in which the application was submitted. The allowance is paid to a blind person from the day after applying. The decision must generally be issued within four months of the application submission. The first payment is made within one month of the decision.

Contributory history: A person cannot qualify for this allowance if they have been insured for a narrower scope of entitlements for most of their insurance period or have retired under the Old-Age Insurance of Farmers Act (ZPIZ-2, 2012).

Level of financial resources: None (i.e. the benefit is not means-tested).

Other: Eligibility conditions also refer to the nature of the disability and a person's activity status. <sup>11</sup> The assistance and attendance allowance for war veterans is a special category (War Disability Act, 1995).

Gaps/obstacles: No evidence (reports, papers...) was identified on gaps/obstacles related to this benefit.

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<sup>&</sup>lt;sup>10</sup> European Economic Area.

<sup>&</sup>lt;sup>11</sup> Eligible people are: 1) pensioners who need assistance by another person to meet their basic living needs; 2) blind people or people with vision impairment who are employed or active in Slovenia; 3) blind people covered by health insurance of another person; and 4) people with at least 70% physical disability who are employed or economically active in Slovenia.

#### b) Disability assessment framework

Type of assessment: Assessment of care and support needs.

Responsible authorities: The PDIIS.

Method: A request for the benefit is submitted to the PDIIS by the person with disabilities, their carer or a family doctor. The criteria determining the level of the allowance are numerous, including independence in eating, dressing/undressing, taking shoes on and off, self-care, and mobility. An expert assessment of care or support needs is provided by at least two experts based on the complete medical and work documentation and a personal examination.

Supporting evidence: An expert assessment of care or support needs.

Assessor: The disability committee is made up of both physicians and non-medical experts. 12

Decision-maker: The PDIIS.

Critical analysis: Not documented.

#### c) Benefit entitlements

Level of the benefit: Differs according to the severity of disability. According to the Pension and Disability Insurance Act (ZPIZ-2, 2012), the assistance and attendance allowance is 76% of the minimum pension base for the most severely affected beneficiaries, 53% for people who need assistance from another person to perform all their basic activities of daily life, and 26.5% for people who need help from another person to perform most activities of daily life. Since 1 March 2022, the benefit has amounted to  $\le$ 451.27,  $\le$ 314.20 and  $\le$ 157.35 per month, respectively (Decision on the adjustment [...], 2022). The amounts are adjusted annually according to the consumer price index. Although there are around 30,000 recipients of the allowance, only around 1% receive the highest amount (Vida Project, 2022). The level of the allowance is higher for war veterans – at  $\le$ 565 to  $\le$ 1,414.11, depending on partial or complete war disability (War Disability Act, 1995).

Duration of the benefit: As long as the need lasts. The PDIIS may invite the beneficiary for a control check to re-establish the extent of their need for assistance and attendance. If they fail to attend a control check, the allowance will not be paid.

Interactions with other income or other income-related benefits: If a person receives the allowance under the provisions of the Pension and Disability Insurance Act (ZPIZ-2, 20212), they cannot be entitled to such a right under other regulations.

Challenges: According to the only independent research on the topic (Dremelj and Nagode, 2007), several patient organisations have suggested an increase in the level of the allowance. A bigger challenge is the eligibility criteria for those who were covered for a narrower scope of entitlements for most of their insurance period; or who retired under the 1972 Old-Age Insurance of Farmers Act, now regulated by ZPIZ-2 (2012)<sup>13</sup> (i.e. farmers and housewives).

## 1.1.6 Nadomestilo za invalidnost (Disability benefit) – disability assistance scheme

#### a) Eligibility conditions (Social Inclusion of Disabled People Act, 2018)

<sup>12</sup> The committee's operation is regulated by the rules on the organisation and method of operation of disability commissions and other expert bodies of the PDIIS (2013).

<sup>&</sup>lt;sup>13</sup> Also see <a href="https://www.zpiz.si/cms/content2019/1429">https://www.zpiz.si/cms/content2019/1429</a> (accessed 29 April 2020).

Disability-related qualifying criteria: 1) People with moderate, heavy or severe mental disability; 2) autistic people who have such a severe form of maladaptive behaviour that it prevents them from living independently and earning a living; 3) deaf-blind people with at least 50% hearing loss according to the Fowler test, and the first to the fifth category of blindness and vision impairment; 4) people with heavy to severe brain damage or impairment; and 5) people with the most severe level of physical impairment, who are not able to fully integrate into society and ensure their social security. The qualifying criteria should be fulfilled before age 18 or, if the person is in education, before age 26 at the latest. Exceptions are people fulfilling criteria 2-4: a) their disability may occur later as well, but before their first employment; and b) they are eligible if they have not acquired any insurance-based rights.

Age: 18 and over.

Nationality and/or residence: Citizenship of the Republic of Slovenia. For foreigners: permanent residence in Slovenia or permanent residence permit.<sup>14</sup>

Waiting period: None (i.e. it is granted from the moment the disability is certified). A person with disabilities acquires the right to the *Nadomestilo za invalidnost* (disability benefit) on reaching 18. For persons with autistic disorders who cannot live independently and earn a living, deaf-blind persons with at least 50% hearing loss and category 1-5 blindness and low vision, and persons with moderate to severe brain injury or impairment, the right to the disability benefit starts from the first day of the month following the recognition of disability status under the Social Inclusion of Disabled People Act.

Contributory history: None (i.e. no minimum contributory record is required).

Level of financial resources: None (i.e. the benefit is not means-tested).

Other: Disability status, obtained in accordance with the Social Inclusion of Disabled People Act (2018).

Gaps/obstacles: No evidence (reports, papers...) was identified on gaps/obstacles related to this benefit.

#### b) Disability assessment framework

Type of assessment: Assessments involving different approaches (medically based assessments of disability, and functional capacity assessment).

Responsible authorities: The PDIIS (if the assessment was not performed before the person reaches 18).

Method: Expert opinion, based on medical and other documentary evidence and personal examination (PDIIS, 2022b).

Supporting evidence: Medical notes and medical examinations.

Assessor: The disability committee of the PDIIS (if the assessment was not performed before the person reached 18), consisting of medical doctors (PDIIS, 2022b). If it is not evident from the decision/opinion that the person should be recognised as having disability status under the Social Inclusion of Disabled People Act (2018), the CSW gets an expert opinion from the SOČA.

Decision-maker: The CSW, based on: the latest official guidance on children with special needs; the decision of CSW on the recognised right to childcare allowance (dodatek za nego otroka); the opinion of the disability committee of the PDIIS; or an expert opinion of the SOČA.

Critical analysis: Not documented.

<sup>&</sup>lt;sup>14</sup> These conditions apply to EU and non-EU nationals as well as to people with refugee status.

#### c) Benefit entitlements

Level of the benefit: The scheme provides for the sum of *denarna socialna pomoč* (cash social assistance – CSA) and the *varstveni dodatek* (income supplement) for the only adult in the family. If the person with disabilities starts working, the benefit is paid in the amount of the difference between the salary received and the net minimum wage. When the employment is terminated for any reason, the person with disabilities is again entitled to full compensation.

Duration of the benefit: Permanent.

Interactions with other income or other income-related benefits: A person who, due to disability, needs assistance and care by another person for the basic necessities of life, has, in addition to the right to disability benefits, the right to the assistance and attendance allowance (see Section 1.1.5). A recipient of disability benefits who acquires the right to a *družinska pokojnina* (survivor's pension) under the Pension and Disability Insurance Act (ZPIZ-2, 2012), or the right to the *družinska invalidnina* (survivor's disability allowance) under the War Disability Act (1995), is entitled to a partial disability benefit when the survivor's pension or survivor's disability benefit is lower than the disability benefit. The partial benefit amounts to the difference between the two.

Challenges: No evidence (reports, papers...) was identified on adequacy challenges related to this benefit.

#### 1.2 Disability-specific old-age pension schemes

Slovenia does not have any statutory disability-specific old-age pension scheme besides the disability pension. After reaching the retirement age, disability pensioners do not switch to the old-age pension programme, as they have a permanent right to the disability pension. The disability insurance system treats insured people over 50 preferentially, which is reflected in their potential eligibility for the disability pension despite their remaining work capacity, or their possibility of regaining work capacity through vocational rehabilitation (ZPIZ-2, 2012).

## 1.3 Income support aimed at covering disability-related healthcare and housing expenses

#### 1.3.1 Healthcare

1.3.1.1 Plačilo prispevka za obvezno zdravstveno zavarovanje za osebe, ki so uživalci invalidnin po predpisih o vojaških invalidih in civilnih invalidih vojne (Payment of compulsory health insurance contributions for recipients of disability allowances under regulations on war disability and victims of war aggression)

#### a) Brief description

The Republic of Slovenia pays the compulsory health insurance contributions of war invalids and civilian victims of war from the central government budget. Additionally, co-payments for emergency care are covered for people who need the assistance of another person to meet their basic living needs: people with at least 70% physical disability who are economically active in Slovenia; all people over 75; and people with mental or physical disabilities. Co-payments are intended to ensure full coverage for the following services (in case of emergency care):

- transplants and other acute surgical procedures;
- treatments abroad;

- intensive care services, radiotherapy, dialysis and other urgent care demanding diagnostic, therapeutic and rehabilitation services;
- services connected to fertility treatments, sterilisation or abortions;
- out-patient specialist services, hospital treatment and spa services following hospitalisation (not applicable to injuries outside work);
- non-medical services in the hospital and spa if they are a part of continued hospitalisation (not applicable to injuries outside work);
- all primary care treatments, and treatment of dental and mouth diseases;
- · medical devices; and
- medicines on the positive<sup>15</sup> list (Health Care and Health Insurance Act, 1992).<sup>16</sup>

#### b) Main gaps/obstacles

No evidence (reports, papers...) was identified on gaps/obstacles related to this benefit.

#### c) Main adequacy challenges

No evidence (reports, papers...) was identified on adequacy challenges related to this benefit. The probable reason is that the eligible people have the benefits fully covered from the central government budget.

#### 1.3.2 Housing

#### a) Brief description

There is no disability-specific housing benefit.

#### b) Main gaps/obstacles

An in-kind benefit or a cash allowance for home adaptations is needed, particularly for low-income people with disabilities. In the absence of such a benefit, the collection of voluntary contributions is occasionally organised in order to meet the particular housing adaptation needs of people with disabilities (such as an elevator or ramp).

#### c) Main adequacy challenges

None, since there is no benefit.

#### 2 Access to some key general social protection cash benefits

#### 2.1 Old-age benefits

#### 2.1.1 Starostna pokojnina (Old-age pension)

#### a) Eligibility conditions

There are no differences in eligibility conditions for people with disabilities compared with people without disabilities.

#### b) Additional amount/compensation included and adequacy issues

There may be additional amounts/compensation for people with disabilities as compared with people without disabilities – namely the disability allowance and the

 $<sup>^{15}</sup>$  The positive list contains medicines that are 100% or 70% financed by compulsory health insurance.

<sup>&</sup>lt;sup>16</sup> Available at: http://pisrs.si/Pis.web/pregledPredpisa?id=ZAKO213 (accessed 26 January 2022).

assistance and attendance allowance (for more information, see Sections 1.1.4 and 1.1.5).

#### c) Gaps/obstacles

1) The contributory history required is the same for all people, but difficult to fulfil for people with disabilities. 2) Due to lower income (because of job changes, part-time work due to disability, or partial benefit) and thus a lower pension base, the old-age pension of people with disabilities is likely to be lower than that of people without disabilities.

#### 2.2 Unemployment benefits

#### 2.2.1 Denarno nadomestilo (Unemployment benefit)

#### a) Eligibility conditions

There are no differences in eligibility conditions for people with disabilities compared with people without disabilities. Eligibility for the unemployment benefit ceases when complete work incapacity is established according to the regulations governing pension and disability insurance (Labour Market Regulation Act, 2010).

#### b) Additional amount/compensation included and adequacy issues

There is no additional amount/compensation included in the unemployment benefit for people with disabilities compared with those without disabilities.

#### c) Gaps/obstacles

No evidence (reports, papers...) was identified on gaps/obstacles related to this benefit.

## 2.3 Guaranteed minimum income schemes and other social assistance benefits

#### 2.3.1 Denarna socialna pomoč (Cash social assistance)

#### a) Eligibility conditions

For people aged 15-65 who are not able to work (i.e. who have fully lost work capacity according to the regulations governing pension and disability insurance, or who are unemployable according to the regulations governing vocational rehabilitation and employment of people with disabilities), eligibility for CSA is not conditional upon registering at the employment office and signing an individual action plan (Labour Market Regulation Act, 2010).

Permanent CSA is granted to people who are permanently unemployable or permanently unable to work and do not own any assets (as defined by the Exercise of Rights to Public Funds Act, 2010) or are in institutional care, and if their family members fulfil the same named criteria (Social Assistance Payments Act, 2010).

#### b) Additional amount/compensation included and adequacy issues

The weight applied to the basic amount of minimum income (BAMI) (resulting in the amount of minimum income) is 1 for the first adult or single person working less than 60 hours per month or an adult in institutional care (the minimum income was €402.18 per month in 2021). It is 0.76 for a single person who is permanently unemployable or whose work capacity has been permanently reduced, or who is older than 63 (women) or 65 (men), and who has registered as permanently or temporarily resident at the same address as people who are not their family members and have sufficient means of subsistence, or actually resides with them (€305.66 per month). Normally, the weight is 0.57 for each further adult working less than 60 hours per month (€229.24 per month), and CSA is not available to households not meeting the income criterion for eligibility.

#### c) Gaps/obstacles

No gaps or obstacles have been identified.

#### 2.3.2 Varstveni dodatek (Income supplement)<sup>17</sup>

#### a) Eligibility conditions

Eligible people are those who, subject to a means test, cannot be expected to improve their social situation by their own efforts: permanently unemployable people and people whose work capacity has been permanently reduced, non-employed women over 63 and men over 65 – unless in full-time institutional care. The general eligibility conditions for CSA apply; a person has to be a CSA beneficiary or fulfil the criteria for CSA. There is no age restriction for people who are permanently unemployable or whose work capacity has been permanently reduced. Income and assets are taken into account in the means test in the same way as for CSA. The income threshold for entitlement is higher than for CSA. People in full-time institutional care in a social welfare institution are not entitled to an income supplement. (Social Assistance Payments Act, 2010)

#### b) Additional amount/compensation included and adequacy issues

The income supplement is equal to 0.47 of the BAMI for a single person or the first adult in the family working less than 60 hours per month ( $\in$ 189.02 per month in 2021); 0.25 of the BAMI for every other adult (working less than 60 hours per month) in a family who fulfil the conditions ( $\in$ 100.55 per month in 2021); and 0.55 of the BAMI for a single person who is permanently unemployable, or whose work capacity has been permanently reduced, or who is non-employed and over 63 (women) or 65 (men), and who has permanent or temporary residence at the same address as people who are not family members and have their own sufficient means of subsistence, or who resides with them ( $\in$ 221.20 per month in 2021).

#### c) Gaps/obstacles

No gaps or obstacles have been identified.

 $^{17}$  The income supplement provides additional financial support to cover living costs over a longer period – other than those required to meet minimum needs in the short run (several months), which are supposed to be covered by CSA.

#### 3 Provision of assistive technology and personal assistance

#### 3.1 Assistive technology

People are eligible for technical aids if they have sensory impairments (i.e. blindness, visual impairment, deafness, hearing impairment and deaf-blindness) and need medical devices and assistive technology in everyday life to overcome communication barriers and enable safe and independent living. A person has to be covered by health insurance, which means that, in practice, all people with permanent residence in Slovenia are eligible. An opinion on the need for a technical device is given by an expert in the field. People with reduced mobility are entitled to the adaptation of a vehicle, enabling them to either drive or enter the vehicle and be safely driven (Rules on technical aids and adaptation of vehicles, 2014). <sup>18</sup>

An adult with a severe mental or physical impairment who needs help with all basic necessities of life is eligible for a homecare assistant (družinski pomočnik - a literal translation would be family assistant) as an alternative to full-time institutional care.<sup>19</sup> Eligible people can choose their homecare assistant, who provides help in the home environment. A homecare assistant may be either a family member who left the labour market or the register of unemployed people, or another person with the same permanent residence as the person with disabilities. The homecare assistant is entitled to a partial payment for lost income in the amount of 1.2 times the minimum wage (or a proportional part of it in case of part-time care) and the right to have all compulsory insurance contributions (health, pension, unemployment, parental) covered from the central government budget. The assistance and attendance allowance, to which a person with disabilities is still entitled, is (since the beginning of 2022) paid to the central government budget as the entitled person's contribution to covering the cost of a homecare assistant. The user and jointly liable people (except the homecare assistant) are obliged - following a means test - to pay (or contribute to the payment of) the rest of the cost of the homecare assistant. If a person with disabilities owns real estate other than their registered permanent residence, benefiting from a homecare assistant prohibits them from alienating and encumbering that estate.<sup>20</sup> Until the end of 2022, the right to a homecare assistant will be regulated by the Social Assistance Act (2007). From 1 January 2023 at the latest, new decisions will be issued based on the Long-term Care Act (2021), under which the person providing care is named a **family-member carer**.

#### 3.2 Personal assistance

The Personal Assistance Act (2017) has been applied since 1 January 2019. **Personal assistance** is defined as assistance in all those daily tasks and activities that the user cannot perform alone due to the type and degree of disability, but needs to perform in order to live independently, actively, and equally included in society. Personal assistance includes assistance with basic daily chores and communication, and escort/assistance at the workplace, educational process, and other activities. The user has a free choice over the personal assistance provider and the personal assistant.

The eligibility for personal assistance is not means-tested. A person is entitled to personal assistance if:

<sup>18</sup> Available at: <a href="http://www.pisrs.si/Pis.web/pregledPredpisa?id=PRAV12201">http://www.pisrs.si/Pis.web/pregledPredpisa?id=PRAV12201</a> (accessed 4 February 2022).

<sup>&</sup>lt;sup>19</sup> The disability committee of the PDIIS decides on the right to choose a family assistant unless the person with disabilities was cared for by one of the parents who received partial payment for lost income according to the regulations on parental protection and family benefits.

<sup>&</sup>lt;sup>20</sup> If the user and jointly liable people are not able to pay for the care provided (meaning that it is paid for from the central government budget) but own real estate other than their registered permanent residence, the Republic of Slovenia is entitled to recover the care costs from the value of that estate.

- due to disability, they need help in performing activities related to independent personal and family life, and integration into the social environment, education and employment, for at least 30 hours a week;
- they are aged 18-65;<sup>21</sup>
- they have permanent residence in the Republic of Slovenia; and
- they live, or would like to live, in a separate or joint household outside full-time institutional care.

Exceptionally, a deaf, blind or deaf-blind person older than 65 who needs only assistance in communication and escort may be granted 30 hours of personal assistance per month. Instead of personal assistance, the user can choose a cash allowance (communication allowance) in the amount of the assistance and attendance allowance ( $\[ \le \]$ 157.35 per month in 2021;  $\[ \ge \]$ 22 MLFSAEO, 2021a).

An application is made to the competent CSW, which appoints a two-member expert committee  $^{23}$  and - based on its opinion - determines the number of hours of weekly/monthly personal assistance to be awarded  $^{24}$  or the amount of cash allowance (communication allowance). The co-ordinator at the CSW assists the user with their application, and monitors the implementation of personal assistance.

The user or their legal representative prepares an implementation plan (a written agreement on personal assistance services) together with the personal assistance provider. The implementation plan contains the definition of the type of tasks performed by the personal assistant, the selection of one or more personal assistants, the schedule of personal assistance, and the rights and obligations of the users, personal assistant(s) and contractor. The contractor sends the signed implementation plan to the locally competent CSW (MLFSAEO, 2021a).

Personal assistance can be combined with home-based help under the Social Assistance Act (2007).<sup>25</sup> In this case, the number of approved hours of personal assistance is reduced by the number of approved hours of home-based help.

A user receiving the assistance and attendance allowance, or other cash allowance for care and assistance by another person, co-finances personal assistance in the amount of half of those allowances. If a deaf, blind or deaf-blind person over 65, who needs only assistance in communication and escort, opts for the cash allowance (communication allowance) instead of personal assistance, and already receives the assistance and attendance allowance, the cash allowance amounts to the difference between the assistance and attendance allowance and the total cash allowance to which the person is entitled.

People in 24-hour institutional care and users of homecare assistants are not entitled to personal assistance (Personal Assistance Act, 2017).

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<sup>&</sup>lt;sup>21</sup> A person who exercised the right to personal assistance before reaching 65 may also be entitled to it after that age, subject to a reassessment. The age limit did not apply to people who were – before the entry into force of the Personal Assistance Act – users of personal assistance programmes implemented on the basis of tenders published by the Ministry of Labour, Family, Social Assistance and Equal Opportunities.

<sup>&</sup>lt;sup>22</sup> See Section 1.1.5.

<sup>&</sup>lt;sup>23</sup> Until the end of 2019, the Association of Centres for Social Work appointed the committees. They act within the framework of the Social Protection Institute of the Republic of Slovenia.

<sup>&</sup>lt;sup>24</sup> In May 2019, the average number of hours per week was 110.7. Around 18% of users received 24-hour assistance (168 hours per week). Almost all users received personal help and escort services, and a large proportion of users were also eligible for help with household and other daily tasks (Dremelj *et al.*, 2020).

<sup>&</sup>lt;sup>25</sup> Home-based help (*pomoč na domu*) is a type of help to a family in the case of disability, old age or other instances, where it can replace institutional care (Social Assistance Act, 2007). It includes social care (such as cleaning and help with daily chores) and is usually provided for one hour per day or a few hours per week (Zaviršek, 2016). Its provision is the responsibility of municipalities.

#### 4 National debates, reforms and recommendations

#### 4.1 National debates

The issue of access to disability insurance benefits, and in particular the low level of benefits, is a part of the national debate. In 2020, the average disability pension (€516 per month) was below the at-risk-of-poverty threshold (€739 per month).<sup>26</sup> Many disability pensioners received pensions that were lower than the BAMI (€402.18 per month)<sup>27</sup> (Dežman, 2020).<sup>28</sup> The reasons could be found in their short insurance periods and low earnings, and also in the long standing practice of under-identifying occupational disease<sup>29</sup> among insured people (Teršek, 2021). Unfortunately, the debate does not take into account the complexity of the social insurance system, the disconnection between health (sickness) insurance and disability insurance, and thus the need for greater cooperation and co-ordination between the most important actors – the PDIIS, the Health Insurance Institute of Slovenia, the public Employment Service, and employers.<sup>30</sup>

Slovenia adopted the Long-term Care Act in December 2021. Although long awaited, it was generally accepted without much enthusiasm. The Act postpones rather than solves the main problem that delayed its adoption for so long: how to ensure stable financing of long-term care (LTC). No proper financial assessments and projections are available. The estimate of the financial resources needed to finance LTC services is based on the current situation and does not include new solutions, new criteria or demographic changes. Neither the costs of services (as defined by the Act) per user, nor the number of users resulting from the Act, has been taken into account. The financing of the LTC system after 2025 (i.e. contribution rates and a contribution base for LTC insurance) remains unknown, raising doubts about the accessibility of LTC for the population. Besides financing, the Act also leaves some other significant issues to other legislation, such as preparation of the national programme on LTC, a quality-assurance system and a needs-assessment mechanism.

#### 4.2 Recent reforms and reforms currently in the pipeline

In late 2021, the Long-term Care Act was adopted – also amending the Social Inclusion of Disabled Persons Act (2018) – and the Personal Assistance Act (2017) was amended

<sup>&</sup>lt;sup>26</sup> In December 2019, 82% of pensioners received a disability pension lower than the at-risk-of-poverty threshold for 2020 (which was based on 2019 income) (PDIIS internal data).

 $<sup>^{27}</sup>$  This is the amount of cash social benefit for the first adult or a single person working less than 60 hours per month or an adult in institutional care.

 $<sup>^{28}</sup>$  In December 2019, 22.5% of pensioners received a disability pension lower than the BAMI (PDIIS internal data).

<sup>&</sup>lt;sup>29</sup> In the last 30 years in Slovenia, there has been a general failure to detect or prevent occupational diseases (except asbestosis, which falls under special legislation) (FinD-INFO, 2018). The reasons can be found in the system in which: a) work accidents and occupational diseases are covered by the general disability insurance; and b) if an occupational disease is suspected, the employer should refer the employee for additional diagnostics and verification of the occupational disease and pay for this procedure. In addition, the procedure is supposed to be carried out by a specialist with whom the employer has a contract for the provision of preventive healthcare for workers, which may prevent the medical doctor from working professionally and independently in diagnosing occupational diseases. The consequence of such legislation is that, annually, only about 30 cases of occupational disease have been approved, while, before the 1990 legislation revisions, there had been about 800. In April 2018, the Ministry of Health submitted the rules on occupational diseases for public discussion. These rules were supposed to, at least partially, regulate the detection and prevention of occupational diseases; but they have not been adopted. In May 2021, a group of 43 opposition members of parliament proposed an amendment to the Pension and Disability Insurance Act, which would enable the adoption of the rules and thus the establishment of a system for recognising occupational diseases (MMC RTV SLO, 2021). Unfortunately, the proposal was rejected and so this important challenge remains open. <sup>30</sup> Prof. Metoda Dodič Fikfak, Head of the Clinical Institute of Occupational Medicine, commented: "There are

<sup>&</sup>lt;sup>30</sup> Prof. Metoda Dodić Fikfak, Head of the Clinical Institute of Occupational Medicine, commented: "There are Chinese walls in the system between sick leave, disability and occupational rehabilitation. As if they were not related to each other" (Dežman, 2020).

and considerably improved. Some other reforms implemented since 1 January 2017 have also had a positive impact on access by people with disabilities to social protection or the amount of disability benefits.

The Act Amending the Pension and Disability Insurance Act  $(ZPIZ-2I, 2021)^{31}$  – in force since 1 May 2021 – shortened the period for gradually equalising the accrual rates for both genders. In 2022, the old-age pension for 40 years of pensionable service is 61.5% of the pension assessment base (men) and 63.5% (women). From 1 January 2023 onwards, the same accrual rate of 63.5% will apply to both men and women.

The ZPIZ-2I amendments set the lowest pension<sup>32</sup> at 29.5% of the minimum pension assessment base, which since 1 May 2021 has amounted to €279.56 per month. The lowest pension will be adjusted in the same way as pensions (and no longer annually determined for new beneficiaries). Additionally, a new amount of the guaranteed pension<sup>33</sup> was set: since 1 May 2021 it has amounted to €620 per month and will also be adjusted in the same way as pensions. The amendments also regulated the minimum amount of the **disability pension** acquired in accordance with the ZPIZ-2 (2012). In 2021 this was set at 41% of the minimum pension assessment base, and since 1 May 2021 it has amounted to €388.54 per month. The minimum amount of the disability pension will continue being adjusted in the same way as pensions.

The ZPIZ-2 (2012) temporarily<sup>34</sup> limited access to the **disability allowance** in cases of work-related injury/disease. In July 2021, amendments to the Act (ZPIZ-2J, 2021)<sup>35</sup> were adopted. Beneficiaries of the disability allowance now include those insured people whose physical impairment results from injury/illness not related to work. The amendments closed the legal gap until the adoption of the act on the protection of people with disabilities.<sup>36</sup> They eliminated discrimination between insured people with comparable needs that differ only according to the timing and cause of the disability. The disability allowance is crucial to ensuring the inclusion of people with disabilities in society.

The Recovery and Resilience Plan (GRS, 2021) contains the government's promise to the European Commission that the pension reform proposal will be drafted in the second half of 2023 – that is, during the next government's term. Some activities are already underway. Within the European Commission's Structural Reform Support Programme framework, the integrated design of the pension and disability insurance reform project – fully funded by the European Commission and implemented by the OECD – was launched in early 2020 with a January 2022 deadline. The OECD presented its conclusions and proposals regarding sickness, disability and pension reform at the beginning of 2022.

Before 1 January 2019, when the Personal Assistance Act (2017) started to be applied, **personal assistance** was not a legal right of people with disabilities. It was financed, organised and provided for about two decades through project-based activities of non-governmental and private organisations selected and funded through annual tenders published by the Ministry of Labour, Family, Social Affairs and Equal Opportunities (Petrič, Smolej Jež and Kobal Tomc, 2021).

<sup>&</sup>lt;sup>31</sup> Available at: <a href="http://www.pisrs.si/Pis.web/pregledPredpisa?id=ZAKO8225">http://www.pisrs.si/Pis.web/pregledPredpisa?id=ZAKO8225</a> (accessed 19 January 2022).

<sup>&</sup>lt;sup>32</sup> Paid to people with at least 15 years of the insurance period.

<sup>&</sup>lt;sup>33</sup> Guaranteed to people with at least a 40-year contribution period.

<sup>&</sup>lt;sup>34</sup> Until the adoption of regulations regulating procedures for determining the type and degree of physical injuries (see Section 4.2).

<sup>&</sup>lt;sup>35</sup> Available at: <a href="https://www.uradni-list.si/glasilo-uradni-list-rs/vsebina?urlurid=20212574">https://www.uradni-list.si/glasilo-uradni-list-rs/vsebina?urlurid=20212574</a> (accessed 15 January 2022).

<sup>&</sup>lt;sup>36</sup> On 30 October 2021, the Order on the Determination of Types and Level of Physical Impairments also came into force (MLFSAEO and MoH, 2021). The 1983 federal self-government agreement on the list of physical impairments had applied until then. The new list of physical impairments may determine a higher level of physical impairment for the same health condition, or determine new physical impairments, compared with the previous agreement.

The right to personal assistance considerably improved the users' quality of life. However, the implementation showed inconsistent solutions and a rather long list of shortcomings. The associations of people with disabilities, and political parties, therefore urged the adoption of amendments. In October 2021, the Act was amended to improve it and eliminate anomalies in its implementation (MLFSAEO, 2021b). The number of personal assistants who are family members is now limited to two full-time people.<sup>37</sup> The replacement of employed personal assistants (during their sick or annual leave or other absence) has been regulated.<sup>38</sup> The expert committee that assesses eligibility for personal assistance within the Social Protection Institute of the Republic of Slovenia has been professionalised, and the training of personal assistants, professional managers and co-ordinators of personal assistance has been regulated.<sup>39</sup> Since expert committees across the country had been applying the evaluation criteria in different ways to assess applicants' needs (Hočevar, 2021a, 2021b),<sup>40</sup> the amendments impose a re-evaluation of all decisions that approved the right to a personal assistant in the following three years (2022-2024).

Concerns were raised about the adequacy of personal assistance services for people with mental health disabilities, most of whom have a legal representative, in terms of managing and directing personal assistants. The question arose whether another form of service (escort, assistance) would be more meaningful and appropriate for people with mental health disabilities (Dremelj *et al.*, 2020).

According to a 2020 survey (Dremelj *et al.*, 2020), users were generally satisfied with the Personal Assistance Act and had no significant comments on its implementation. The survey showed that the Act had indeed made their lives better and more independent. The users also pointed out some difficulties in the implementation of the Act and made proposals. The replacement of personal assistants on sick or annual leave should be better regulated. Additional training of committee members and co-ordinators at the CSWs was needed. A key issue that both users and other stakeholders raised was a shortage of (appropriate) personal assistants (Dremelj *et al.*, 2020).

The demand for personal assistance has not been met either in terms of the number of assistants or the amount of assistance provided per day/week (Zaviršek, 2016). The Personal Assistance Act will enable independent living in the community for economically active adults with disabilities who have the most comprehensive needs (Smolej Jež and Trbanc, 2021).

The Social Inclusion of Disabled People Act (2018) started to be applied on 1 January 2019. Until the end of 2018, the Act on Social Care of People with Mental and Physical Impairments (1983) – partly amended by the Social Assistance Payments Act (2010) – regulated the **disability benefit** and the care and assistance allowance (named **assistance and attendance allowance** in the Social Inclusion of Disabled People Act widened the circle of people with disabilities eligible for benefits. It also increased the disability benefit

<sup>&</sup>lt;sup>37</sup> The goal of the law was to relieve the family. Instead, there were cases where several family members (mother, father, brother...) became personal assistants as self-employed people (also the person employed full-time can be self-employed for the additional 20% of full time). Quite a lot of abuse of the status of a personal assistant had been reported (Hočevar, 2021a; 2021c). Self-employed people can no longer be providers of personal assistance.

<sup>&</sup>lt;sup>38</sup> The lack of people who could replace a sick or exhausted family member as a personal assistant had been an important shortcoming (Hočevar, 2021a).

<sup>&</sup>lt;sup>39</sup> There was only three days of training for future committee members. No criteria for their professional adequacy, and no proficiency tests, were applied (Hočevar, 2021a).

<sup>&</sup>lt;sup>40</sup> They only participated in two days of training while mostly not having had any experience of personal assistance (Hočevar, 2021a, 2021b).

<sup>&</sup>lt;sup>41</sup> New beneficiaries are people with a severe autistic condition, deaf-blind people, and people with heavy to severe brain damage or impairment. Their inclusion was designed to solve the issue of young people who had

from €382.32 to €577.34 per month (MLFSAEO, 2018). The amount of care and assistance allowance differed for people needing assistance to meet all basic necessities of life (0.84 of the BAMI) and those needing assistance for meeting most of the basic necessities of life (0.56 of the BAMI) (Social Assistance Payments Act, 2010).<sup>42</sup>

The Act on the Payment of Unpaid Disability Benefits (2021) recognised the right to **disability benefits** for those who, during their regular schooling between the ages of 18 and 26, under the Act on Social Care of People with Mental and Physical Impairments, did not have this right recognised and acquired it only after schooling. The Act retroactively corrects the inconsistent practices of CSWs.

The Long-term Care Act, <sup>43</sup> adopted in December 2021, further expanded the right to personal assistance. It introduced a right to a **family-member carer**, who provides long-term services to a family member with the highest need for care in their home (categories 4 and 5 out of five care categories in total). A family-member carer must live at the same address as the person with disabilities. They will eventually replace homecare assistants (on 1 January 2023). Similarly, by 30 June 2024, when all LTC beneficiaries receive a decision on newly defined benefits (monetary or/and non-monetary), the **assistance and attendance allowance** (see Section 1.1.1) will be abolished.

The Long-term Care Act defines two new service groups: e-care services and services to strengthen and sustain independence. A user may receive e-care services worth up to  $\in$ 31 per month, and services to strengthen and maintain independence worth  $\in$ 348 to  $\in$ 696 per year. Services to strengthen and sustain independence are those that prevent disability and enable the person with disabilities to live a good-quality life in their own environment. They include services aimed at lessening the need for help or preventing a deterioration in a person's condition, psycho-social support services, post-diagnostic support services for people with dementia, and consulting services on the adaptation of the living environment.

With the adoption of the Long-term Care Act (2021), the rights of people with disabilities related to their need for assistance and attendance by another person to provide for the basic necessities of life are regulated in the same way and by a single act. Before, they were regulated by five different acts.

## 4.3 Good practice and recommendations on how to tackle gaps and obstacles

In this report, we analysed some important cash and in-kind social protection provisions available to adults with disabilities. The analysis revealed some important gaps in the social protection of people with disabilities.

The Slovenian government is planning a new pension reform that will also modify access to social protection schemes for people with disabilities. At this moment, it is not yet known which measures will finally be proposed. In the white paper on pensions (MLFSAEO, 2016) and the agreed "Starting points for the modernisation of the Pension and Disability Insurance System in the Republic of Slovenia" (GRS, 2017), the emphasis was placed on the new definition of disability, and vocational rehabilitation as a fundamental right. Reform proposals are going in the right direction but are unfortunately too narrow. A holistic approach to the social protection system for people with disabilities

experienced severe disability before their first employment and thus had no rights under the pension and disability insurance system (MLFSAEO, 2018).

<sup>&</sup>lt;sup>42</sup> The amounts were €103.02 and €206.03 per month. The Social Inclusion of Disabled People Act (2018) not only changed the name of the benefit to the assistance and attendance allowance, but also increased the amounts to €146.06 and €292.11 per month, respectively (MLFSAEO, 2018).

<sup>&</sup>lt;sup>43</sup> Available at: <a href="http://www.pisrs.si/Pis.web/preqledPredpisa?id=ZAKO76">http://www.pisrs.si/Pis.web/preqledPredpisa?id=ZAKO76</a> (accessed 27 January 2022).

is urgently needed to solve accumulated problems regarding the efficiency and adequacy of the current system. Recently, the OECD completed the technical support project funded by the Structural Reform Support Programme and implemented in co-operation with the DG REFORM. Regarding sickness and disability insurance reform in Slovenia, it recommended distinguishing more clearly between helping people back into their previous jobs and helping them return to the labour market. The work of different stakeholders at different times should be clearly linked to these two tasks. Incentives for all stakeholders should be aligned to ensure transitions between jobs and prevent exits from the labour market (OECD, 2021, pp. 3-4).

Appropriate training of personal assistants is needed to further increase user satisfaction with these services and their outcomes. New measures under the 2021 amendments to the Personal Assistance Act (2017) promise to improve the current situation.

In the area of housing, there is a need for an in-kind benefit or a cash allowance for home adaptations, particularly for low-income people with disabilities.

Data-collection mechanisms should be strengthened, ensuring that comprehensive, reliable and disaggregated data on disability and people with disabilities are collected, in line with Article 31 (statistics and data-collection) of the UN Convention on the Rights of Persons with Disabilities.<sup>44</sup>

<sup>44</sup> See <a href="https://www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities.html">https://www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities.html</a> (accessed 31 August 2022).

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