



OVERVIEW OF SWISS SOCIAL SECURITY

(The Agreement on the Free Movement of Persons concluded with the EC, the Agreement amending the EFTA Convention and international coordination Agreements on social security concluded with other States are reserved)

as of 1.1.2010

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ORGANISATION

Federal Office of Public Health (OFSP)		Federal Social Insurance Office (OFAS)			OFAS and cantons	State Secretariat for Economic Affairs (seco)
Sickness Maternity (benefits in kind)	Accidents and occupational diseases	Old-age, survivors and invalidity (1 st pillar), income compensation allowances and supplementary benefits	Occupational benefit plans concerning old-age, survivors and invalidity (2 nd pillar)	Linked individual provident measures (3 rd pillar a)	Family allowances	Unemployment
<ul style="list-style-type: none"> - Recognised sickness funds (public funds and private funds) - Private insurance institutions subject to the Federal Law on Insurance Supervision of December 17, 2004, and authorised to provide social sickness insurance - Joint institution which pays for the cost of legally required benefits in the event of bankruptcy of an insurer - Swiss Foundation for health promotion 	<ul style="list-style-type: none"> - Swiss National Fund for Accident Insurance (CNA); this insures about 52% of workers - Other insurers: <ul style="list-style-type: none"> - Private insurance institutions subject to the Federal Law on Insurance Supervision of December 17, 2004 - Public accident insurance funds - Sickness funds pursuant to the Federal Law on Sickness Insurance of March 18, 1994 - Substitute fund, managed by the above-mentioned insurers (except CNA); this pays the legal benefits to the workers being victims of an accident whom the CNA has not the competence to insure and who have not been insured by their employer 	<ul style="list-style-type: none"> - Compensation funds (public or occupational) - Central compensation office <p>Also for invalidity:</p> <ul style="list-style-type: none"> - invalidity insurance cantonal offices - AI Office for insured persons residing abroad <p>For supplementary benefits:</p> <p>Cantonal compensation funds, except in the cantons of Geneva, Zurich and Basle City</p>	<ul style="list-style-type: none"> - Registered provident institutions - Safety Fund (Central Office for 2nd pillar included) - Substitute institution 	<ul style="list-style-type: none"> - Banks (blocked accounts) - Private insurance institutions (insurance policies) 	<p>Federal system (agricultural employees and self-employed farmers): Cantonal compensation funds</p> <p>Cantonal systems (other employed persons): Compensation funds for family allowances (recognised professional or interprofessional funds and cantonal funds)</p>	<ul style="list-style-type: none"> - Public unemployment funds (cantonal) and recognised private unemployment funds - Unemployment insurance compensation body (compensation fund included) - Authorities designated by the cantons - Regional employment offices - Tripartite Commissions - AVS compensation funds - AVS Central compensation office - Employers - Supervision Commission

FINANCING

	CONTRIBUTIONS	PARTICIPATION BY PUBLIC AUTHORITIES
Sickness and maternity Health care insurance	<ul style="list-style-type: none"> – The insurer fixes the premiums to be paid by those it insures. The amount of these premiums must be approved of by the OFSP. – The insurer charges all those it insures the same premiums. But it may grade premiums if it can be proved that costs differ according to canton or region. The regions are delimited uniformly for all the insurers. – The insurer must fix a lower premium for insured persons under the age of 18 (children) than for older insured persons (adults). It may also do so for insured persons under the age of 25 (young adults). – For special types of insurance see p. 10. 	<p>Cantons finance a system to reduce the premiums for insured persons with low incomes.</p> <p>For this purpose, the Confederation grants to cantons yearly subsidies corresponding to 7.5% of gross expenses of the insurance, distributed according to the population of each canton. In 2010: federal subsidies up to Sfr. 1,976 million.</p>
Sickness Daily allowances	<ul style="list-style-type: none"> – The insurer fixes the premiums to be paid by those it insures. – It charges the same premiums for the same insured benefits. But it may grade premiums according to age of entry or region. – If a waiting period applies to the payment of daily allowances the insurer must reduce its premiums accordingly. 	_____

FINANCING (continued)

	CONTRIBUTIONS	PARTICIPATION BY PUBLIC AUTHORITIES
Accidents and occupational diseases	Non-occupational accidents:	
	Employees:	Per mil of insured salary. The premium rate varies according to the classification of the company.
	Employer:	-----
	Unemployed persons (CNA):	43.7 per mil* .
	Occupational accidents and diseases:	
	Employee:	-----
	Employer:	Per mil of insured salary. Net premiums corresponding to risk, plus supplements for administrative expenses, prevention, etc. Companies fall into various classifications and premium stages according to the degree of accident risk and the specific circumstances of each company.
	Maximum insured salary:	Sfr. 126,000.– per year.

* 29.1 per mil are directly deducted from the daily allowance of the unemployment insurance; the remaining 14.6 per mil are financed by the compensation fund of the unemployment insurance.

FINANCING (continued)

	CONTRIBUTIONS	PARTICIPATION BY PUBLIC AUTHORITIES
Old-age and survivors (1st pillar)	<p>Employee : 4.2% of the income (no upper limit). Employer : 4.2% of the income (no upper limit). Self-employed : 7.8% (reduction of the contribution rate on a digressive scale). Those not engaged in paid employment : according to social conditions, the amount varies between Sfr. 382.– and Sfr. 8,400.– per year.</p>	<p>Confederation : 19.55% of annual insurance expenditure. VAT : 13.33% of total annual revenue of the VAT is allocated to the old-age and survivors' insurance. Revenue of the tax on gambling clubs. <i>The helplessness allowance is exclusively financed by the Confederation.</i></p>
Invalidity (1st pillar)	<p>Employee : 0.7% of the income (no upper limit). Employer : 0.7% of the income (no upper limit). Self-employed : 1.4% (reduction of the contribution rate on a digressive scale). Those not engaged in paid employment : according to social conditions, the amount varies between Sfr. 64.– and Sfr. 1,400.– per year.</p>	<p>Confederation : 37.7% of annual insurance expenditure. <i>The helplessness allowance is exclusively financed by the Confederation.</i></p>
Income compensation allowances in case of service Income compensation allowance in case of maternity	<p>Employee : 0.15% of the income (no upper limit). Employer : 0.15% of the income (no upper limit). Self-employed : 0.3% (reduction of the contribution rate on a digressive scale). Those not engaged in paid employment : according to social conditions, the amount varies between Sfr. 14.– and Sfr. 300.– per year.</p>	<hr/>
Supplementary benefits	<hr/>	<p>Annual supplementary benefits: Expenses covered by the Confederation (5/8) and cantons (3/8). Reimbursement of costs due to sickness and disability: Expenses covered by cantons.</p>

FINANCING (continued)

	CONTRIBUTIONS	PARTICIPATION BY PUBLIC AUTHORITIES																				
Occupational benefit plans concerning old-age, survivors and invalidity (2nd pillar)	<ul style="list-style-type: none"> – According to the regulations of provident institutions (these should, however, guarantee that they can honour their commitments). – Contributions by the employer and the employee; the sum of the contributions of the employer should be at least equal to the sum of the contributions of his employees. – The Safety Fund is financed by the contributions of the provident institutions subject to the Federal Law on Vested Benefits in Occupational Benefit Plans and by return on assets. 	_____																				
Linked individual provident measures (3rd pillar a)	<p>The annual amount of the contributions is determined by the insured person. The contributions are deductible from taxable income up to:</p> <ul style="list-style-type: none"> – Sfr. 6,566.– per year for employed persons. – 20% per year of income from earnings for self-employed, at the most Sfr. 32,832.–. 	_____																				
Family allowances	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">Federal system</td> <td style="width: 10%;">Employee</td> <td style="width: 5%;">:</td> <td style="width: 65%;">-----</td> </tr> <tr> <td></td> <td>Employer</td> <td>:</td> <td>2% of the salary.</td> </tr> <tr> <td></td> <td>Self-employed farmer</td> <td>:</td> <td>-----</td> </tr> <tr> <td>Cantonal systems</td> <td>Employee</td> <td>:</td> <td>----- (except Valais: 0.3% of the salary).</td> </tr> <tr> <td></td> <td>Employer</td> <td>:</td> <td>from 0.1 to 4.2% of the salary according to the funds.</td> </tr> </table>	Federal system	Employee	:	-----		Employer	:	2% of the salary.		Self-employed farmer	:	-----	Cantonal systems	Employee	:	----- (except Valais: 0.3% of the salary).		Employer	:	from 0.1 to 4.2% of the salary according to the funds.	<p>Deficit covered by the Confederation (2/3) and cantons (1/3).</p> <p>Expenses covered by the Confederation (2/3) and cantons (1/3).</p> <p>The cantons finance the family allowances for persons not engaged in paid employment.</p>
Federal system	Employee	:	-----																			
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Unemployment insurance	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Employee:</td> <td style="width: 10%;">1%</td> <td style="width: 60%;">of insured salary.</td> </tr> <tr> <td>Employer:</td> <td>1%</td> <td>of insured salary.</td> </tr> <tr> <td>Maximum insured salary:</td> <td>Sfr. 10,500.–</td> <td>per month.</td> </tr> </table>	Employee:	1%	of insured salary.	Employer:	1%	of insured salary.	Maximum insured salary:	Sfr. 10,500.–	per month.	<p>The Confederation contributes to the costs of the employment service and of the active labour market programmes at the rate of 0.15% of the total amount of salaries subject to contributions.</p> <p>If necessary, the Confederation grants short-term loans according to the market conditions.</p>											
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SICKNESS INSURANCE

LEGISLATION	The Federal Law on Sickness Insurance of March 18, 1994 (LAMal) The Federal Law on General Provisions concerning Legislation on Social Insurances of October 6, 2000 (LPGA)
SCOPE	Social sickness insurance includes compulsory health care insurance and optional daily allowance insurance. <i>Sickness insurance funds have the right to provide insurance cover in addition to social sickness insurance. But this is not regulated by the LAMal.</i>
DEFINITIONS	<ul style="list-style-type: none"> – Sickness means any impairment to physical, mental or psychological health which is not due to an accident and which requires medical examination or treatment and/or results in incapacity to work, and congenital disease means any disease existing at the completed birth of the child. – Accident means any unexpected and involuntary injury to the human body resulting from an extraordinary external cause which is harmful to physical, mental or psychological health or which leads to death. – Maternity includes pregnancy, delivery and the period of convalescence hereafter.
MEDICAL AND PHARMACEUTICAL CARE INSURANCE	
Insured persons	All persons domiciled in Switzerland (exceptions are listed in the Ordinance on Sickness Insurance of June 27, 1995). The persons who must be insured may choose their insurer freely.
Claim prerequisites	No qualifying period required.

SICKNESS INSURANCE (continued)

MEDICAL AND PHARMACEUTICAL CARE INSURANCE (continued)	
Benefits	<p>a) General benefits in case of sickness, maternity, accident (not covered by an accident insurance), congenital disease (not covered by the invalidity insurance scheme) and legal abortion:</p> <ul style="list-style-type: none">- Examination, treatment and care of out-patients, at the residence of the patient, in a hospital or in a medico-social establishment by doctors, chiropractors or persons providing benefits by prescription or on doctor's orders;- Analyses, medicaments, diagnostic and therapeutic services and equipment prescribed by a doctor or, within the limits fixed by the Federal Council, by a chiropractor;- Participation in the cost of spa treatment prescribed by a doctor;- Rehabilitation measures carried out or prescribed by a doctor;- Stays in hospital corresponding to the standard of the general ward;- Stays in a birth centre in the case of delivery;- A contribution to medically necessary transport and rescue costs;- Services of the pharmacists (advice) when handing over prescribed drugs. <p>b) Prevention measures: Payment for specific examinations intended to detect sicknesses in time and prevention measures for patients particularly at risk. Such examinations and prevention measures must be carried out or prescribed by a doctor.</p> <p>c) Benefits specific to maternity:</p> <ul style="list-style-type: none">- Check-ups both during and after pregnancy carried out by a doctor or a midwife or prescribed by a doctor;- A contribution to pre-natal preparatory courses;- Delivery at home, in hospital or in a birth centre and the assistance of a doctor or a midwife;- Advice on breast-feeding;- Care provided to the healthy newborn child as well as board and accommodation as long as he or she stays in hospital with the mother. <p>d) Dental care: Payment for dental care in one of the following circumstances:</p> <ul style="list-style-type: none">- If it is due to a serious and unavoidable disease of the masticatory system;- If it is due to any other serious disease or its after-effect;- If it is necessary for the treatment of a serious disease or its after-effects; <p>Also payment for the treatment of injuries to the masticatory system caused by an accident which is not covered by an accident insurance.</p>

SICKNESS INSURANCE (continued)

MEDICAL AND PHARMACEUTICAL CARE INSURANCE (continued)	
Beginning of entitlement to benefits	From the onset of the sickness.
Duration of entitlement to benefits	Unlimited duration.
Services covered	<ul style="list-style-type: none"> - Doctors; - Pharmacists; - Dentists; - Chiropractors; - Midwives; - Physiotherapists, ergotherapists, nurses, logopedists, dieticians providing care on prescription or on doctor's orders, including organisations which employ such persons; - Laboratories; - Centres supplying diagnostic and therapeutic services and equipment; - Hospitals; - Birth centres; - Medico-social establishments; - Spa centres; - Transport and rescue companies; - Out-patient institutions offering medical services provided by doctors.
Choice of supplier	Insured persons may choose freely any supplier of the above services authorised and capable of treating their sickness. The Federal Council has introduced for a limited period of time a limitation, according to needs (needs test), of the number of specialists authorised to provide medical services at the insurance's expense in the out-patient sector.
Cover of expenses	<p>In case of treatment of out-patients, the insurer covers expenses up to the tariff in force in the place of residence or employment of the insured person, or in the surrounding area.</p> <p>In case of treatment in a hospital, the insurer covers only the costs up to the tariff in force in the canton of residence of the insured person.</p> <p>There are special provisions for emergencies or in case the insured person turns to another supplier of services for medical reasons.</p>

SICKNESS INSURANCE (continued)

MEDICAL AND PHARMACEUTICAL CARE INSURANCE (continued)	
Participation by insured persons	<p>A fixed amount per calendar year (excess, deductible, “franchise”), but only for adults[*], and a share of costs in %.</p> <p>In addition, in the case of hospital stays, insured persons not living in the same household as any other member of their family, pay a contribution to the cost of board and accommodation.</p> <p>Ordinary excess: Sfr. 300.– per calendar year.</p> <p>Share of costs: 10% of costs above the excess, up to Sfr. 700.– for adults and Sfr. 350.– for children (however, several children of one family insured by the same insurer pay together a maximum of Sfr. 1,000.–). The share of costs amounts to 20% if the original preparation is used whereas the generic appears on the list of reimbursed medicines.</p> <p>Contribution to the cost of board and accommodation in the case of hospital stays: Sfr. 10.– per day (not limited in time).</p> <p>No participation is required in the case of maternity benefits.</p>
Special types of insurance resulting in premium reductions	<ul style="list-style-type: none">– Insurance with a choice of excess: The insurer may provide, in addition to ordinary insurance for health care, insurance cover in which adults may choose higher excess and in which children may pay excess. Possible higher excess for adults are Sfr. 500.–, 1,000.–, 1,500.–, 2,000.– and 2,500.– and possible excess for children are Sfr. 100.–, 200.–, 300.–, 400.–, 500.– and 600.–.– Insurance with bonus: The insurer may provide, in addition to ordinary insurance for health care, insurance cover in which a premium reduction is granted when the insured person has not received benefits for one year. This does not apply to maternity benefits and prevention measures.– Insurance which limits the choice of the supplier of services: The insurer may provide, in addition to ordinary insurance for health care, insurance cover which limits the choice of the supplier of services. The insurer may give up charging wholly or partly the share of costs and the excess.

* Over 18 years old.

SICKNESS INSURANCE (continued)

DAILY ALLOWANCE INSURANCE	
Persons who can be insured	<p>Any person between the ages of 15 and 65, domiciled or in gainful employment in Switzerland may conclude a daily allowance insurance contract.</p> <p>An individual contract of employment, a standard contract of employment or a collective labour agreement may make such insurance mandatory. In this case, the daily allowance insurance may be taken out as a collective insurance contract.</p>
Claim prerequisites	<p>No qualifying period.</p>
Reservations	<p>The insurers may exclude from cover, by making a reservation, sicknesses from which a person is suffering at the time of admission. The same is true for previous sicknesses if experience shows that recurrence is possible. Reservations end after 5 years at the latest.</p>
Change of insurer	<p>The new insurer is not allowed to set up new reservations if the insured person has changed insurer because the taking up of an employment or the end of it requires such change, or because the insured leaves the geographical field of activity of his or her previous insurer, or because the insurer ceases to provide social sickness insurance.</p> <p>The new insurer may maintain the reservations set up by the previous insurer until the initially set up term expires.</p> <p>The insured person must assert the above mentioned rights within three months.</p>
Waiting period	<p>In the absence of an agreement to the contrary, this benefit becomes payable on the third day following the onset of the sickness.</p> <p>Payment of these benefits may be delayed on condition that the premium is reduced accordingly.</p>
Amount of the allowance	<p>The insurer reaches an agreement with the insured person on the amount of daily allowance to be insured.</p>
Duration of payment	<p>At least 720 days in a period of 900 days.</p>

ACCIDENT AND OCCUPATIONAL DISEASE INSURANCE

LEGISLATION	The Federal Law on Accident Insurance of March 20, 1981 (LAA) The Federal Law on General Provisions concerning Legislation on Social Insurances of October 6, 2000 (LPGA)
Persons insured	<ul style="list-style-type: none">– All employed persons working in Switzerland, as well as unemployed persons who satisfy the conditions contained in Article 8 of the Federal Law on Unemployment Insurance of June 25, 1982, are subject to compulsory insurance (p. 40). An employed person is a person performing a gainful employed activity in the sense of the LAVS.– Self-employed persons domiciled in Switzerland may choose to be insured.
Beginning and end of insurance *	<ul style="list-style-type: none">– Insurance cover comes into effect the day on which the employed person takes up employment or should have taken up employment according to his or her contract, and at the latest from the time when he or she leaves his or her place of abode in order to travel to his or her place of employment.– Insurance cover ends at the end of the 30th day following the day on which his or her entitlement to a half-salary ceases (the insurer must offer the insured person the opportunity of prolonging his or her insurance by special agreement for 180 days at the most). The Federal Council specifies other types of remuneration or benefit which may be considered as equivalent to salaries.
Subrogation	From the time of occurrence of the damaging event, the insurer has a right to recourse against any responsible third party to the extent of the legal benefits due to the insured person or to his or her survivors.
Responsibility of the employed person	<ul style="list-style-type: none">– If the impairment to health or death has been caused intentionally, no insurance benefit is due, other than the grant for funeral costs.– A non-occupational accident due to gross negligence on the part of the insured person may result in a reduction in daily cash benefits for no longer than two years.– If the insured person was the cause of his or her accident as a result of committing a criminal offence, cash benefits may be reduced or refused altogether.

* There exists a special set of regulations for the unemployed.

ACCIDENT AND OCCUPATIONAL DISEASE INSURANCE (continued)

RISKS COVERED	
Definitions	<p>Accident means any unexpected and involuntary injury to the human body resulting from an extraordinary external cause which is harmful to physical, mental or psychological health or which leads to death.</p> <p>Disease means any impairment to physical, mental or psychological health which is not due to an accident and which requires medical examination or treatment and/or results in incapacity to work.</p>
Occupational accident	Accident of which the insured person is victim while carrying out duties at the behest of his or her employer or in the latter's interest, or during a break, as well as before or after work, when he or she is legitimately at his or her work place or in a danger zone related to his or her employment.
Non-occupational accident	All other accidents, including in principle accidents on the way to and from his or her place of employment.
Occupational disease	Any disease due exclusively or mainly to harmful substances or certain types of work (see list of substances and types of work) while the insured person is engaged in his or her employment, as well as any other disease which may be proved to be due exclusively or mainly to the professional duties of the insured person (general clause).
BENEFITS FOR MEDICAL CARE AND REIMBURSEMENT OF EXPENSES	<ul style="list-style-type: none"> – Appropriate medical treatment <ul style="list-style-type: none"> – out-patient treatment provided by a doctor, a dentist, a chiropractor or, on medical prescription, by paramedical staff; – medicaments and tests prescribed by a doctor or a dentist; – treatment, board and accommodation in the general ward of a hospital with which an agreement on tariffs has been concluded; – supplementary treatment and spa treatment prescribed by a doctor; – equipment required for healing. Free choice of doctor, dentist, chiropractor, pharmacy and hospital. – Auxiliary equipment of a simple and adequate type to compensate for physical damage or loss of a function; either lent or given in property. – Material damage: the insured person is entitled to receive compensation for damage caused by an accident to objects which replace a part of the body or a bodily function (the cost of replacing spectacles, hearing aids and dental apparatus is covered only on specific conditions). – Necessary rescue costs, as well as travel and transport costs which are medically necessary. Reimbursement of expenses incurred abroad is limited. – Transport costs for the body of an insured person, and funeral costs.

ACCIDENT AND OCCUPATIONAL DISEASE INSURANCE (continued)

CASH BENEFITS	Daily cash benefit, invalidity pension, integrity allowance, helplessness allowance, survivors' pension, lump-sum benefit.
DAILY CASH BENEFIT*	
Beginning and end of entitlement	Entitlement begins on the 3rd day following the day the accident occurred. It ends when the insured person has recovered his or her full working capacity, or when a pension is paid, or when the insured person dies.
Amount	80% of the insured salary. If incapacity is only partial, there is a proportional reduction. In case of hospital stays, there may be a reduction for participation in living expenses, except for insured persons responsible for their children who are minors or who are engaged in studies or apprenticeship.
Insured salary for the calculation of the daily cash benefits	The last salary which the insured person received before the accident. This salary is converted in an annual salary and divided by 365. Maximum: Sfr. 346.– per day.
INVALIDITY PENSION	
Definition	Invalidity is full or partial earnings incapacity, presumed to be permanent or of long duration. Earnings incapacity is any reduction of all or part of the insured person's earnings possibilities in a balanced labour market that comes into consideration, if this reduction results from physical, mental or psychological impairment and persists after completion of the required treatments and rehabilitation measures.
Beginning and end of entitlement	Entitlement to a pension begins when it is no longer reasonable to expect a substantial improvement in the condition of the insured person from continuation of medical treatment, and after completion of any necessary rehabilitation measures of the invalidity insurance. Entitlement ends when the pension is replaced in its entirety by a lump-sum benefit, or when it is repurchased, or when the insured person dies.
Minimum degree of invalidity	If the degree of invalidity is at least 10%, the insured person is entitled to an invalidity pension. To evaluate the degree of invalidity, the income which the person could have earned if he or she were not disabled is compared to the income which he or she could earn exercising the employment that could reasonably be required in a balanced labour market, after completion of treatments and rehabilitation measures.
Amount	Full invalidity: 80% of the insured salary. Partial invalidity: Proportional reduction.
Insured salary for the calculation of the invalidity pension	The salary which the insured person received during the year preceding the accident. Maximum: Sfr. 10,500.– per month.

* There exists a special set of regulations for the unemployed.

ACCIDENT AND OCCUPATIONAL DISEASE INSURANCE (continued)

LUMP-SUM BENEFIT	When it may be assumed from the nature of the accident and the behaviour of the insured person that he or she will recover his or her earnings capacity if he or she receives a single benefit, periodic benefits cease to be paid and the insured person receives a lump-sum benefit amounting to a maximum of three times the annual insured salary.
INTEGRITY ALLOWANCE	This is a lump-sum benefit, graded according to the severity of the damage to integrity; it cannot exceed the maximum of the annual insured salary at the time of the accident.
HELPLESSNESS ALLOWANCE	A person is deemed helpless when he or she has permanent need of the help of a third party or personal supervision to carry out basic everyday activities because of health impairment. The helplessness allowance is fixed according to the degree of helplessness.

ACCIDENT AND OCCUPATIONAL DISEASE INSURANCE (continued)

SURVIVORS' PENSIONS	
– Surviving spouse* Entitlement	<ul style="list-style-type: none"> – Widows and widowers who, on the death of their spouse, have one or several children entitled to a pension or who are disabled to the extent of at least 2/3; – widows who have one or several children not entitled any more to a pension or who have completed their 45th year. Widows are entitled to a lump-sum benefit when they do not fulfil the prerequisites for the entitlement to a pension; – a divorced spouse is considered as equivalent to a widow or a widower if the insured person was obliged to pay alimony.
Amount of pension	40% of the insured salary. The pension of a divorced spouse is equal to 20% of the insured salary, but not more than the alimony which is due.
Amount of the lump-sum benefit	This depends on the duration of the marriage: <ul style="list-style-type: none"> Less than one year: the amount of the annual pension More than one year but less than five years: three times the amount of the annual pension More than five years: five times the amount of the annual pension
– Orphan Entitlement	Pension for an orphan of a father and/or of a mother
Amount	<ul style="list-style-type: none"> Orphan of a father or a mother: 15% of the insured salary. Orphan of a father and a mother: 25% of the insured salary.
Duration of entitlement	<p>A surviving spouse's pension ends on remarriage, or on the death of the rightful claimant, or on repurchase of the pension.</p> <p>An orphan's pension ends on completion of the 18th year (the 25th year in case of apprenticeship or studies) or death of the orphan, or on repurchase of the pension.</p>
Total for all rightful claimants	In cases where there are several survivors, the total of such survivors' pensions cannot amount to more than 70% of the insured salary (90% when they include a pension for a divorced spouse).
Insured salary for the calculation of the survivors' pensions	As for the invalidity pension.
REVALUATION	Accident insurance pensions are adjusted to the development of prices, at the same time as those of the basic pension insurance (1st pillar).
CONCURRENCE OF BENEFITS	If there is concurrence with the benefits of the AVS/AI, the accident insurance in principle allows only a supplementary pension whose amount corresponds to the difference between 90% of the insured salary and the AVS or AI pension, but at the most to the amount to which those concerned would have been entitled from the accident insurance alone.

* For its whole duration the registered same-sex partnership is treated as marriage and its judicial dissolution as divorce; the surviving registered partner is treated as a widower.

BASIC PENSION INSURANCE (1st pillar) OLD-AGE INSURANCE

LEGISLATION	The Federal Law on Old-Age and Survivors' Insurance of December 20, 1946 (LAVS) The Federal Law on General Provisions concerning Legislation on Social Insurances of October 6, 2000 (LPGA)
Purpose	Article 112 of the Federal Constitution provides that the pensions of the old-age, survivors' and invalidity insurance (1 st pillar) must cover the basic needs in an appropriate way.
Compulsory insurance	All persons who are domiciled or engaged in paid employment in Switzerland are subject to compulsory insurance. Swiss nationals working abroad for the federal government, for international organizations with whom the Federal Council has concluded a headquarter agreement, or for private volunteer organizations that receive substantial support from the government are also subject to it. The law permits some exceptions to this compulsory insurance. Following persons may remain insured: - Persons working abroad for an employer in Switzerland and paid by that employer, provided the latter agrees. - Students without paid employment who leave their domicile in Switzerland in order to pursue education abroad, until December 31 of the year in which they complete their 30 th year.
Optional insurance	Swiss nationals and citizens of the EU or EFTA Member States who live abroad in a non-EU or non-EFTA Member State and who are not subject to compulsory insurance any longer after an uninterrupted period of five years may join the optional insurance.
Obligations	- Insured persons are required to pay contributions as long as they are engaged in paid employment. - For persons not engaged in paid employment, the obligation starts on January 1 of the year following that in which they complete their 20th year and continues until the end of the month in which they reach the age of 65 (for men) / 64 (for women). - Two categories of young employed persons are not required to pay contributions. - The following are considered to have paid their contributions themselves provided that their spouse* has paid contributions equivalent to at least double the minimum contribution: a. spouses* of insured persons engaged in paid employment who are not themselves so engaged; b. persons who work in an enterprise belonging to their spouse* without receiving cash payment.
ORDINARY OLD-AGE PENSIONS	
General claim prerequisites	- For Swiss nationals: to have reached the age of 65 (for men), or 64 (for women) provided at least one complete year of contributions may be taken into account; - For foreign nationals: as for Swiss nationals, provided they maintain their domicile and permanent residence in Switzerland.

* For its whole duration the registered same-sex partnership is treated as marriage.

BASIC PENSION INSURANCE (1st pillar) OLD-AGE INSURANCE (continued)

ORDINARY OLD-AGE PENSIONS (continued)	
Calculation of the pension	On the basis of the average annual income and the years of contributions.
Average annual income	This is made up as follows: - income from paid employment; - bonuses for child-raising; - bonuses for care-taking.
Income from paid employment	Income from paid employment upon which contributions have been made is taken into account; the contributions of persons not engaged in paid employment are converted and counted as income from paid employment; income earned by spouses* during the calendar years of their marriage* are divided, half being attributed to each spouse* (splitting).
Splitting	Division of income takes place in the following circumstances: - when both spouses* are entitled to the pension; - when a widow or a widower* is entitled to an old-age pension; - when a marriage is dissolved following divorce*.
Bonuses for child-raising	Insured persons may claim a bonus for child-raising for the years during which they have exercised parental authority over one or several children aged below 16. Persons living as a married couple may claim only one bonus. The bonus corresponds to three times the amount of the annual minimum old-age pension, this amount having been fixed when the entitlement to the pension began. The bonus is divided equally between spouses* during the calendar years of their marriage*.
Bonuses for care-taking	Insured persons caring for relations in ascending or descending line or for brothers or sisters who are entitled to an AVS or AI helplessness allowance for moderate degree of helplessness at least and who live with them in the same household may claim a bonus for care-taking. If an entitlement to a bonus for child-raising exists, a bonus for care-taking may not be attributed to cover the same period. The bonus corresponds to three times the amount of the annual minimum old-age pension, this amount having been fixed when the entitlement to the pension began. The bonus is included in the individual account, and entitlement to the bonus must be justified each year in writing; if the insured person has not justified the entitlement within five years counting from the end of the calendar year during which the assisted person was in his or her care, it is no longer possible to include the bonus in the individual account. The bonus is divided equally between spouses* during the calendar years of their marriage*.

* For its whole duration the registered same-sex partnership is treated as marriage and its judicial dissolution as divorce; the surviving registered partner is treated as a widower.

BASIC PENSION INSURANCE (1st pillar) OLD-AGE INSURANCE (continued)

ORDINARY OLD-AGE PENSIONS (continued)	
Period of contributions	This is complete when a person may show the same number of years of contributions as that of his or her age group.
Years of contributions	Years of contributions are defined as follows: - those during which an insured person has paid contributions; - years in which the spouse* of an insured person (the latter not having engaged in paid employment or having worked in an enterprise belonging to the spouse* without cash payment) has paid at least twice the minimum contribution; - those for which bonuses for child-raising or care-taking may be taken into account.
Complete pension and partial pension	A complete pension is paid when the period of contributions is complete; a partial pension is paid when the period of contributions is incomplete.
Supplement	Widows and widowers* drawing an old-age pension are entitled to a supplement of 20% of their pension. The pension and the supplement may not exceed the maximum amount of an old-age pension.
Revaluation	Adjustment of pensions, in principle every two years to the development of wages and prices by adapting the pension index. Early adjustment when the consumer price index has increased by more than 4% in one year.
Early payment and postponement	Persons who have fulfilled the claim prerequisites for an ordinary old-age pension may obtain payment one or two years early; the amount by which the pension is reduced in consequence is 6.8% per year of early payment. In 2010, the reduction rate for women who claim their pension a year early is only 3.4%. Persons entitled to an ordinary old-age pension may postpone the beginning of payment for no less than one year but no more than five years; in such case the pension is increased by between 5.2% and 31.5%.
End of entitlement	On the death of the insured person.

* For its whole duration the registered same-sex partnership is treated as marriage and its judicial dissolution as divorce; the surviving registered partner is treated as a widower.

BASIC PENSION INSURANCE (1st pillar) OLD-AGE INSURANCE (continued)

ORDINARY OLD-AGE PENSIONS (continued)			
Types and amounts of complete pension	<p>Old-age pension: a minimum of Sfr. 1,140.– per month, a maximum of Sfr. 2,280.– per month; the total amount of old-age pensions paid to a couple* may not exceed 150% of the maximum amount of the old-age pension, i.e. Sfr. 3,420.– per month.</p> <p>Child's pension: persons receiving an old-age pension are entitled to a child's pension for each child who would be entitled to an orphans' pension on the death of such persons; the child's pension amounts to 40% of the old-age pension in question (but a minimum of Sfr. 456.– per month and a maximum of Sfr. 912.– per month); if both parents are entitled to a child's pension, the total of the two child's pensions may not exceed 60% of the maximum old-age pension, i.e. Sfr. 1,368.– per month.</p>		
HELPLESSNESS ALLOWANCE			
Definition	A person is deemed helpless when he or she has permanent need of the help of a third party or personal supervision to carry out basic everyday activities because of health impairment.		
Claim prerequisites	<ul style="list-style-type: none"> - To be domiciled and to have permanent residence in Switzerland. - To be entitled to an old-age pension or supplementary benefits, to suffer from severe or moderate helplessness and not to be entitled to a helplessness allowance under the accident insurance or military insurance schemes; persons receiving an AI helplessness allowance at the end of the month in which they reach retirement age receive an AVS helplessness allowance which is at least equal to it. 		
Degree of helplessness	Severe	Sfr. 912.– per month	(80% of the minimum old-age pension amount)
	Moderate	Sfr. 570.– per month	(50% of the minimum old-age pension amount)

* For its whole duration the registered same-sex partnership is treated as marriage.

BASIC PENSION INSURANCE (1st pillar) SURVIVORS' BENEFITS

LEGISLATION	The Federal Law on Old-Age and Survivors' Insurance of December 20, 1946 (LAVS) The Federal Law on General Provisions concerning Legislation on Social Insurances of October 6, 2000 (LPGA)
ORDINARY WIDOWS' AND WIDOWERS' PENSIONS*	
Claim prerequisites	<ul style="list-style-type: none"> - Widows and widowers who, on the death of their spouse, have one or several children (special provisions exist for foster children); - Widows who have no children (nor foster children in the sense of the special provisions), provided that they have completed their 45th year and were married for at least five years; - Divorced persons are considered as equivalent to widows or widowers provided they fulfil certain conditions.
Beginning of entitlement	The first day of the month following the death of the spouse.
End of the entitlement	<p>On remarriage, on death; when there is entitlement to an old-age or invalidity pension, the widows' or widowers' pension is still paid if its amount is higher.</p> <p>Widowers' pensions end when the youngest child reaches the age of 18.</p>
ORDINARY ORPHANS' PENSIONS	
Claim prerequisites	Children whose father or mother is deceased are entitled to an orphan's pension. When both parents are deceased, they have the right to two orphans' pensions.
Beginning of entitlement	The first day of the month following the death of the father or the mother.
End of the entitlement	<ul style="list-style-type: none"> - On the death of the orphan; - On completion of the 18th year (the 25th year in the case of apprenticeship or studies); - On entitlement to an AI pension or to a widows' or widowers' pension, if the latter is higher.

* For its whole duration the registered same-sex partnership is treated as marriage and its judicial dissolution as divorce; the surviving registered partner is treated as a widower.

BASIC PENSION INSURANCE (1st pillar) SURVIVORS' BENEFITS (continued)

ORDINARY SURVIVORS' PENSIONS (continued)	
Types and amounts of complete pension	<p>Widow's or widower's pension: 80% of the old-age pension corresponding to the revalued average annual income; but a minimum of Sfr. 912.– per month and a maximum of Sfr. 1,824.– per month.</p> <p>Orphan's pension: 40% of the old-age pension corresponding to the revalued average annual income; but a minimum of Sfr. 456.– per month and a maximum of Sfr. 912.– per month. If both parents are deceased, the orphans' pensions must be reduced if they exceed 60% of the maximum old-age pension, i.e. Sfr. 1,368.– per month.</p>
EXTRAORDINARY PENSIONS	
Claim prerequisites	<p>An extraordinary pension is granted to Swiss nationals who have their domicile and permanent residence in Switzerland, when the minimum period of contributions required for entitlement to an ordinary pension does not exist and when the beneficiary or the deceased insured person has nevertheless been insured during the same number of years as that of his or her age group. In the case of widows, widowers* and orphans, entitlement to an extraordinary survivors' pension arises only when the insured event concerning a deceased person occurred before the latter completed his or her 21st year.</p>

* The surviving registered partner is treated as a widower.

BASIC PENSION INSURANCE (1st pillar) INVALIDITY INSURANCE

LEGISLATION	The Federal Law on Invalidity Insurance of June 19, 1959 (LAI) The Federal Law on General Provisions concerning Legislation on Social Insurances of October 6, 2000 (LPGA)
Purpose	The benefits of the LAI aim at preventing, reducing or eliminating invalidity thanks to appropriate, simple and suitable rehabilitation measures, at compensating the permanent economic effects of invalidity by covering the basic needs in an appropriate way, and at helping the insured persons to lead an autonomous life.
Insured persons	Persons who are insured through either the compulsory or the optional scheme under the LAVS are also insured under the LAI.
Obligations	The LAVS applies by analogy.
Definition	<ul style="list-style-type: none"> - Invalidity is full or partial earnings incapacity, presumed to be permanent or of long duration. Earnings incapacity is any reduction of all or part of the insured person's earnings possibilities in a balanced labour market that comes into consideration, if this reduction results from physical, mental or psychological impairment and persists after completion of the required treatments and rehabilitation measures. Only the consequences of impairment to health are taken into consideration when assessing earnings incapacity; there is earnings incapacity only if it is objectively insuperable. Invalidity may be due to congenital disease, sickness or accident; - Insured persons under the age of 20 who are not engaged in paid employment are deemed disabled if they are affected by physical, mental or psychological impairment which is likely to result in full or partial earnings incapacity; - Insured persons over the age of 20 who were not in gainful employment before being affected by physical, mental or psychological impairment, and who are not required to be are deemed disabled if the impairment prevents them from carrying out their usual activities. <p>Invalidity is deemed to have occurred as soon as it is, by reason of its nature and its gravity, such as to give entitlement to the benefits in question.</p>
EARLY DETECTION	
Aim	To prevent invalidity for persons in work incapacity. Early detection is optional.
Reporting	The case of an insured person may be reported to the AI Office for early detection if the insured person has been in work incapacity for a minimum uninterrupted period of 30 days or if he or she has been, for health reasons, repeatedly absent from work for short periods of time over one year.
Procedure	The AI Office examines the personal situation of the insured person, especially his or her work incapacity, and determines if early intervention measures are appropriate.

BASIC PENSION INSURANCE (1st pillar) INVALIDITY INSURANCE (continued)

BENEFITS	Early intervention measures, rehabilitation measures and daily cash benefits, pensions (ordinary and extraordinary), helplessness allowances
Reduction or refusal of benefits	The insured person must undertake everything that can be reasonably required of him or her in order to reduce the duration and the extent of work incapacity and in order to prevent invalidity. He or she must take an active part in the implementation of all reasonable measures which contribute to maintaining his or her current job, to his or her rehabilitation in professional life or to the exercise of a comparable activity (usual activities). If he or she does not fulfil these obligations, benefits may be reduced or refused.
EARLY INTERVENTION MEASURES	
Aim	To keep insured persons in work incapacity in their current job or to allow their rehabilitation in a new job in the same company or elsewhere. There is no legal entitlement to early intervention measures.
Type of benefit	Workplace adjustment, training courses, job placement service, professional advice, socio-professional rehabilitation, occupation programmes, etc.
Duration	Early intervention ends with: <ul style="list-style-type: none"> - the decision to implement rehabilitation measures; - the communication that no rehabilitation measures can be implemented successfully and that the right to a pension is being examined; - the decision according to which the insured person is neither entitled to rehabilitation measures nor to a pension.
Maximum amount	The amount of early intervention measures can not exceed Sfr. 20,000.– per insured person.

BASIC PENSION INSURANCE (1st pillar) INVALIDITY INSURANCE (continued)

REHABILITATION MEASURES AND DAILY CASH BENEFITS	
Claim prerequisites	<ul style="list-style-type: none"> - To be subject to compulsory or optional insurance (special conditions for persons who are less than 20 years of age). - Invalidity or threat of invalidity, to the extent that earnings capacity or the capacity to carry out usual activities, regardless of the engagement in paid employment before occurrence of invalidity, may be re-established, maintained or improved by such measures (except for medical measures in case of congenital disease and auxiliary equipment). - For foreign nationals, in addition at least one year of contributions or ten years of residence in Switzerland without interruption (special conditions for foreigners who are less than 20 years of age). <p>The rehabilitation measures take place in Switzerland (in exceptional cases abroad).</p>
Child-care and assistance allowance	The insured person not engaged in paid employment who lives in the same household as one or several children under 16 or other members of the family is entitled to a child-care and assistance allowance, under certain conditions.
Type of benefit:	
- Medical measures for insured persons under the age of 20	<ul style="list-style-type: none"> - Medical measures which do not treat the sickness as such but are directly required for occupational rehabilitation or for the rehabilitation in order to carry out usual activities. - Medical measures which are necessary for the treatment of congenital disease.
- Reintegration measures preparing for occupational rehabilitation	<ul style="list-style-type: none"> - socio-professional measures: measures to get accustomed to work process, to stimulate the motivation at work, to stabilize personality and to develop basic socialization; - occupation programmes: programmes aiming at maintaining a daily structure until occupational rehabilitation measures are implemented or until work relationships start on the ordinary free labour market.
- Occupational measures	Professional advice, initial occupational training, occupational retraining, job placement service (with, if needed, an induction allowance paid to the employer), capital assistance.
- Auxiliary equipment	<p>Orthopaedic apparatus, hearing aids, motor vehicles, guide dogs for the blind, special tools, etc. (list established by the Federal Council)</p> <ul style="list-style-type: none"> i) in order to engage in paid employment, or to carry out usual activities, to maintain or improve earnings capacity, to study or learn a profession or for training, or for purposes of functional readjustment; ii) in order to move about, to establish contact with surroundings or to develop personal independence, regardless of earnings capacity.
Daily cash benefits	<ul style="list-style-type: none"> - The insured person is entitled to a daily cash benefit during rehabilitation if, during at least three consecutive days, he or she is prevented from engaging in paid employment by the rehabilitation measures, or if he or she is incapable of carrying out his or her usual activities to the extent of at least 50%. - The insured person who takes part in initial occupational training as well as the insured person who is under 20 and who has not engaged in paid employment yet are entitled to a daily cash benefit if they have totally or partially lost their earnings capacity.

BASIC PENSION INSURANCE (1st pillar) INVALIDITY INSURANCE (continued)

ORDINARY INVALIDITY PENSIONS	
Claim prerequisites	<ul style="list-style-type: none"> - Earnings capacity or capacity to carry out usual activities can not be re-established, maintained or improved by rehabilitation measures; - Work incapacity of at least 40% on average during one year without significant interruption; - At the end of this year, the insured person is at least 40% disabled; - The insured person has completed three years of contribution; - For foreign nationals: as for Swiss nationals (or ten years of residence in Switzerland without interruption); they have to maintain their domicile and permanent residence in Switzerland.
Types of pension	<ul style="list-style-type: none"> - Full pension: if the degree of invalidity is at least 70%. - Three-quarter pension: if the degree of invalidity is at least 60%. - Half pension: if the degree of invalidity is at least 50%. - Quarter pension: if the degree of invalidity is at least 40%.
Beginning of entitlement	At the earliest six months after the insured person applied for a pension, but not before the month following his or her 18th birthday.
Evaluation of invalidity	The income which the person could have earned if he or she were not disabled is compared to the income which he or she could earn exercising the employment which could reasonably be required in a balanced labour market, after completion of treatments and rehabilitation measures. Invalidity of the insured persons who are not in gainful employment and who are not required to be is evaluated according to their capacity to carry out their usual activities.
Calculation of the pension	<p>On the basis of the average annual income and the years of contributions.</p> <p>This average annual income is made up as follows:</p> <ul style="list-style-type: none"> - income from paid employment; - bonuses for child-raising; - bonuses for care-taking. <ul style="list-style-type: none"> - Complete pension: if the person has, at the time when the invalidity occurs, paid contributions for the same number of years as that of his or her age group. - Partial pension: if the period of contribution payments is incomplete in relation to his or her age group. <p>If the insured person has a complete period of contribution payments and is less than 25 years of age when the invalidity occurs, the invalidity pension is at least 133 1/3% of the minimum amount of the corresponding complete pension.</p>
Revaluation	As for old-age and survivors' pensions.

BASIC PENSION INSURANCE (1st pillar) INVALIDITY INSURANCE (continued)

ORDINARY INVALIDITY PENSIONS (continued)	
Concurrence	Concurrence with invalidity pensions of the accident and occupational disease insurance scheme is possible; these may be reduced in cases of over-insurance.
End of entitlement	When the insured person is no longer disabled, or when he or she is entitled to an old-age pension, or on death.
Pension revision	If the degree of invalidity of the beneficiary changes in a noteworthy way, the pension may be increased, reduced or cancelled. When a pension recipient earns a new income or when his or her current income increases, the pension is only revised if the income increase exceeds Sfr. 1,500.– per year. Only 2/3 of the amount exceeding this limit is considered when revising the pension.
Types and amounts of complete pension	Invalidity pension: a minimum of Sfr. 1,140.– per month, a maximum of Sfr. 2,280.– per month; the sum of individual pensions paid to a couple* may not exceed 150% of the maximum amount of the invalidity pension, i.e. Sfr. 3,420.– per month. Child's pension: persons receiving an invalidity pension are entitled to a child's pension for each child who would be entitled to an orphans' pension on the death of such persons; the child's pension amounts to 40% of the invalidity pension in question (but a minimum of Sfr. 456.– per month and a maximum of Sfr. 912.– per month); if both parents are entitled to a child's pension, the total of the two child's pensions may not exceed 60% of the maximum invalidity pension, i.e. Sfr. 1,368.– per month.
EXTRAORDINARY PENSIONS	
Claim prerequisites	An extraordinary pension is granted to disabled Swiss nationals who have their domicile and permanent residence in Switzerland, when the minimum period of contributions required for entitlement to an ordinary pension does not exist and when the beneficiary has nevertheless been insured during the same number of years as that of his or her age group. Persons disabled since birth or since childhood and domiciled in Switzerland are entitled to extraordinary invalidity pensions.

* For its whole duration the registered same-sex partnership is treated as marriage.

BASIC PENSION INSURANCE (1st pillar) INVALIDITY INSURANCE (continued)

HELPLESSNESS ALLOWANCE										
Definition	<p>A person is deemed helpless when he or she has permanent need of the help of a third party or personal supervision to carry out basic everyday activities because of health impairment. Helplessness may be severe, moderate or slight.</p> <p>A person living at home is also considered helpless if he or she has permanent need of help to face the needs of everyday life. In this case, helplessness is deemed slight. If a person is affected only by psychological impairment, he or she must be entitled to at least a quarter pension in order to be considered helpless.</p>									
Claim prerequisites	<p>Helpless insured persons who are domiciled and resident in Switzerland are entitled to helplessness allowance. Foreign nationals must in addition have paid contributions during at least one complete year or have been domiciled in Switzerland without interruption during at least 10 years.</p> <p>There is no entitlement to helplessness allowance while staying in an institution for the execution of rehabilitation measures.</p> <p>Minor insured persons are not entitled to helplessness allowance if they only need support for the practical daily activities.</p>									
Beginning and end of entitlement	<p>Helplessness allowance is granted at the earliest at birth. For insured persons who are less than one year of age, entitlement begins as soon as there is a helplessness of a probable duration of more than twelve months. From the age of one year on, the insured person must have been helpless for at least one year without a notable interruption.</p> <p>Entitlement to helplessness allowance ends as soon as the insured person receives an old-age pension of the AVS.</p>									
Amounts	<table border="0"> <tr> <td>Severe</td> <td>Sfr. 1,824.– per month</td> <td>(80% of the maximum old-age pension amount)</td> </tr> <tr> <td>Moderate</td> <td>Sfr. 1,140.– per month</td> <td>(50% of the maximum old-age pension amount)</td> </tr> <tr> <td>Slight</td> <td>Sfr. 456.– per month</td> <td>(20% of the maximum old-age pension amount)</td> </tr> </table> <p>The amounts of helplessness allowances granted to insured persons living in an institution are half these amounts.</p>	Severe	Sfr. 1,824.– per month	(80% of the maximum old-age pension amount)	Moderate	Sfr. 1,140.– per month	(50% of the maximum old-age pension amount)	Slight	Sfr. 456.– per month	(20% of the maximum old-age pension amount)
Severe	Sfr. 1,824.– per month	(80% of the maximum old-age pension amount)								
Moderate	Sfr. 1,140.– per month	(50% of the maximum old-age pension amount)								
Slight	Sfr. 456.– per month	(20% of the maximum old-age pension amount)								
Supplement for intense care	<p>Helplessness allowance for minor insured persons, who, moreover, need intense care, is increased by a supplement for intense care; this is not granted in case of stay in an institution. The monthly amount of this supplement is Sfr. 1,368.– if the need of care is of 8 hours a day at least, Sfr. 912.– if the need of care is of 6 hours a day at least and Sfr. 456.– if the need of care is of 4 hours a day at least. The supplement is calculated by day.</p>									

INCOME COMPENSATION ALLOWANCES IN CASE OF SERVICE AND IN CASE OF MATERNITY

LEGISLATION	The Federal Law on Income Compensation Allowances in case of Service and in case of Maternity of September 25, 1952 (LAPG) The Federal Law on General Provisions concerning Legislation on Social Insurances of October 6, 2000 (LPGA)
Beneficiaries	Persons serving in the Swiss army or in the Red Cross, persons carrying out a civilian service or a civil defence service, participants in the federal and cantonal courses for Youth and Sport instructors, as well as participants in the courses for shooting instructors, are entitled to an allowance in case of service for each service/course day. These persons are designated as "persons in service". Women who are engaged in paid employment are entitled to an allowance in case of maternity.
ALLOWANCES IN CASE OF SERVICE	
Types of allowances	
Basic allowance	Persons in service are entitled to the basic allowance.
Child allowance	Persons in service are entitled to a child allowance for each of their children under 18 (25 in case of studies or apprenticeship).
Child-care allowance	Persons in service who live in the same household as one or several children under 16 are entitled to a child-care allowance if they establish that supplementary costs for child-care are caused by a service period of at least 2 consecutive days.
Business allowance	Persons in service who run a company as owners, farmers or usufructuaries, or as associates in an ordinary partnership, or as responsible associates in a limited partnership, as well as, under certain conditions, persons in service who work in the family farm as their main activity are entitled to a business allowance.
Amounts	
Basic allowance	Persons not engaged in paid employment before the service: Sfr. 62.– per day. Persons engaged in paid employment: 80% of the average income received before the service (minimum: Sfr. 62.– per day, maximum: Sfr. 196.– per day).
Child allowance	Sfr. 20.– per day and for each child.
Child-care allowance	Only the effective costs are reimbursed, but at the most Sfr. 67.– per service day. The costs under Sfr. 20.– are not reimbursed.
Business allowance	Sfr. 67.– per day.
Total allowance	The total allowance consists of the basic allowance and the child allowances; it amounts to Sfr. 245.– per day at the most. The child-care allowance and the business allowance are added to the total allowance, without reduction.

INCOME COMPENSATION ALLOWANCES IN CASE OF SERVICE AND IN CASE OF MATERNITY (continued)

ALLOWANCE IN CASE OF MATERNITY	
Claim prerequisites	<ul style="list-style-type: none">- Be engaged in paid employment as an employee or a self-employed;- have been insured in the AVS on a compulsory basis for the 9 months preceding immediately the delivery (this period is reduced accordingly, when the delivery occurs before the end of the 9th month of pregnancy);- have worked during this period for at least 5 months.
Beginning of the right	The right begins on the day of delivery.
End of the right	The right ends on the 98 th day following the day the right began. It ends before this term if the mother takes up again a paid employment, whatever her occupation rate, or if she dies.
Amount	80% of the average income received before the entitlement to the allowance. The maximum amount of the allowance is Sfr. 196.– per day.

SUPPLEMENTARY BENEFITS TO THE FIRST PILLAR

LEGISLATION	The Federal Law on Supplementary Benefits to AVS/AI of October 6, 2006 (LPC) The Federal Law on General Provisions concerning Legislation on Social Insurances of October 6, 2000 (LPGA)
Purpose of the supplementary benefits	Article 112 of the Federal Constitution provides that the pensions of the old-age, survivors' and invalidity insurance (1 st pillar) must cover the basic needs of the old, survivors, and the disabled in an appropriate way. When the old-age, survivors' and invalidity insurance does not cover these basic needs, the Confederation and cantons must grant supplementary benefits (art. 112a of the Federal Constitution).
Nature of the supplementary benefits	The supplementary benefits are non-contributory, means tested benefits for the elderly, the survivors and the disabled persons. They consist of: a. the annual supplementary benefit, paid monthly b. the reimbursement of costs due to sickness and disability (up to a maximum amount).
Claim prerequisites	
Personal status	Generally speaking, supplementary benefits are additional to AVS/AI pensions; but in some cases they are paid regardless of entitlement to a pension. Beneficiaries must be domiciled and permanently resident in Switzerland. Foreign nationals may claim supplementary benefits only provided they have resided in Switzerland for 10 years without interruption immediately preceding the date on which they apply for the benefits (five years for refugees and stateless persons).
Income situation	The amount of supplementary benefits corresponds to the excess of the expenses of a person over and above his or her income. As the purpose is to cover basic needs, not all expenses incurred are taken into account, and the LPC includes an exhaustive list of such expenses. A distinction is made between those receiving supplementary benefits while residing in an institution and those who receive them while living at home. Income taken into account may include pensions, allowances and other periodic benefits, return on assets, the substance of assets owned, income from paid employment, family allowances and alimony, as well as resources and assets relinquished by their owners. Expenses taken into account for persons living at home include an amount covering the basic needs. These amounts are as follows: - for a single person, up to: Sfr. 18,720.– per year; - for a couple*, up to: Sfr. 28,080.– per year; - for the first and second child, each, up to: Sfr. 9,780.– per year; - for the third and fourth child, each, up to: Sfr. 6,520.– per year; - from the fifth child, each, up to: Sfr. 3,260.– per year.
Amounts	Annual supplementary benefits correspond to the excess of recognised expenses over the determining income.

* For its whole duration the registered same-sex partnership is treated as marriage.

OCCUPATIONAL BENEFIT PLANS CONCERNING OLD-AGE, SURVIVORS AND INVALIDITY (2nd pillar) (continued)

INSURANCE BENEFITS (continued)	
Old-age benefits	
Beginning of entitlement	Men at the age of 65 Women at the age of 64. – Early retirement is possible if the regulations of the provident institution allow for it (at 58 years old at the earliest). – The regulations of the provident institutions may establish an equal retirement age for men and women.
Types of benefit	Old-age pension: Calculated in % of the retirement assets (minimum conversion rate, at present 7% for men and 6.95% for women) which the insured person has accumulated on reaching retirement age. Capital benefits: When the pension is lower than 10% of the minimum 1st-pillar old-age pension, or if the regulations of the provident institution allow for it. The insured person may claim the payment of a quarter of his or her retirement assets as a capital benefit. Child's pension: Persons receiving an old-age pension are entitled to a child's pension for each child who would be entitled to an orphan's pension on the death of such persons. Its amount is equal to the one of the orphan's pension.
Survivors' benefits*	
Beginning of entitlement	On the death of the insured employed person (insurance clause), or at the beginning of the period of incapacity to work which led to death, or on the death of an old-age or invalidity pensioner.
Beneficiaries	– Surviving spouse who, on his or her spouse's death, must support at least one child, or has reached the age of 45 and has been married for at least five years. The surviving spouse who fulfils none of these conditions is entitled to a lump-sum benefit equal to three annual pensions. – Children of the deceased, including foster children. – The regulations of the provident institutions may appoint other beneficiaries of survivors' benefits, under certain conditions.
Types of benefit	Surviving spouse's pension: 60% of the full invalidity pension that the insured person would have received. Orphan's pension: 20% of the full invalidity pension that the insured person would have received, for each child. Capital benefits: When the surviving spouse's pension is lower than 6% (2% for orphans) of the minimum 1st-pillar old-age pension, or if the regulations of the provident institution allow for it.
End of entitlement	Surviving spouse's pension: On remarriage or death. Orphan's pension: At the age of 18 (at the age of 25 at the most in the case of apprenticeship or studies, or if the orphan is at least 70% disabled and is unable to engage in paid employment), or on death.

* For its whole duration the registered same-sex partnership is treated as marriage and its judicial dissolution as divorce; the surviving registered partner is treated as a surviving spouse.

OCCUPATIONAL BENEFIT PLANS CONCERNING OLD-AGE, SURVIVORS AND INVALIDITY (2nd pillar) (continued)

INSURANCE BENEFITS (continued)	
Invalidity benefits	
Beginning of entitlement	Persons who are disabled to the extent of at least 40% in the sense of the AI and who were insured when the incapacity to work which led to invalidity arose. Provident institutions have the right to use a wider definition of invalidity.
Types of benefit	<p>Invalidity pension: calculated on the basis of the same conversion rate applicable to old-age pensions, considering retirement assets the insured person accumulated at the time he or she became entitled to an invalidity pension and considering the total old-age credits for the years remaining up to the ordinary retirement age, without the interests. The old-age credits related to the remaining years are calculated on the coordinated salary of the insured person during his or her last year of insurance.</p> <ul style="list-style-type: none"> – Full pension: if the degree of invalidity is at least 70%; – Three-quarter pension: if the degree of invalidity is at least 60%; – Half pension: if the degree of invalidity is at least 50%; – Quarter pension: if the degree of invalidity is at least 40%. <p>Capital benefits: When the pension is lower than 10% of the minimum 1st-pillar old-age pension, or if the regulations of the institution allow for it.</p> <p>Child's pension: Persons receiving an invalidity pension are entitled to a child's pension for each child who would be entitled to an orphan's pension on the death of such persons. Its amount is equal to the one of the orphan's pension.</p>
REVALUATION	<ul style="list-style-type: none"> – Survivors' and invalidity pensions which have been running for more than three years are adjusted for the first time to the development of prices at the beginning of the calendar year which follows. Subsequent adjustments take place at the same time as adjustments to AVS pensions; – the other pensions are adjusted to the development of prices according to the financial possibilities of the provident institution.
OVER-INSURANCE	Invalidity and survivors' benefits may be reduced to the extent that, when added to other income to be taken into account (similar benefits), they exceed 90% of the annual income which it may be thought that the insured person is deprived of.

OCCUPATIONAL BENEFIT PLANS CONCERNING OLD-AGE, SURVIVORS AND INVALIDITY (2nd pillar) (continued)

VESTED BENEFITS	
Purpose	To insure continuation of the providence in the event of transfer from one provident institution to another and to avoid gaps in insurance cover.
Departure benefit	<p>On departure from a provident institution, before an insured event occurs, the insured person is entitled to a departure benefit.</p> <p>The insured person is also entitled to a departure benefit if, when leaving the provident institution, he/she has already reached the age at which he/she is entitled to take early retirement on condition that he/she continues to be in gainful employment or claim unemployment insurance.</p> <p>In a defined contribution plan, if the institution is a savings fund, this benefit corresponds to the amount of the savings; if it is an insurance institution, it corresponds to the actuarial reserve.</p> <p>In a defined benefit plan, it corresponds to the current value of acquired benefits.</p> <p>The minimum amount paid when leaving a provident institution is equivalent to the entry benefit of the insured person, interest included, plus the contributions paid during the insurance period, increased by 4% per year of age from the 20th year of age, up to 100% at the most (minus invalidity and death risk cover).</p> <p>The departure benefit is used on joining a new provident institution.</p> <p>In the event of non-use of the vested benefits (cessation of paid employment, for example), such benefit will be paid into a blocked bank account or converted in a blocked insurance policy.</p>
Divorce *	In case of divorce, the departure benefit acquired during the marriage is divided, in principle in half, between the husband and the wife.
Payment in cash	<p>The benefit may be paid in cash if:</p> <ul style="list-style-type: none"> – The rightful claimant leaves Switzerland permanently; – The rightful claimant becomes self-employed and is no longer subject to compulsory insurance; – The amount of the departure benefit is less than the annual sum of the insured person's contributions.
ENCOURAGEMENT OF HOME OWNERSHIP	
	<p>In order to finance a principal home property for his personal use or to amortise a mortgage on such home property, the insured person may:</p> <ul style="list-style-type: none"> – pledge his right to providence benefits – pledge a sum up to the amount of his vested benefits, on certain conditions – receive an advance payment, up to the amount of his vested benefits <p>However, restrictions exist for insured persons aged over 50. In the case of advance payment, providence benefits are consequently reduced.</p> <p>If such home property is sold, the insured person must in principle repay the amount to the provident institution.</p> <p>An advance payment is subject to taxation, the amount of which is reimbursed in the case of repayment to the institution.</p>

* For its whole duration the registered same-sex partnership is treated as marriage and its judicial dissolution as divorce.

LINKED INDIVIDUAL PROVIDENT MEASURES (3rd pillar a)

LEGISLATION	Article 82, para. 2, of the LPP and the Ordinance on Tax Relief Allowed for Contributions Paid to Recognised Providence Forms of November 13, 1985 (OPP 3)
Insured persons	Employed and self-employed persons, on an optional basis.
Requirements	<p>Payment, to a blocked bank account or to a blocked insurance policy, of contributions of an annual amount to be determined by the insured person. These contributions may be deducted from taxable income up to the limits mentioned on page 6 (employed persons: Sfr. 6,566.–; self-employed persons: Sfr. 32,832.–).</p> <p>These amounts are blocked until an insured event occurs.</p> <p>The insured person who continues to work after the ordinary retirement age may go on paying contributions to the 3rd pillar a, for 5 years at the most.</p>
Beneficiaries	The insured person and, in case of death, his or her direct heirs and, in the absence of such, persons appointed by him or her.
Payment of benefits	At the earliest, five years before the insured person reaches the age entitling him or her to a pension under the AVS. If the insured person continues to work after the ordinary retirement age, the payment can be deferred up to 5 years at the most.
Early payment	<ul style="list-style-type: none">– In case of invalidity, if the insured person is entitled to a full pension under the AI.– In order to repurchase contributions from a pension fund.– For the purchase by the insured person of his or her home property.– In case of definitive departure from Switzerland by the insured person.– For an insured person who becomes self-employed and is not subject to compulsory insurance.– When the amount of the departure benefit is lower than the annual contribution made by the insured person.

FAMILY ALLOWANCES

FAMILY ALLOWANCES IN AGRICULTURE	
LEGISLATION	The Federal Law on Family Allowances in Agriculture of June 20, 1952 (LFA) The Federal Law on General Provisions concerning Legislation on Social Insurances of October 6, 2000 (LPGA)
Beneficiaries	Agricultural workers and self-employed farmers.
Children giving entitlement to allowances	Children of married or unmarried parents; Adopted children; Children of a spouse * ; Foster children; Brothers, sisters and grandchildren of the entitled person, if he or she predominantly supports them.
Benefits	
Child allowance	In lowland regions: Sfr. 200.– per month per child. In mountain regions: Sfr. 220.– per month per child.
Vocational training allowance	In lowland regions: Sfr. 250.– per month per child. In mountain regions: Sfr. 270.– per month per child.
Household allowance	Sfr. 100.– per month, for agricultural workers only.
Age limit	
Child allowance	16 year; 20 years for children unable to engage in paid employment.
Vocational training allowance	25 years.

* For its whole duration the registered same-sex partnership is treated as marriage.

FAMILY ALLOWANCES (continued)

FAMILY ALLOWANCES EXCLUDING AGRICULTURE	
LEGISLATION	The Federal Law on Family Allowances of March 24, 2006 (LAFam) The Federal Law on General Provisions concerning Legislation on Social Insurances of October 6, 2000 (LPGA) 26 cantonal legislations
Beneficiaries	Employees; Persons not engaged in paid employment whose income does not exceed Sfr. 41,040 per year; in accordance with LAFam cantons may extend the circle of beneficiaries in this case. The self-employed do not come within the scope of LAFam; 13 cantons (Appenzell Outer Rhodes, Berne, Basle Rural, Basle City, Geneva, Glarus, Lucerne, Nidwalden, St. Gall, Schaffhausen, Schwyz, Valais et Vaud) have a scheme for them.
Children giving entitlement to allowances	Children of married or unmarried parents; Adopted children; Children of a spouse*; Foster children; Brothers, sisters and grandchildren of the entitled person, if he or she predominantly supports them.
Benefits	
Child allowance	At least Sfr. 200.– per month per child.
Vocational training allowance	At least Sfr. 250.– per month per child. In accordance with LAFam cantons may provide higher allowances.
Birth/adoption allowance	Nine cantons (Fribourg, Geneva, Jura, Lucerne, Neuchâtel, Schwyz, Uri, Vaud and Valais) grant birth allowances which vary between Sfr. 850.– and Sfr. 2,000.– per birth, depending on the canton (in two cantons, the amount is higher in the case of multiple birth or from the third child on). Eight of these cantons (Fribourg, Geneva, Jura, Lucerne, Neuchâtel, Uri, Vaud and Valais) also grant adoption allowances for the child placed to be adopted; the amount of this allowance is equal to that of a birth allowance.
Age limit	
Child allowance	16 year; 20 years for children unable to engage in paid employment.
Vocational training allowance	25 years.

* For its whole duration the registered same-sex partnership is treated as marriage.

UNEMPLOYMENT INSURANCE

LEGISLATION	The Federal Law on Compulsory Unemployment Insurance and Allowances in case of Insolvency of June 25, 1982 (LACI) The Federal Law on General Provisions concerning Legislation on Social Insurances of October 6, 2000 (LPGA)
Definitions	
Total unemployment	Not being under work contract and seeking a full-time job.
Partial unemployment	<ul style="list-style-type: none"> - Not being under work contract and seeking a part-time job or - having a part-time job and seeking to replace it with a full-time job or to supplement it with another part-time job.
Insured persons	Employees subject to compulsory insurance under the LAVS (p. 17) up to the age giving entitlement to an AVS old-age pension and who do not receive an early AVS old-age pension.
Benefits	Unemployment allowance, reduced working hours allowance, bad weather allowance, allowance in case of insolvency of the employer. Financial benefits for active labour market programmes.
UNEMPLOYMENT ALLOWANCE	
Reference periods	
- for allowances	<p>2 years, per case of unemployment; it begins on the first day where all claim prerequisites of the allowance are fulfilled.</p> <p>Extension of 2 years for:</p> <ul style="list-style-type: none"> - insured persons who have started a self-employed activity without the help of the unemployment insurance, under certain conditions; - insured persons who have raised their child, under certain conditions; - Insured persons who have become unemployed in the 4 years preceding the age giving entitlement to an AVS old-age pension and who are very difficult to recruit.
- for contributions	<p>2 years, per case of unemployment; it begins 2 years before the reference period for allowances.</p> <p>Extension of:</p> <ul style="list-style-type: none"> - 2 years at the maximum, for insured persons who have started a self-employed activity without the help of the unemployment insurance, under certain conditions; - 4 years for insured persons who have raised their child, under certain conditions.

UNEMPLOYMENT INSURANCE (continued)

UNEMPLOYMENT ALLOWANCE (continued)	
Claim prerequisites	<p>The insured person must:</p> <ul style="list-style-type: none"> - be unemployed or partly unemployed; - be subject to a job loss of at least two consecutive days, together with a loss of salary; - be domiciled in Switzerland; - have completed compulsory schooling; - neither have reached the age giving entitlement to an AVS old-age pension nor receive such a pension; - comply with the conditions concerning the contribution period or be exempted from this requirement; - be available for recruitment; - comply with the control requirements.
Qualifying period	<p>12 months within the reference period for contributions.</p> <p>Certain persons are exempted from the contribution period conditions (persons who have not been able to be under work contract because of training, illness, accident, detention, etc.).</p>
Form	<p>Unemployment allowance is granted as a daily allowance (5 allowances a week).</p>
Duration of payment	
General waiting period	<p>5 days.</p>
Special waiting period	<p>In addition to the general waiting period:</p> <ul style="list-style-type: none"> - 120 days for persons under 25 years exempted from the contribution period conditions, who have no dependant children and who have not completed any occupational training; - 5 days for the other persons exempted from the contribution period conditions; - 1 day for the insured persons coming to the end of a seasonal job or a profession in which changes of employer are frequent or working relationships last for a limited period.
Number of allowances	<p>Within the reference period for allowances, maximum:</p> <ul style="list-style-type: none"> - 400 daily allowances if the insured person proves a contribution period of 12 months at least; - 520 daily allowances as from 55 years if the insured person proves a contribution period of 18 months at least; - 520 daily allowances if the insured person receives a pension of the AI or the compulsory accident insurance and if he or she proves a contribution period of 18 months at least; - 260 daily allowances for persons exempted from the contribution period conditions. <p>Insured persons who have become unemployed in the 4 years preceding the age giving entitlement to an AVS old-age pension and who are very difficult to recruit are entitled to 120 supplementary daily allowances at the most.</p> <p>The government can increase up to 520 the maximum number of daily allowances during a maximum of 6 months in the cantons where there is a high unemployment rate, if the cantons ask for it and if they contribute to the costs at the rate of 20%.</p>

UNEMPLOYMENT INSURANCE (continued)

UNEMPLOYMENT ALLOWANCE (continued)	
Calculation of allowances	
Insured salary	Salary received as a general rule during the last 6 months of contribution before payment of allowances. Maximum: Sfr. 10,500.– per month. Special rules apply to persons exempted from the contribution period conditions (fixed amounts).
Amount	80% of the insured salary. 70% of the insured salary for insured persons who: <ul style="list-style-type: none"> - have no child maintenance and - receive a full daily allowance of more than Sfr. 140.– and - are not disabled.
Sanction	Entitlement of the insured person to allowances is suspended if he or she: <ul style="list-style-type: none"> - is without work through his or her own fault; - has renounced, at the expense of the insurance, exercising his or her salary claims towards his or her last employer; - does not do all that can be reasonably expected to find a suitable job; - does not observe the unemployment control prescriptions or the instructions of the relevant authority, in particular, refuses a suitable job, does not take part in an active labour market programme, interrupts it without any legitimate motivation, jeopardizes or prevents the course of the programme or the realization of its goal; - has given false or incomplete information or has infringed the obligation to provide information spontaneously or on request and to announce himself or herself; - has unduly obtained or attempted to obtain the benefit; - has received daily allowances during the working-out stage of a project but does not start the self-employed activity after the working-out stage through his or her own fault.
Period of suspension	1 to 15 days in the event of a minor infringement; 16 to 30 days in the event of a medium infringement; 31 to 60 days in the event of a serious infringement.

UNEMPLOYMENT INSURANCE (continued)

REDUCED WORKING HOURS ALLOWANCE	
Claim prerequisites	<ul style="list-style-type: none">- The insured person is subject to an unavoidable loss of work due to economic factors and of at least 10% of the total usual working hours of the company;- no leave has been given;- the reduction in working hours is probably temporary and should allow to keep the jobs concerned.
Duration of payment	12 accounting periods at the most (1 accounting period = 1 month) over a 2-year period. The 2-year period begins on the first day of the first accounting period for which the allowance is granted. 4 accounting periods for loss of work greater than 85% of the usual working hours of the company.
Waiting period	3 days for each accounting period.
Amount	80% of the last salary (maximum: Sfr. 10,500.– per month) before the beginning of the reduction in working hours.
BAD WEATHER ALLOWANCE	
Claim prerequisites	<ul style="list-style-type: none">- The insured person is subject to loss of work declared by the employer, which is exclusively due to meteorological conditions;- continuing to work is technically impossible despite adequate protection measures, gives rise to disproportionate costs or cannot be required from employees.
Duration of payment	6 accounting periods at the most (1 accounting period = 1 month) over a 2-year period.
Waiting period	3 days for each accounting period.
Amount	80% of the last salary (maximum: Sfr. 10,500.– per month) before the beginning of the loss of work.

UNEMPLOYMENT INSURANCE (continued)

ALLOWANCE IN CASE OF INSOLVENCY OF THE EMPLOYER	
Claim prerequisites	The insured person must: <ul style="list-style-type: none"> - have salary claims towards his or her employer when a bankruptcy procedure is opened against the latter; - make a seizure request for salary claim against his or her employer.
Request for allowance	The insured person must claim the allowance within a period of 60 days from the date of the publication of the bankruptcy of the employer or, in case of seizure of the employer, within a period of 60 days from the execution of the seizure. When these deadlines expire, the right to allowance ends.
Amount	100% of effective salary claims (maximum: Sfr. 10,500.– per month) for a maximum of 4 months.
ACTIVE LABOUR MARKET PROGRAMMES	
Principles	Unemployment insurance grants financial benefits for active labour market programmes. Active labour market programmes aim at facilitating the occupational integration of insured persons whose recruitment is difficult because of the state of the labour market.
Programmes	Educational programmes (individual or collective retraining, improvement or integration courses, participation in training companies and training courses), employment programmes (programmes of temporary employment, occupational trainings, motivation semesters), specific measures (induction allowances, training allowances, support to insured persons who start a self-employed activity).