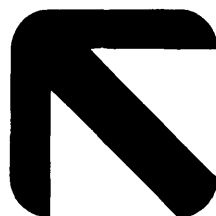
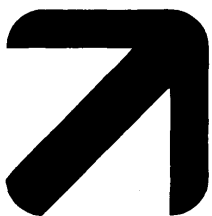
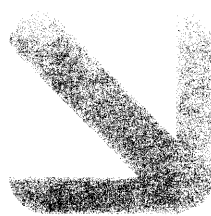
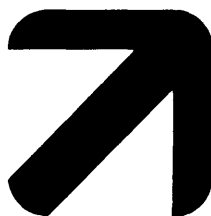


EUROPEAN COMMUNITIES

Social security for migrant workers



Temporary stay



Guide

**for persons staying temporarily in another
Member State of the European Communities
(on holiday, on business, or visiting relatives)**

**In your own interest
read this guide carefully**

NEW EDITION 1984

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This guide gives only general guidance.

It must not be treated as a complete and authoritative statement on the law in any particular case.

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Introduction

Regulations (EEC) Nos 1408/71 and 574/72, which were adopted by the Council of the European Communities pursuant to the Treaty establishing the European Economic Community, lay down the rights of migrant workers and of members of their families with respect to social security. Since 1 July 1982 the regulations also apply to self-employed persons.

These regulations entitle you and the members of your family to obtain benefits for sickness and maternity (medical treatment, drugs and medicines, dental treatment, hospital treatment, etc.) while you are staying temporarily (e.g. on holiday, or visiting relatives, or on a business trip) in a Member State of the European Communities other than the State in which you are insured.

This guide is intended to inform you of your rights and of the formalities you have to complete if you or members of your family are in urgent need of sickness or maternity benefits.

N.B. This guide does not concern people who go to a Community country specifically for medical treatment. For such cases there is a special procedure about which your sickness insurance institution can give you further information.

Part I

The Community regulations

1. The regulations of the European Communities apply to you if you are:

- (a) An employed or self-employed person or a pensioner who has previously worked as an employed or self-employed person and if you are a national of one of the Member States, a stateless person or a refugee (in some Member States, these regulations also apply to other classes of insured persons — non-employed, students, etc.). For further information, apply to the institutions listed in section 4 below;
- (b) A member of the family of such a person.

These regulations apply to you only if you reside in one of the Member States.

2. The Member States of the European Communities are:

Belgium, Denmark, the Federal Republic of Germany, France, Greece, Ireland, Italy, Luxembourg, the Netherlands and the United Kingdom of Great Britain and Northern Ireland (including Gibraltar).

3. You are entitled to the following benefits:

- (a) Urgent medical treatment for sickness or maternity provided by a general practitioner or specialist, drugs and medicines, dental treatment, hospital treatment, etc.⁽¹⁾
- (b) Cash benefits. If you think that you are entitled to such benefits, you should, within three days of falling ill, apply to the sickness and maternity insurance institution of the place where you are staying. That institution will give you any information

⁽¹⁾ Please note that the treatment you receive is that which the institution of the country where you are staying provides for persons insured with it, not the treatment to which you are entitled in your own country. Medical and hospital expenses incurred following road accidents are not, or only partly, covered by social security in certain countries.

you may need; the institutions of each Member State are listed in Part II of this guide.

4. Formalities you have to complete to obtain medical treatment or maternity care

Before you go to stay temporarily in a Member State other than the one in which you are insured, you should obtain Form E 111 from your sickness and maternity insurance institution, i.e. from:

- in Belgium* Mutualité/Mutualiteit (sickness fund) or regional office of the Caisse Auxiliaire d'Assurance Maladie-Invalidité/Hulpkas voor Ziekte- en Invaliditeitsverzekering (auxiliary fund for sickness and invalidity insurance);
- in Denmark* Kommunens social- og sundhedsforvaltning (social and health department of the commune), in Greenland: Kæmneren (local treasury department);
- in France* Caisse primaire d'assurance-maladie (local sickness insurance fund), for employed persons; institutions covered by an agreement with the regional mutual benefit funds, for self-employed persons;
- in Germany* sickness fund with which you are insured;
- in Greece* local office of the IKA;
- in Ireland* Health Board of your area;
- in Italy* Unità sanitaria locale (local health unit);
- in Luxembourg* Caisse de maladie (sickness fund);
- in the Netherlands* Ziekenfonds (sickness fund);

*in the United
Kingdom*

local offices of the Department of Health and Social Security in Great Britain, and of the Department of Health and Social Services in Northern Ireland. In Gibraltar, the Department of Labour and Social Security.

Form E 111 tells you for what length of time benefits are provided.

If you or a member of your family need medical treatment during your stay, you should present Form E 111 to the sickness and maternity insurance institution of the place where you are staying (see page 2 of the form). The other formalities you will have to complete are outlined in Part II of this guide, in separate sections for each Member State.

If you do not have Form E 111, the sickness and maternity insurance institution of the place where you are staying should apply for it on your behalf to the institution with which you are insured. In such a case, you risk having to pay the cost of treatment yourself, paying higher fees and getting a refund only after considerable delay.

Form E 111 is not required in some Member States. For further details, see the sections on the various Member States in Part II of this guide.

5. Special rules for certain categories of self-employed persons

If you are a self-employed person insured in Belgium, France or Greece there are special rules applicable while you are staying in another Community country, in particular as regards the scope of benefits.

Self-employed persons insured in Belgium:

In Belgium a special E 111 form is issued to self-employed persons. Only benefits in kind provided during a stay in hospital are paid for in the country of stay (these benefits are described in the various sections of Part II, under »Hospital treatment«); the cost of all other benefits may be refunded in Belgium on production of the bill for services received. If you are staying in Greece only benefits in kind provided for by Greek legislation applicable to self-employed persons will be provided during a stay in the hospital.

Self-employed persons insured in Greece:

If you go to Belgium or France you will receive the benefits in kind provided for by Belgian or French legislation applicable to self-employed persons.

Self-employed persons insured in France:

If you go to Belgium or Greece you will be entitled to the benefits in kind provided for by Belgian or Greek legislation applicable to self-employed persons.

If your position is one of those described above, you should, before your departure, ask your insurance body for exact details of the extent of your rights.

The institutions to which you should apply to obtain benefits are listed below:

in Belgium:

— one of the insurance bodies indicated below (Part II, concerning Belgium);

in France:

— Fédération Nationale de la Mutualité Française

56-60, rue Nationale

75649 Paris Cedex 13 (Telephone 584.11.55)

or

— Réunion des Assureurs Maladie

42, rue de Clichy

75421 Paris Cedex 09 (Telephone 526.71.69)

in Greece:

— local office of the IKA;

For all other cases, see the various sections of Part II.

Part II

How to obtain benefits in kind in each of the Member States of the European Communities

Belgium

1. Institutions of the place of stay which grant benefits in kind

Benefits in kind are granted by the following insurance bodies: the local sickness insurance funds (*mutualité/mutualiteit*) or the office in the region where you are staying of the auxiliary fund for sickness and invalidity insurance (*Caisse Auxiliaire d'Assurance Maladie-Invalidité/Hulpkas voor Ziekte- en Invaliditeitsverzekering*). You will find their address in the local telephone directory.

2. Medical treatment, drugs and medicines

You may go to any doctor for treatment and you should pay him the fee he charges. He will give you a certificate of treatment provided and, if necessary, also a medical prescription. Drugs and medicines will be supplied by a dispensing chemist whom you should ask for a receipt and a copy of the doctor's prescription.

If you require special medical services (technical examinations, X-rays, laboratory tests, surgery, etc.) you are advised first to go to the local insurance body in the place where you are staying which will explain to you where and how to obtain the services you require at the most favourable rates and, where appropriate, give you a certificate covering the cost of these services. However, in an emergency you may go to any establishment or practitioner providing treatment. In such cases you will have to pay the fees and ask for a receipt.

3. Reimbursement of expenses

You should give your insurance body the E 111 form and supporting documents showing expenses incurred (bill, certificate of services provided), after which it will pay you a refund of part of your expenses.

In Belgium, insured persons have to pay part of the cost of medical services themselves; the size of your share in the costs will depend on whether or not the practitioner or establishment that provided the services charged the official insurance fees.

As for medicaments, only officially listed patent drugs and medicines are refundable.

The share of the costs to be borne by insured persons is refunded, in full or in part, to disabled persons and to pensioners, widows and orphans if they satisfy certain conditions, in particular if their income is below a certain level. For further details, please apply to the insurance body of the place in which you are staying.

4. Hospital treatment

Before going into hospital, you should go to the sickness fund or regional office for information on how and where to obtain treatment at the most favourable rates.

If you have to go to hospital in an emergency and you cannot get in touch with the sickness fund or regional office beforehand, you should present Form E 111 to the administration of the hospital and ask them to apply to the sickness fund or regional office for a statement showing that they will cover the cost of the relevant services.

5. Self-employed persons insured in France or Greece

Please read the information in section 5 of Part I of this guide.

Denmark

Most general practitioners, specialists and dentists in Denmark work under an agreement with the public health service (offentlige sygesikring). The social and health department of your commune (kommunens social- og sundhedsforvaltning) will give you the names and addresses of doctors and dentists to whom you may apply for treatment.

1. General medical services

If you or a member of your family need medical treatment, you may go to any general practitioner in the public health service. You should hand the doctor Form E 111. You need not pay any fees.

If you or a member of your family need specialist treatment, you should be referred to a specialist by a general practitioner. You should pay the specialist's fee.

If you have had to pay medical fees, the social and health department of the commune will refund the amount you paid, on receipt of Form E 111 and the doctor's bill.

2. Dental treatment, drugs and medicines

If you or a member of your family need dental treatment, you may go to any dentist in the public health service. You should give Form E 111 to the dentist.

The health service contributes towards the cost of drugs and medicines that are prescribed by a doctor or dentist and appear on the special list of reimbursable medicaments. You should give Form E 111 to the dispensing chemist.

In general, for certain types of dental treatment and for drugs and medicines, the health service's contribution will be deducted from the amount charged to you by the dentist or the chemist. Where

this is not the case, you should present your receipt and Form E 111 to the local social and health department to obtain your reimbursement.

3. Hospital treatment — Transport

Hospital treatment is free of charge for you and members of your family. Admission to hospital is normally on referral by a doctor. When entering hospital you should submit Form E 111.

In emergencies transport to hospital by ambulance is free of charge.

Note: United Kingdom nationals do not need Form E 111; to obtain treatment, they should present their UK passport stamped with a temporary residence permit or accompanied by an embarkation card from a cruise ship.

Federal Republic of Germany

1. Medical and dental treatment, drugs and medicines

You or a member of your family should first of all present Form E 111 to the Ortskrankenkasse (local sickness fund) of the place where you are staying. There you will be given a Krankenschein (document showing entitlement to health services) and information on the general practitioners, specialists and dentists you may go to for treatment.

You should present the document showing your entitlement to health services to the general practitioner, specialist or dentist, who will then treat you free of charge. The insured person will, as a rule, have to pay DM 2.00 for each prescription and DM 4.00 for minor aids or appliances as well as for spectacles. If the cost of an item is less than these amounts, he will have to pay the actual cost.

If no E 111 form was presented to the local sickness fund before consulting the doctor, you may present this form to the doctor treating you. In such cases the doctor is entitled to request immediate payment for treatment provided on the basis of the scale of rates officially agreed with the sickness fund. The doctor refunds these fees if you forward the document showing your entitlement to health benefits within 10 days of first receiving treatment. However, if you are unable to pay the doctor's fees in advance, the doctor will be prepared to accept Form E 111 and to ask the local sickness fund for the document showing your entitlement to health services.

2. Hospital treatment

If you or a member of your family require hospital treatment, the local sickness fund, to which you have already presented or are about to present Form E 311, will, on presentation of a Notwendigkeitsbescheinigung (certificate from the doctor treating you showing that you need treatment in hospital), issue you with a Kostenübernahmeschein (certificate entitling you to hospital treatment in the public ward) which should be given to the hospital administration. Insured persons and members of the family over the age of 18 have to pay DM 5.00 for each day in hospital (maximum 14 days per calendar year).

In the event of an emergency admission to hospital — if it has not been possible to present Form E 111 to the sickness fund — you should give Form E 111 to the hospital administration and request them to apply to the local sickness fund for a statement showing that they will pay the bill.

3. Cost of transport

In general, the costs of any transport necessary to obtain health services are covered by insurance for trips (single) costing more than DM 5.00.

France

1. Medical and dental treatment, drugs and medicines

If you or a member of your family need treatment, you should first present Form E 111 to the nearest Caisse primaire d'assurance maladie (local sickness insurance fund); if this proves impossible, you should hand the form to the general practitioner or dentist and ask him for the sickness document known as the »feuille de soins«.

The doctor or dentist will, if necessary, give you a prescription and he will enter on the »feuille de soins« the amount of his fees, which you will have to pay to him.

If the doctor or dentist prescribes drugs or medicines, you should present the prescription and the »feuille de soins« to a chemist of your choice, who will enter the cost of drugs and medicines, which you will have to pay, on this document.

You should stick the labels from the packages of drugs and medicines onto the »feuille de soins«, which you should then present to your local sickness insurance fund together with Form E 111, the prescription and the »feuille de soins« to obtain a refund for your expenses.

You are advised to choose a doctor or dentist who has agreed to charge the official rates; in general, 75% of the fees paid will be refunded to you.

If you go for treatment to a doctor or dentist who has not agreed to charge the official rates, your refund will not be based on your actual expenses; instead, you will receive a fixed amount.

When a refund is payable on drugs and medicines, it usually amounts to 70%.

2. Hospital treatment

If you require hospital treatment, you should immediately inform the Caisse primaire d'assurance maladie of the place where you are

staying and let the administration of the public or private hospital bound by the official rates know that you are insured.

On presentation of Form E 111 the Caisse will, if you are entitled, pay all or a part of the costs (between 80% and 100%, as appropriate); in this case, there will be no need for you to pay the fees yourself.

If you have entered a private hospital not bound by the official rates, there will be no refund based on your actual expenses and you will have to pay all fees yourself.

For further information, please apply to the Caisse primaire d'assurance maladie of the place where you are staying.

3. Self-employed persons insured in Belgium or in Greece

Please read the information in section 5 of Part I of this guide.

Greece

1. Formalities

If you need medical services (benefits in kind) you should first go to the IKA office in the place where you are staying and give them Form E 111. On production of your passport or identity card the IKA office will issue you with a personal »health book« which will be valid for the same period as that indicated on your E 111 form.

This health book can, for as long as it is valid, be used at any local IKA office to receive the medical services available under Greek law.

2. General and special medical services

Whenever you go to a health centre or doctor for treatment or to a chemist for medicaments, you must present your health book.

You should use an IKA health centre or go to a doctor covered by an agreement with the IKA (the local IKA office will give you all the information you require). Services are normally provided free of charge on presentation of your health book. However, for additional examinations, dentures and further treatment you will be required to pay part of the cost.

Note: If you have been unable to complete the above formalities and you need immediate treatment in an emergency you may go to any doctor. In this case, you will have to pay the fee he charges. The IKA office in the place where you are staying will pay you back these expenses provided that you apply for this refund within three days of treatment.

3. Hospital treatment

If you need hospital treatment you should go to an IKA hospital or to a hospital covered by an agreement with the IKA. You should give the hospital a certificate of admission, obtained in advance from the local IKA office.

If you have not been able to obtain this certificate first, you should, in an emergency, inform the local IKA office within three days of your admission to hospital. If you have entered a private clinic or a hospital not covered by an agreement with the IKA, the appropriate refund will be paid to you by the local IKA office on presentation of the receipted hospital bill, up to the amount of the official rates; do not send applications for refunds by mail but go to the local IKA office yourself.

4. Seamen

If you are a seaman you should contact the insurance institution for seamen known as the »Oikos Nautou« which has its central office in Piraeus; you will find local offices of this institution in all major ports in Greece.

5. Self-employed persons insured in Belgium or France

Please read the information in section 5 of Part I of this guide.

Ireland

1. Medical treatment, drugs and medicines

If you or a member of your family need medical treatment you may go direct to a general practitioner who has an agreement with the Health Board, taking with you Form E 111 and making it clear that you wish to be treated under EEC regulations. Most general practitioners in Ireland are covered by such an agreement. Medical treatment is provided free of charge. Medicines prescribed by a doctor can be obtained at chemists without charge.

2. Hospital treatment

Admission to hospital is usually arranged by the doctor. In the event of an emergency admission, you should present Form E 111 to the hospital authorities. Hospital services provided in a public ward and outpatient treatment are free of charge.

3. Cash benefits

If you think that you are entitled to cash benefits, you should, within three days of falling ill, apply to the Department of Social Welfare, EEC Records Section, Gandon House, Amiens Street, Dublin 1.

Note: United Kingdom nationals do not need Form E 111. Instead, they should sign a statement indicating their nationality and their place of residence. This statement will usually be made at the place where the services are provided (normally at the general practitioner's surgery or in hospital).

Italy

1. Medical and dental treatment, drugs and medicines

If you or a member of your family need medical treatment you should present Form E 111 to the nearest local health unit (Unità sanitaria locale) which will give you the necessary documents to receive medical care and will provide you with all necessary information on how medical services can be obtained as well as the names of local doctors in the health service.

Doctors are available at fixed hours during the day (normally until noon on Saturdays). Should you need medical attendance during the night (between 8 p.m. and 8 a.m.), on a Saturday afternoon, or during a bank holiday, you may contact the service of doctors on duty («Guardia medica notturna e festiva») which exists in most cities and major towns; the local health unit in your area will give you the telephone number of this service.

For treatment by dentists and specialists you have to go to one of the health centres run by the local health unit of your area.

Medicines are supplied by chemists on presentation of the special prescription form which will be among the documents referred to above; this form should have been completed by the doctor treating you. For certain medicines patients have to pay part of the cost.

2. Hospital treatment

If you or a member of your family need treatment in hospital and you have already received the necessary documents from the local health unit showing your entitlement to treatment free of charge, you should go to a health service doctor who will write out a request for admission to hospital.

In an emergency you may go straight to the hospital admissions desk, presenting your E 111 form. If you have chosen a private hospital not covered by an agreement with the health service you will have to pay the costs yourself.

Luxembourg

A. Institutions of the place of stay that grant benefits

Benefits are provided by the national sickness insurance fund for manual workers (Caisse nationale d'assurance maladie des ouvriers) in the city of Luxembourg and by its branch offices in Bettembourg, Clervaux, Diekirch, Differdange, Dudelange, Echternach, Esch sur Alzette, Ettelbruck, Grevenmacher, Larochette, Mersch, Pétange, Redange sur Attert, Remich, Rumelange, Steinfort and Wiltz.

The Caisse or its local office nearest to the place where you are staying is responsible for providing the benefits.

B. Benefits — Formalities to be completed

1. Medical and dental treatment, drugs and medicines

When you or a member of your family need treatment, you should submit your Form E 111 to the nearest local office of the national sickness insurance fund for manual workers (Caisse nationale d'assurance maladie des ouvriers) after which that office will give you a certificate enabling you or members of your family to obtain

treatment at the rates charged to persons insured by the fund. You may present this certificate to any doctor, specialist or dentist. If you have not first applied to the fund, you should hand Form E 111 to the doctor, specialist or dentist. In that case, you should pay the fees charged by the practitioner you have consulted and the medicines prescribed by him; make sure you get a receipt for any such payment.

The fund's local office will pay you back your expenses up to the amount normally paid for those insured with it; however, you will have to pay part of the costs yourself.

2. Hospital treatment and transport of patients

If you or a member of your family must enter hospital, you should first (except in emergencies) obtain a medical certificate confirming that admission to hospital is necessary. You should give this certificate together with your E 111 form, if you have not already given it to the fund before, to the hospital administration which will then inform the sickness insurance fund. Stay in hospital in the third or second class (rooms with two beds) and treatment in hospital are free of charge except for a daily maintenance charge which you will have to pay directly to the hospital.

You will receive a refund of transport expenses on production of a certificate from the doctor treating you confirming that such transport was necessary.

The Netherlands

1. Medical and dental treatment, drugs and medicines

In the Netherlands practically all general practitioners and most dentists are connected with a sickness fund. You or a member of your family must present Form E 111 or a photocopy thereof when visiting a doctor or dentist at his surgery, if possible during the consulting hours for sickness fund patients. You need not get in touch with the sickness fund beforehand.

Treatment by a general practitioner is free of charge, but in some cases a part of the cost of dental treatment has to be paid, e.g. for emergency treatment during the weekend. Drugs and medicines are provided free of charge by dispensing chemists if prescribed by a Dutch general practitioner; you should present the prescription and Form E 111 to the chemist.

2. Specialist treatment

Specialist treatment for you or a member of your family can be provided only on referral by a Dutch general practitioner. You should, where possible, go to the specialist during the consulting hours for sickness fund patients.

The referral note from the general practitioner and Form E 111 should be presented to the specialist. As a rule, specialist treatment is free of charge.

3. Hospital treatment and transport of patients

If you or a member of your family must enter hospital, permission should first be obtained from the general sickness fund of the Netherlands (Algemeen Nederlands Onderling Ziekenfonds, ANOZ); address: Algemeen Nederlands Onderling Ziekenfonds, ANOZ, Kaap Hoordreef, 24-28, Utrecht.

The general practitioner or specialist usually asks for this permission on presentation to him of Form E 111. In an emergency permission may also be requested after admission to hospital.

The patient does not have to pay for treatment in the lowest hospital class.

The cost of transporting a patient may be refunded on presentation of Form E 111, the bill for the cost of transport, and a certificate from the doctor confirming that transport was necessary. You will have to pay part of the cost yourself.

4. Assistance for women in confinement

In the Netherlands women are entitled to free assistance from a midwife during childbirth in the place of stay. If there are no midwives locally, a general practitioner may be called in to help with the delivery.

Form E 111 should be presented to the midwife or the doctor.

United Kingdom

A. Great Britain and Northern Ireland

You will not need Form E 111 in order to obtain services provided under the National Health Service of Great Britain or the Health Service of Northern Ireland. However, as practitioners and hospitals providing Health Service treatment may also accept private patients, you should always ask that the services you wish to receive be provided within the framework of the National Health

Service, because otherwise you would have to pay the full cost of your treatment and no part of this cost is recoverable within the terms of the EEC social security regulations. Further information about Health Service treatment can be obtained from the Family Practitioner Committee (for medical and dental services) or the District Health Authority (for hospital services) in England and Wales, the Health Board in Scotland, and the Central Service Agency in Northern Ireland.

1. Medical treatment, drugs and medicines

If you or a member of your family need treatment you should go direct to a Health Service doctor and ask to be treated under the Health Service. You will not be charged for treatment. Medicines prescribed by a doctor are provided by any pharmacist on production of the doctor's prescription and the payment of a fixed amount per item prescribed, which is not recoverable.

2. Dental treatment

Dentists are not obliged to provide services under the Health Service and it is therefore necessary to make sure that the dentist is willing to provide Health Service treatment. Part of the cost of dental treatment must be paid for by the patient and is not recoverable.

3. Hospital treatment

Hospital treatment, where necessary, including consultations with a specialist, will usually be arranged by a doctor, but direct admission to hospital is possible in an emergency. You will not be charged unless you ask for special amenities or extra treatment that is not clinically necessary.

4. Cash benefits

For these benefits, you should apply to the local social security office, in Great Britain; in Northern Ireland, to the Department of Health and Social Services.

B. Gibraltar

1. Medical treatment, drugs and medicines

Medical treatment is available under the local medical scheme at the Medical Scheme Health Centre, Casemates, Gibraltar, if you present Form E 111. A small charge per item is made for medicines and for the doctor's transport expenses for home visits.

2. Dental treatment

You will have to pay the full cost of dental care but extractions are obtainable during normal working hours at the Casemates Health Centre on payment of a nominal fee.

3. Hospital treatment

Hospitalization in a public ward is free of charge. Further information can be obtained from the Casemates Health Centre.

Note: United Kingdom nationals do not need Form E 111; to obtain treatment, they need to present their British passport stamped with a temporary residence permit, or accompanied by an embarkation card from a cruise ship.

4. Cash benefits

If you think that you are entitled to cash benefits, you should, within three days of falling ill, apply to the Department of Labour and Social Security, Gibraltar.

E 111



(1)

CERTIFICATE OF ENTITLEMENT TO BENEFITS IN KIND DURING A STAY IN A MEMBER STATE

Reg. 1408/71: Art. 22.1.a.i; Art. 22.3; Art. 31.a
Reg. 574/72: Art. 20.4; Art. 21.1; Art. 23; Art. 31.1 and 3

- Employed person Pensioner (scheme for employed persons)
 Self-employed person Pensioner (scheme for self-employed persons)

(Surname, forenames, address (2))

1	
1.1	Insurance No Date of birth
1.2	<input type="checkbox"/> The person named above is covered by a scheme for self-employed persons as referred to in Annex 11 to Regulation 574/72

2	Members of the family (3)			
2.1	Surname	Forenames	Maiden name	Date of birth

2.2	Permanent address (2) (4)			
			

3 The abovenamed persons are entitled to benefits in kind under sickness and maternity insurance.
 These benefits may be provided

3.1 (5) from to

3.2 (5) for all cases of illness
 occurring up to inclusive
 for days weeks

4	Competent institution			
4.1	Name			
4.2	Address (2)			
4.3	Stamp			
		4.4	Date	
		4.5	Signature	

4.6 Valid from to	4.10 Valid from to
4.7 Stamp 4.8 Date	4.11 Stamp 4.12 Date
4.9 Signature	4.13 Signature

5	Competent French institution for non-occupational accidents sustained by self-employed farmers		
5.1	Name	.....
5.2	Address (?)	.....
		
5.3	Stamp		
		5.4	Date
		5.5	Signature
		

INSTRUCTIONS

Please complete this form in block letters, writing on the dotted lines only.

The competent institution or, where appropriate, the institution in the place of residence of the pensioner, should complete this form and send it to the person concerned, or send it to the institution in the place of stay if the form has been drawn up at the latter's request. This form is not required if the person concerned is staying in the United Kingdom.

Information for the insured person and the members of his family

(a) This document enables

- the worker and the members of his family named in box 2, who are staying temporarily in a Member State other than the competent State, and
- the pensioner and the members of his family named in box 2, who are staying temporarily in a Member State other than that in which they habitually reside,

to obtain benefits in kind from insurance bodies in the country of stay, in the case of sickness or maternity and, provisionally, in the case of an accident at work or occupational disease.

(b) When one of the persons concerned has to seek benefits, including hospitalization, he should submit this form to the insurance body in the country in which he is staying, i.e.:

in **Belgium**, the 'mutualité' (local sickness insurance fund) of his choice;

in **Denmark**, the competent 'amtskommune' (local administration). In the commune of Copenhagen, the 'magistrat' (municipal administration); in the commune of Frederiksberg, the 'kommunalbestyrelse' (municipal administration). Assistance from a doctor, dentist or dispensing chemist may be sought without first contacting the said institutions. This form must be submitted for each claim for benefits. Particulars about doctors and dentists available may be obtained from the local 'social- og sundhedsforvaltning' (social and health authority);

in **Germany**, the 'Allgemeine Ortskrankenkasse' (AOK, local general sickness fund);

in **Greece**, normally the regional or local branch of the Social Insurance Institute (IKA) which issues the person concerned with a 'health book' without which no benefits in kind can be provided; for mariners, the 'Seamen's Home' (Oikos Nautou);

in **France**, the 'Caisse primaire d'assurance-maladie' (local sickness insurance fund); the 'organisme conventionné' (customary body) where a cross or tick appears in box 1.2;

in **Ireland**, the Health Board in whose area the benefit is claimed;

in **Italy**, normally the 'Unità sanitaria locale' (USL, the local health administration unit) responsible for the area concerned; for mariners and for civilian aircrews, the 'Ministero della sanità, Ufficio di sanità marittima o aerea' (Ministry of Health, the navy or aviation health office responsible for the area in question);

in **Luxembourg**, the 'Caisse nationale d'assurance-maladie des ouvriers' (national sickness insurance fund for manual workers);

in the **Netherlands**, the 'Algemeen Nederlands Onderling Ziekenfonds' (ANOZ, general sickness fund of the Netherlands), Utrecht. Assistance from a doctor, dentist or dispensing chemist may be sought without first contacting ANOZ.

NOTES

(1) Symbol of the country to which the institution completing the form belongs: B = Belgium; DK = Denmark; D = Germany; GR = Greece; F = France; IRL = Ireland; I = Italy; L = Luxembourg; NL = the Netherlands; GB = the United Kingdom.

(2) Postal code, town, street, number, country.

(3) Include only those members of the family who are temporarily going to another Member State.

(4) Complete only if the address of the members of the family differs from that of the worker or pensioner.

(5) These two items are alternative. Give only that which is applicable and put a cross in the corresponding box.

SCHEME FOR SELF-EMPLOYED PERSONS

E 111

B

(1)

CERTIFICATE OF ENTITLEMENT TO BENEFITS IN KIND DURING A STAY IN A MEMBER STATE

Reg. 1408/71; Art. 22.1.a.i; Art. 22.3; Art. 31.a
Reg. 574/72; Art. 20.4; Art. 21.1; Art. 23; Art. 31.1 and 3

1	<input type="checkbox"/> Self-employed person <input type="checkbox"/> Pensioner	(Surname, forenames, address (2))
1.1	Insurance No	Date of birth

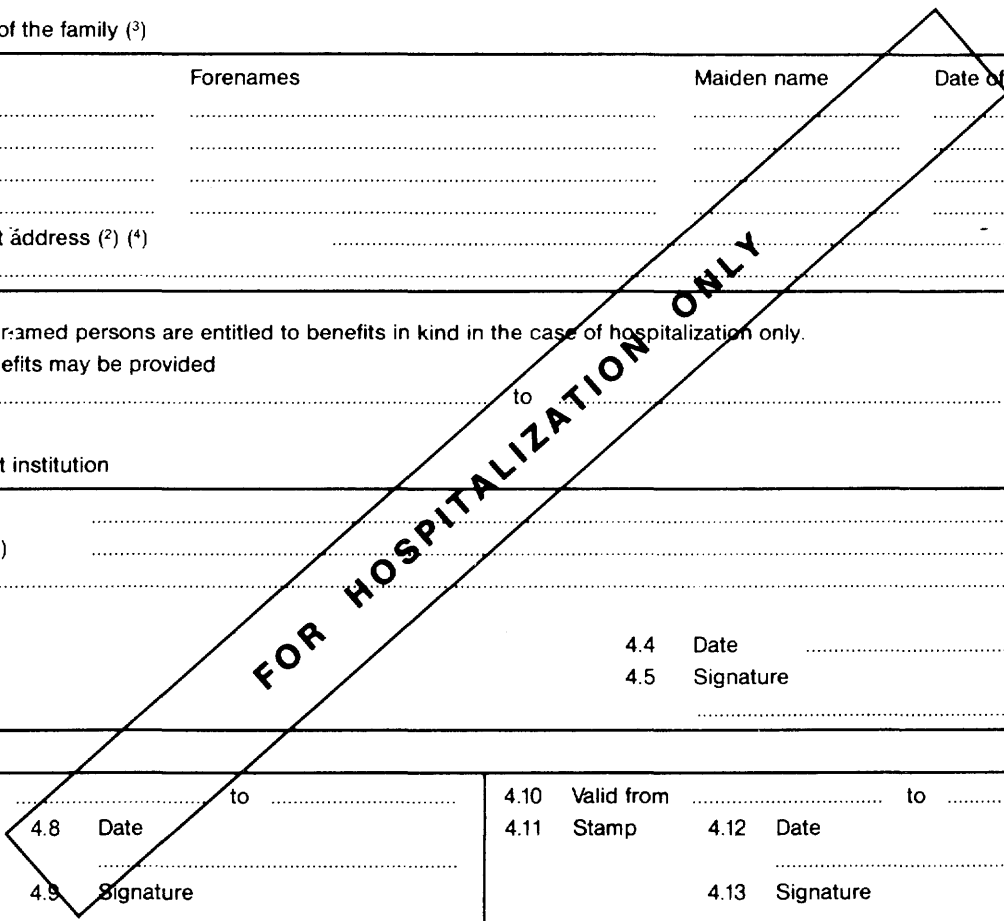
2	Members of the family (3)			
2.1	Surname	Forenames	Maiden name	Date of birth

2.2	Permanent address (2) (4)			
			

3 The above-named persons are entitled to benefits in kind in the case of hospitalization only.
These benefits may be provided

3.1 from to

4	Competent institution			
4.1	Name			
4.2	Address (2)			
4.3	Stamp			
		4.4	Date	
		4.5	Signature	



4.6	Valid from	to	4.10	Valid from	to
4.7	Stamp	4.8	Date	4.11	Stamp
	.....	.....	.....	4.12	Date
	.....	4.9	Signature	4.13	Signature

4.14	Valid from	to	4.18	Valid from	to
4.15	Stamp	4.16	Date	4.19	Stamp
	.....	.....	.....	4.20	Date
	.....	4.17	Signature	4.21	Signature

SCHEME FOR SELF-EMPLOYED PERSONS

INSTRUCTIONS

Please complete this form in block letters, writing on the dotted lines only.

The competent institution or, where appropriate, the institution in the place of residence of the pensioner, should complete this form and send it to the person concerned, or send it to the institution in the place of stay if the form has been drawn up at the latter's request. This form is not required if the person concerned is staying in the United Kingdom.

Information for the insured person and the members of his family

(a) This document enables

- the self-employed person and the members of his family named in box 2, who are staying temporarily in a Member State other than the competent State, and
 - the pensioner covered by the scheme for the self-employed and the members of his family named in box 2, who are staying temporarily in a Member State other than that in which they habitually reside,
- to obtain benefits in kind from insurance bodies in the country of stay only in the case of hospitalization.

(b) When one of the persons concerned has to enter hospital, he should submit this form to the insurance body in the country in which he is staying, i.e.:

- in **Denmark**, the competent 'amtskommune' (local administration). In the commune of Copenhagen, the 'magistrat' (municipal administration); in the commune of Frederiksberg, the 'kommunalbestyrelse' (municipal administration). This form must be submitted for each claim for benefits;
- in **Germany**, the 'Allgemeine Ortskrankenkasse' (AOK, local general sickness fund);
- in **Greece**, the regional or local branch of the Social Insurance Institute (IKA) which issues the person concerned with a 'health book' without which no benefits can be provided;
- in **France**, the 'organisme conventionné' (customary institution);
- in **Ireland**, the Health Board in whose area the benefit is claimed;
- in **Italy**, the 'Unità sanitaria locale' (USL, the local health administration unit) responsible for the area concerned;
- in **Luxembourg**, the 'Caisse nationale d'assurance-maladie des ouvriers' (national sickness insurance fund for manual workers);
- in the **Netherlands**, the 'Algemeen Nederlands Onderling Ziekenfonds' (ANOZ, general sickness fund of the Netherlands), Utrecht.

NOTES

- (1) Symbol of the country to which the institution completing the form belongs: B = Belgium.
- (2) Postal code, town, street, number, country.
- (3) Include only those members of the family who are temporarily going to another Member State.
- (4) Complete only if the address of the members of the family differs from that of the insured person or pensioner.

EUROPEAN COMMUNITIES

SOCIAL SECURITY FOR MIGRANT WORKERS

GUIDE ON TEMPORARY STAY

SUPPLEMENT

Following the accession of Spain and Portugal to the European Communities on 1 January 1986, the Guide on temporary stay should be supplemented with the following information concerning these two Member States.

A. How to obtain form E 111

Please apply :

IN SPAIN

to the Provincial Directorate (Dirección Provincial) or the Provincial Office (Agencia Local) of the National Institute of Social Security (Instituto Nacional de Seguridad Social);

IN PORTUGAL

- (i) on the mainland : to the Regional Centre of Social Security (Centro Regional de Segurança Social) with which you are registered; for pensioners or members of a pensioner's family : National Pensions Centre (Centro Nacional de Pensões) or, as delegated by it, to the Regional Centre of Social Security of the pensioner's or family member's place of residence;
- (ii) in the autonomous region of Madeira : to the Regional Directorate of Social Security (Direcção Régional de Segurança Social), Funchal;
- (iii) in the autonomous region of the Azores : to the Regional Directorate of Social Security (Direcção Régional de Segurança Social), Angra do Heroísmo.

B. How to obtain benefits in kind

IN SPAIN

1. Formalities you have to complete

If you are in need or expect to be in need of medical assistance, you should present form E 111 to the nearest Provincial Directorate (Dirección Provincial) or Local Office (Agencia Local) of the INSS (Instituto Nacional de la Seguridad Social -- National Institute of Social Security), the address of which you will find in the telephone directory.

On production of the form you will receive a booklet of treatment vouchers (talonario de volantes de Asistencia Sanitaria) for persons who are temporarily staying in Spain. This booklet will be issued in the name of the insured person and also lists the names of his dependants accompanying him.

These treatment vouchers also bear the name and address of the general practitioner and the pediatrician you have chosen from the list of recognized doctors.

On the last pages of the booklet holding the treatment vouchers you will find all the information you need to use the booklet.

2. Medical assistance -- General practitioners and specialists

If you or one of your dependants need to consult a doctor, you should present your book of treatment vouchers and give him one voucher for each consultation.

If you need to see a specialist, the general practitioner will give you a referral note for this purpose.

You will not have to make any payment either to the general practitioner or to the specialist.

Medicines will be dispensed to you by a pharmacy on production of the doctor's prescription. If you are a worker you will be charged a particular percentage of the cost of medicines. If you are a pensioner you will receive medicines free of charge.

Hospitalization

If the general practitioner or the specialist considers hospitalization necessary, he will give you a document enabling you to be admitted to one of the hospitals run by the social security scheme or one recognized by it.

In emergencies you may go directly to such a hospital without the need to present this document. In such cases it will be sufficient for you to produce form E 111 or your booklet of treatment vouchers.

Stay in hospital and medicines administered in hospital are free of charge.

IN PORTUGAL

1. Medical treatment -- Medicines

If you or a member of your family needs medical treatment, you should present form E 111 (if you are British you need only show your passport) to the Regional Health Administration (Administração Régional de Saúde) responsible for your place of temporary residence, which will tell you at which Health Centre (Centro de Saúde) you will receive the necessary treatment, which will be free apart from a small charge. Medicines prescribed by a doctor will be dispensed in any pharmacy on presentation of the prescription and on payment of a non-refundable fixed charge.

2. Hospitalization

As a general rule, admission to an official hospital will be arranged by the doctor at the Health Centre. Direct hospitalization in official hospitals is possible only in emergencies, in which case the person concerned should invoke his right to medical assistance recognized by the Community regulations, explaining that he holds an E 111 form and that he undertakes to have this form submitted by someone else to the Regional Health Administration (Administração Régional de Saúde) while he is hospitalized. He will not have to bear the cost of hospitalization unless he expresses the wish for more comfortable accommodation or for special care that is not strictly necessary from a clinical viewpoint.

Out-patient hospital consultations are free of charge.

3. Other urgent medical services

The same Health Centre (Centro de Saúde) or Regional health Administration (Administração Régional de Saúde) will supply you with information on where and how to obtain other services.

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