II

(Acts whose publication is not obligatory)

COMMISSION

ADMINISTRATIVE COMMISSION OF THE EUROPEAN COMMUNITIES ON SOCIAL SECURITY FOR MIGRANT WORKERS

DECISION No 114

of 7 July 1982

adapting model form E 111 for use in the Community enlarged by the accession of Greece and taking into account the extension of the social security Regulations to self-employed persons and their families

(82/576/EEC)

THE ADMINISTRATIVE COMMISSION OF THE EUROPEAN COMMUNITIES ON SOCIAL SECURITY FOR MIGRANT WORKERS,

Having regard to Article 81 (a) of Council Regulation (EEC) No 1408/71 of 14 June 1971 on the application of social security schemes to employed persons and their families moving within the Community, under which it is the duty of the Administrative Commission to deal with all administrative questions arising from Regulation (EEC) No 1408/71 and subsequent Regulations,

Having regard to Article 2 (1)of Council Regulation (EEC) No 574/72 of 21 March 1972 fixing the procedure for implementing Regulation (EEC) No 1408/71, under which it is the duty of the Administrative Commission to draw up models of certificates, certified statements, declarations, applications and other documents necessary for the application of the Regulations,

Having regard to Decision No 112 of 28 February 1980 laying down the simplified model forms necessary for the application of Council Regulation (EEC) No 1408/71 and Council Regulation (EEC) No 574/72,

Whereas the said model forms should be adapted for use in the Community enlarged by the accession of Greece;

Whereas it is appropriate to adapt these models also to take account of the extension of Regulations (EEC) No 1408/71 and (EEC) No 574/72 to self-employed persons and their families as from 1 July 1982;

Whereas, in particular, the conditions laid down in Annex VI to Regulation (EEC) No 1408/71 for the granting of sickness insurance benefits in kind to self-employed persons subject to Belgian legislation in the case of a stay in a Member State other than Belgium necessitate the drawing up of a special model form;

Whereas it is a matter of urgency,

HAS DECIDED AS FOLLOWS:

(a) Model form E 111, adopted by Decision No 112 shall, as from 1 July 1982, be replaced by model E 111 as printed below (Annex 1).

As far as employed persons are concerned, the institutions of Member States other than Greece, however, shall retain the right to use the model adopted by Decision No 112 as long as stocks last.

(b) Belgian institutions shall use the special E 111 model shown below (Annex 2) for insured persons covered by the scheme for self-employed persons.

The present Decision shall be published in the *Official Journal of the European Communities*.

The Chairman of the Administrative Commission

A. TRIER

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

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

Surname, forenames, address (2)

1.1 Insurance No ..... Date of birth .....

1.2 ☐ The person named above is covered by a scheme for self-employed persons as referred to in Annex 11 to Regulation (EEC) No 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 (2) .....
.....
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); this office should issue the person concerned with a health book* **without which no benefits in kind can be provided;** *for mariners, the 'Seamen's Home'.*

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' (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.

ANNEX 2

EUROPEAN COMMUNITIES
Social Security Regulations

See 'Instructions' overleaf

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 ☐ Self-employed person ☐ 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 abovenamed persons are entitled to benefits in kind in the case of hospitalization only.
These benefits may be provided

3.1 from ..... to .....

FOR HOSPITALIZATION ONLY

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); this branch office should issue the person concerned with a health book* **without which no benefits can be provided;**

in **France,** *the 'organisme conventionné' (customary body);*

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).*

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 worker or pensioner.