

# Your social security rights in France



Social Europe



European Commission



The information provided in this guide has been drafted and updated in close collaboration with the national correspondents of the Mutual Information System on Social Protection (MISSOC). More information on the MISSOC network is available at: <http://ec.europa.eu/social/main.jsp?langId=en&catId=815>

This guide provides a general description of the social security arrangements in the respective countries. Further information can be obtained through other MISSOC publications, all available at the abovementioned link. You may also contact the competent authorities and institutions listed in Annex I to this guide.

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## Chapter I: Introduction, organisation and financing

### Introduction

The French social security system has five main components:

- the general scheme, covering the majority of employees and other categories of people (students, recipients of certain benefits, residents) who, over the years, have joined it;
- the special employee schemes, some of which cover all risks and others covering only old age pension insurance (nationals covered under the general scheme for the other risks);
- the agricultural scheme which covers all risks but in two separate streams: farmers and agricultural workers;
- the schemes for non-agricultural self-employed persons: three independent old age pension schemes (craft trade workers, traders and manufacturers and the professions) and a sickness insurance scheme;
- the unemployment schemes and the mandatory supplementary pension schemes.

The general scheme itself has four branches:

- the sickness, maternity, invalidity and death branch;
- the accidents at work and occupational diseases branch;
- the old age pension branch;
- the family branch.

Apart from that, supplementary collective schemes exist, both compulsory and voluntary in nature. These schemes are specific to professions (companies or sectors), and they mainly cover old age pension, sickness or invalidity insurance.

Individuals may take out private insurance to supplement these schemes.

### How to join the insurance scheme

If you work for an employer, they will complete the formalities necessary for you to join the social security, unemployment insurance and supplementary pension schemes. If you are self-employed you must complete the declaration formalities yourself.

### Appeals

In case of dispute with the insurance fund (*caisse*), you may appeal to the appeals board (*commission de recours amiable (CRA)*) of your insurance fund. The appeal must be lodged within two months, starting from the notification of the decision you disagree with. If the appeals board rejects your application, you can bring the case before the Social Security Court (*tribunal des affaires de la sécurité sociale*) within two months. If you do not appeal within that period, the decision of your fund's appeals board is final.

### Organisation of social protection

The schemes mentioned above come within the responsibility of the ministries competent for social security, agriculture, labour and budget.

The National Sickness Insurance Fund for Employees (*Caisse nationale d'assurance maladie des travailleurs salariés (CNAMTS)*) manages the first two branches listed above in different ways, as follows. At a local level, and under the supervision of the CNAMTS, there



are two types of bodies which are not linked hierarchically: the funds for pension insurance and health at work (*caisses d'assurance retraite et de la santé au travail (CARSAT)*) and the primary sickness insurance funds.

The old age pension branch is managed by the National Old-Age Insurance Fund (*Caisse nationale d'assurance vieillesse (CNAV)*), which has delegated some of its functions to the funds for pension insurance and health at work (*caisses d'assurance retraite et de la santé au travail (CARSAT)*).

The family branch is managed by the National Family Benefit Fund (*Caisse nationale des allocations familiales (CNAF)*), which supervises family benefit funds.

Contributions are collected at a local level by the Social Security and Family Benefit Contribution Collection Offices (*URSSAF*). These are supervised by the Central Agency for Social Security Bodies (*Agence centrale des organismes de sécurité sociale (ACOSS)*), whose task is to monitor the cash flow for each branch in terms of allocations and actual spending shown in the accounts.

The agreement-based unemployment insurance scheme is managed by the National Union for employment in Industry and Trade (*Union nationale pour l'emploi dans l'industrie et le commerce (Unedic)*), which delegates the payment of benefits to the Employment Service (*Pôle emploi*) and the collection of contributions to the *URSSAF*.

In addition to the basic old-age pension insurance, there are mandatory supplementary pay-as-you-go schemes for employees, i.e. the agreement-based schemes provided by the Association for the Supplementary Retirement Schemes for Employed Persons (*Association des régimes de retraite complémentaire des salariés (ARRCO)*) and the General Association of Pension Institutions for Managerial Staff (*Association générale des institutions de retraite des cadres (AGIRC)*). The mandatory basic and supplementary pension schemes for the self-employed are managed by different funds, notably the Social Protection Scheme for the Self-employed (*Régime social des indépendants (RSI)*), the Agricultural Social Insurance Mutual Benefit Fund (*Mutualité sociale agricole (MSA)*) and the National Old-Age Insurance Fund for the liberal professions (*Assurance vieillesse des professions libérales (CNAVPL)*).

## Financing

The social security system is financed from national insurance contributions paid by employers and employees and from general tax revenue.

## Contributions

You have to pay social security contributions calculated as a certain percentage of your earnings. Your employer deducts these contributions from your earnings and pays them to the competent authority in charge of collecting them. If you are self-employed, you yourself pay the contributions which are calculated on your professional income.

## Your right to social security benefits when moving within Europe

Social security systems in European countries are different, which is why EU provisions have been designed to coordinate them. Common rules ensuring access to social benefits are important to avoid European workers and other insured persons being put at a disadvantage when exercising their right of free movement. These rules are based on four principles.



- When moving within Europe, you are always insured under the legislation of one single Member State: generally, if you are active, it will be the country where you work; if you are inactive, the country where you reside.
- The principle of equal treatment ensures that you have the same rights and obligations as nationals of the country where you are insured.
- When necessary, periods of insurance acquired in other EU countries can be taken into account towards the award of a benefit.
- Cash benefits can be "exported" if you live in a country other than the one where you are insured.

You can rely on the EU provisions on social security coordination in the 27 EU Member States, Norway, Iceland, Liechtenstein (EEA) and Switzerland (31 countries altogether).

Some general information on the EU provisions is provided at the end of each chapter. Further information about the coordination of social security rights when moving or travelling in the EU, Iceland, Liechtenstein, Norway or Switzerland can be found at: <http://ec.europa.eu/social-security-coordination>.



## Chapter II: Healthcare

### When are you entitled to healthcare?

Persons exercising a professional activity (employed or self-employed), or those resident on French territory on a continuous and legal basis, and their dependents, are entitled to healthcare.

#### Eligibility criteria

Entitlement is established first and foremost on professional or similar criteria. It is subject to the following prerequisites: quotas for hours worked or amounts of contributions. Those ceasing to fulfil the conditions for obtaining cover under a social security scheme as an insured person or as a beneficiary remain entitled to receive benefits in kind under their previous scheme for one year, until they once more fulfil the conditions for obtaining cover under a compulsory scheme.

Other persons, who are members of the general scheme on the basis of their residence, may have to pay the special *CMU* contribution, depending on their level of income.

For healthcare, the general scheme covers 85% of persons employed in the private sector, civil servants and persons resident in France on a continuous and legal basis, and who are not protected by any cover elsewhere. The benefits in kind available to nationals under the agricultural scheme and the scheme for non-agricultural self-employed persons are on a par with the benefits available under the general scheme.

### What is covered?

You and your dependants (spouse, children under 20 years of age, partner, dependant living in the insured person's home) are entitled to reimbursement of healthcare costs.

The various basic schemes cover approximately 75% of household medical expenses.

A certain share of the cost remains at the expense of the patient, i.e. the co-payment ("*ticket modérateur*"), although a patient can be exempt from this in a number of cases, especially for certain diseases listed as requiring prolonged treatment and particularly costly therapy. This patient contribution will be higher if they do not follow the so-called 'patient pathway' (*parcours de soins*).

In addition to this co-payment, a number of charges are borne by the patient, specifically: the flat-rate co-payment for serious medical intervention (*forfait actes lourds*); the flat-rate co-payment per each medical intervention (*participation forfaitaire sur les actes médicaux*) and the medical excess (*franchise médicale*) on drugs, paramedical intervention and medical transports.

#### Supplementary cover

If you do not have a collective supplementary insurance via your employer/company, you may opt to take out supplementary insurance with a mutual fund, a welfare institution or an insurance company in order to cover fully or partially the proportion of healthcare costs which are not reimbursed by the compulsory scheme.

If you have limited means, you can benefit from free supplementary universal health coverage (*couverture maladie universelle complémentaire*), which will enable you to be



fully covered without up-front payments. Finally, if your means only slightly exceed the entitlement ceiling to such supplementary universal health coverage, you may receive support to partially finance supplementary coverage.

### **How is healthcare accessed?**

Each patient over 16 years of age must choose a treating physician to oversee their care and coordinate their personal medical file. These measures do not apply to children. The treating physician may be a GP or a specialist; they need merely to accept the role. It is possible to change your treating physician simply by informing the sickness insurance fund of this in writing.

The treating physician updates the medical file and is responsible for prescribing additional medical examinations or making referrals to another physician – the liaison physician – or to a hospital department, or to another healthcare professional (physiotherapist, nurse etc.). If medical procedures are carried out or recommended by the treating physician, they will be reimbursed at the normal rate, as you are receiving coordinated care.

However, if you have not notified a treating physician, or if you consult a specialist directly, you will be reimbursed at a lower rate and the amount of costs you will have to pay will be higher than if you had been referred by the treating physician.

Nevertheless, in the event of a medical emergency, the absence of your treating physician or their replacement, or if you are away from home, you may consult a physician other than your treating physician. Finally, gynaecologists, ophthalmologists and psychiatrists may be consulted directly without being referred by the treating physician. In each case the physician consulted will specify your particular situation on your treatment form.

### **Payment of benefits**

You pay the health professional's fees and present your card (*Carte Vitale®*), which is a card with a chip in it which proves your entitlement to benefits. It is issued to everyone over 16 years of age and contains all the administrative information necessary for the reimbursement of treatment costs.

This enables the treatment forms to be drawn up electronically and sent directly by data transmission to your sickness insurance fund. This procedure speeds up the reimbursement process. If the health professional has no equipment for reading the card, they will produce a treatment form in paper format which you then forward to your sickness insurance fund.

Your sickness insurance fund will reimburse the fees at the approved rate. Some special procedures or treatments require the prior agreement of the sickness insurance fund. The health professional will inform you if you need to obtain prior approval.

Pharmaceutical products must be prescribed by the physician. It is also possible to have part of the cost (pharmaceutical direct settlement) paid directly by the fund by presenting your card. In that case, all you pay to the dispensing chemist is that part of the cost not covered by your sickness insurance fund.

### **Hospital treatment**

You may be hospitalised in an establishment of your choice, but if this is an approved private establishment which is not regulated by agreement, you will have to pay all fees in the first instance. Your insurance fund can provide you with further information.



If 100% of the hospital fees are met, you will also have to pay a fixed amount for each day you spend in a hospital or medico-social institution (*forfait journalier*). However, certain categories of persons are exempt from paying this fixed amount, and these include pregnant women during the four last months of their pregnancy, newborn babies, disabled children, disabled young people who attend specialist institutions for professional training or education, persons treated following accidents at work or occupational diseases and beneficiaries of the universal health coverage.

### **Your right to healthcare benefits when moving within Europe**

If you are staying or residing in another country of the European Union, Iceland, Liechtenstein, Norway or Switzerland, you and your family may benefit from the public healthcare services provided there. This does not necessarily mean that treatment will be free of charge; it depends on the national rules.

If you are planning a temporary stay (holidays, business trip, etc.) in another EU country, Iceland, Liechtenstein, Norway or Switzerland, apply for a European Health Insurance Card (EHIC) before leaving. Further information about the EHIC and how to apply for one is available at: <http://ehic.europa.eu>.

If you are planning to move permanently to another EU country, further information on your rights regarding healthcare is available at <http://ec.europa.eu/social-security-coordination>.



## Chapter III: Sickness cash benefits

### When are you entitled to sickness cash benefits?

Sickness cash benefits (daily allowances) are granted to those who are medically certified to be incapable of exercising a professional activity. The allowances are equal to a percentage of the pay which is lost.

Everyone in employment is entitled to a daily allowance during a period of incapacity for work owing to sickness as from the fourth day of absence from work. Unemployed people on benefit may also claim a daily allowance. If you lose your social insurance cover, your entitlement to sickness insurance cash benefits will be maintained for a period of one year, provided you are not covered by another compulsory scheme.

Craft trade workers, traders and manufacturers are also entitled to receive a daily allowance in the event of sickness, with the benefits granted to them differing slightly from those granted to employed persons.

### Eligibility criteria

The daily allowance is paid subject to the payment of contributions or a minimum period of activity. In order to receive the daily allowance, you may be required to undergo medical checks arranged by your fund.

### What is covered?

The daily allowance corresponds to a percentage (50 or 66.66% in case of beneficiaries with three children as of the 31<sup>st</sup> day after having ceased work) of your previous income (daily earnings), taking into account certain ceilings.

### How are sickness cash benefits accessed?

If you stop working (initial illness or extension of stoppage), you must:

- fill in the form issued by the physician and
- within 48 hours you must send the first two pages of the document to your sickness insurance fund and the third page to your employer if you are employed.

### Supplementary cover

If you do not have a collective supplementary insurance via your employer/company, you may opt to take out supplementary insurance with a mutual fund, a welfare institution or an insurance company in order to supplement the amount of daily allowance provided by the compulsory scheme.

### Your right to sickness cash benefits when moving within Europe

As a general rule, sickness benefits in cash (i.e. benefits normally intended to replace an income which is suspended due to sickness) are always paid according to the legislation of the country where you are insured, regardless of where you are residing or staying.\*

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\* Some special non-contributory cash benefits are provided exclusively in the country in which the beneficiary resides and are therefore not "exportable". These benefits are listed in the Annex II provided at the end of this guide.



When moving to another country of the European Union, Iceland, Liechtenstein, Norway or Switzerland, whenever certain conditions have to be fulfilled in order to become entitled to sickness benefits, the competent institution (i.e. institution in the country in which you are insured) must take account of periods of insurance, residence or employment that you have completed under the legislation of any of the above-mentioned countries. This thus guarantees that people will not lose their sickness insurance coverage when changing employment and moving to another state.

Further information about the coordination of social security rights when moving or travelling can be found at <http://ec.europa.eu/social-security-coordination>.



## Chapter IV: Maternity and paternity benefits

### When are you entitled to maternity or paternity benefits?

You (or the insured person whose insurance covers you as well) must have been insured for at least 10 months before the expected date of confinement and you must produce evidence that the eligibility criteria for reimbursement of healthcare costs and the daily allowance under the sickness insurance were fulfilled on the presumed date of conception or when commencing prenatal leave.

### What is covered?

Maternity insurance covers all costs linked to the pregnancy and confinement and provides cash benefits during the mother's pre- and post-natal leave, the mother's or father's adoption leave and the father's paternity leave.

Maternity insurance covers all costs relating to the pregnancy, without application of a patient contribution (*ticket modérateur*). The benefits granted to agricultural and non-agricultural self-employed persons are identical to those granted under the general scheme.

### Healthcare

You are entitled to cover at 100% of the costs relating to the pregnancy, confinement and their consequences, i.e.: medical, pharmaceutical and hospitalisation expenses, the cost of examinations prescribed as part of the medical supervision of the pregnancy, and the consequences of the pregnancy (compulsory pre- and post-natal examinations).

### Daily allowance

Cash benefits are granted if you have ceased all employment. The mother is obliged to take at least eight weeks of leave, and she is entitled to 16 weeks (in principle six weeks before the confinement and ten weeks after) and, as of the third child, to 26 weeks. In the case of adoption, the leave can be shared between the father and the mother.

The period of paternity leave is set at 11 consecutive days or 18 consecutive days in the event of a multiple birth.

The period of adoption leave is set at ten weeks or 22 weeks in the event of multiple adoption.

The daily allowance amounts to average daily earnings for the preceding three months, subject to the social security ceiling. The amount of the daily allowance shall not be below a certain minimum. Compulsory statutory and agreement-based contributions and the general social contribution are deducted.

Agricultural and non-agricultural self-employed workers may also claim cash benefits in respect of maternity or paternity. These are fixed-rate allowances or daily allowances.

For all formalities and documents required, please consult your sickness insurance fund and family allowance fund. You must also consult these bodies before you travel or move to another Member State.



## How are maternity and paternity benefits accessed?

To obtain cash maternity benefits you have to inform your sickness insurance fund on the basis of a medical form delivered by your doctor stating that you are pregnant.

## Your right to maternity and paternity benefits when moving within Europe

The coordination provisions cover maternity and equivalent paternity benefits. Whenever certain conditions have to be fulfilled in order to become entitled to benefits, the competent institution (i.e. institution in the country in which you are insured) must take account of periods of insurance, residence or employment completed under the legislation of another country of the European Union, Iceland, Liechtenstein, Norway or Switzerland.

As a general rule, benefits in cash (i.e. benefits intended to replace suspended income) are always paid according to the legislation of the country where you are insured, regardless of where you are residing or staying\*. Benefits in kind (i.e. medical care, medicines and hospitalisation) are provided according to the legislation of your country of residence as if you were insured there.

Further information about the coordination of social security rights when moving or travelling can be found at <http://ec.europa.eu/social-security-coordination>.

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\* Some special non-contributory cash benefits are provided exclusively in the country in which the beneficiary resides and are therefore not "exportable". These benefits are listed in the Annex II provided at the end of this guide.



## Chapter V: Invalidity benefits

### When are you entitled to invalidity benefits?

Anyone who is insured under the social security scheme, who is under 60 years of age, whose capacity to work is reduced by 2/3, who has been insured for at least 12 months and who provides proof of paid employment, is entitled to invalidity benefits.

### What is covered?

If you are able to pursue gainful employment, your pension will amount to 30% of your ten best years' average annual earnings, divided by ten if there were ten (or less if there were not), subject to a fixed maximum. If you are unable to pursue gainful employment, your pension will amount to 50% of your salary as determined above, subject to a fixed maximum. If you need assistance from a third party to perform everyday tasks, your pension will be increased.

### Healthcare

If you receive an invalidity pension, you are entitled to reimbursement of healthcare costs for yourself and members of your family in the event of sickness and maternity. For yourself, these reimbursements will be made at 100% of the approved rate.

### How are invalidity benefits accessed?

Applications for an invalidity pension should be made to the primary sickness insurance fund for your area, or the regional sickness insurance fund for the Ile de France region if you live in the Paris region.

### Supplementary cover

If you do not have a collective supplementary insurance via your employer/company, you may opt to take out supplementary insurance with a mutual fund, a welfare institution or an insurance company in order to supplement the amount of invalidity pension provided by the compulsory scheme.

### Your right to invalidity benefits when moving within Europe

The competent institution of the country where you claim an invalidity pension will take account of periods of insurance or residence completed under the legislation of any other EU country, Iceland, Liechtenstein, Norway or Switzerland, if this is necessary for entitlement to invalidity benefits.

Invalidity benefits will be paid regardless of where you reside or stay in the European Union, Iceland, Liechtenstein, Norway or Switzerland.\* Necessary administrative checks and medical examinations will normally be carried out by the competent institution in the country where you reside. Under some circumstances, you may be required to return to the country which is paying your pension for such examinations, if your state of health allows you to do so.

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Each country applies its national criteria when determining degree of invalidity. Therefore, it may be the case that certain countries will consider a person to have a degree of invalidity of 70%, while others will not consider the same person to be invalid at all under their legislation. This is a result of the fact that the national social security systems are not harmonised, but only coordinated by the EU provisions.

Further information about the coordination of social security rights when moving or travelling can be found at <http://ec.europa.eu/social-security-coordination>.



## Chapter VI: Old-age pensions and benefits

### When are you entitled to old-age benefits?

The old-age pension insurance applies to persons employed in the private sector who receive a basic benefit under the general scheme or the agricultural scheme and a supplementary benefit paid by the institutions forming part of the AGIRC and ARRCO. Membership of the supplementary scheme is compulsory.

Self-employed persons also benefit from compulsory basic and supplementary schemes. Basic pensions paid under the schemes for craftsmen, retailers and manufacturers and for farmers, are on a par with those under the general scheme.

To obtain a full pension you have to complete a minimum insurance period and to fulfil an age condition: the latter increases gradually from 60 to 62 (in 2018) and, if the condition relating to the insurance period is not fulfilled, from 65 to 67 (in 2023).

Entitlement starts as soon as the contributions paid are enough to ensure the approval of at least one quarter's insurance. One quarter's insurance is reached when the insured has remuneration equal to the amount of 200 hours of the minimum wage.

In the supplementary pension systems, the same rules apply regarding retirement age. However, there is no minimum insurance period.

### What is covered?

The old-age pension is calculated on the basis of three factors: the average annual earnings (25 highest earning years), the pension rate (between 27.5% and 50%) and the contribution record in the scheme.

The average annual earnings are calculated on the basis of the 25 highest earning years for the insured person born after 1947.

From 60 to 62, to receive your old-age pension at the full rate (50%), you must have accumulated between 160 and 165 quarters in one or more basic retirement schemes (160 quarters for insured persons born before 1949; 165 for insured persons born in 1954). The 50% pension rate is awarded automatically, regardless of the insurance period, when the insured person reaches the age of 65 to 67.

If you continue working while fulfilling the age and insurance-period conditions for entitlement to a full pension, your basic old-age pension will be increased (with a bonus) according to the number of additional quarters of work.

The amount of the supplementary pension is calculated based on a system of points. The number of points acquired in the relevant scheme(s) is multiplied by the value of the point as fixed by AGIRC and ARRCO. The age at which the pension is paid follows that of the basic system.

### Minimum and maximum amount of pension

Every insured person whose pension is calculated at the full rate receives a minimum amount of pension, known as the *minimum contributif*. However, where the pension is calculated at the full rate but on the basis of a contribution record to the scheme which is less than the number of quarters required for the person's age, the minimum pension is



calculated on a pro-rata basis on the actual time for which the person was insured under the general scheme.

The pension payable may not exceed a maximum amount fixed at half of the highest wage or salary for which contributions are due.

Under certain conditions, pension increases are granted if:

- the pensioner has had or raised three or more children;
- he or she has carried out an activity while being disabled;
- before a certain age, the pensioner requires assistance from another person for the performance of everyday activities.

### How are old-age benefits accessed?

Applications for old-age pensions must be sent to the fund for pension insurance and health at work (CARSAT) for your area or to the National Old-age Insurance Fund (CNAV) if you live in the Paris region.

For persons insured under a scheme other than the general scheme, see the addresses given in [Annex I](#).

If you live in France at the time you submit your application for a retirement pension to the basic fund, you must also contact the last supplementary retirement pension fund of which you were a member.

The pension will not start before the first day of the month after the application is made.

### Your right to old-age benefits when moving within Europe

The EU provisions for old-age pensions exclusively concern state pension schemes and not company, occupational or private ones. They guarantee that:

- In each EU country (plus Iceland, Liechtenstein, Norway and Switzerland) where you have been insured, your insurance record is preserved until you reach the pensionable age in that country.
- Every EU country (plus Iceland, Liechtenstein, Norway and Switzerland) where you have been insured will have to pay an old-age pension when you reach the pensionable age. The amount you will receive from each of the Member States will depend on the length of your insurance coverage in each state.
- Your pension will be paid wherever you reside in the EU (plus Iceland, Liechtenstein, Norway and Switzerland).\*

You should submit your claim to the pension insurance institution of the EU country (or Iceland, Liechtenstein, Norway or Switzerland) in which you live, unless you have never worked there. If this is the case, you should apply to the country where you last worked.

Further information about the coordination of social security rights when moving or travelling can be found at <http://ec.europa.eu/social-security-coordination>.

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## Chapter VII: Survivors' benefits

### When are you entitled to survivors' benefits?

Under the general scheme and related schemes, the survivor's pension is paid to the surviving spouse aged 55 or more (the actual survivor's pension, *pension de réversion*), or under 55 (the invalidity pension for widow/er, *pension de veuf ou de veuve invalide*). Under some special schemes and supplementary schemes, orphans may, subject to certain conditions, claim an orphan benefit.

A means-tested survivors' pension is awarded to the surviving spouse or divorced ex-spouse aged 55 or more (51 if the insured person died prior to 1/1/2009).

Under the supplementary schemes ARRCO (for employees) and AGIRC (for management staff), survivors' benefits are payable to a non remarried widow(er) who is aged at least 55 (ARRCO) or 60 (AGIRC). No age condition applies if the widow(er) is an invalid or has two dependent children.

### Death grant

Death insurance provides for a lump-sum payment, under certain conditions, to persons who were completely and permanently dependent upon the insured person at the time of death. If no priority is invoked within a month, the death grant is paid to the surviving spouse or the partner under a civil solidarity pact or, failing that, to the descendants, or ascendants or to any person dependent on the insured person (partner, cohabitant etc.).

### What is covered?

The amount of the basic pension is equal to 54% of the deceased spouse's old-age pension. It is means-tested and may, subject to certain limits, be paid in addition to personal old-age or invalidity benefits. If the widow(er) is divorced, the pension is divided in proportion to the years of marriage.

The invalidity pension for widow/er is awarded to a surviving spouse below the age of 55 who suffers from invalidity reducing his/her working or earning capacity by 66.66%. The deceased insured person should have been in receipt of, or entitled to, an old-age or invalidity pension at the time of his/her death.

A supplement corresponding to a lump sum per child is added to the widow's or widower's pension when the surviving spouse has at least one dependent child under 16. A 10% increase of the pension is paid when the beneficiary has had or brought up at least three children during nine years before their 16th birthday.

The widow's/widower's allowance guarantees, subject to certain conditions, that the surviving spouse of a deceased insured person receives a temporary allowance enabling them to integrate or reintegrate into working life. It is paid for a maximum of two years to all persons aged under 55 with limited personal resources.

Under the supplementary schemes ARRCO and AGIRC, the survivors' pensions amount to 60% of the pension of the deceased spouse. In case of divorce, the pension is divided between the surviving spouses who did not remarry, in proportion to the years of marriage.

### Death grant



The death grant amounts to 90 times the insured person's basic daily wage or salary, determined in the same way as for the sickness insurance benefit. It may not be less than 1% of the annual social security ceiling and may not exceed one quarter of that ceiling. Further information may be obtained from your sickness insurance fund.

### **How are survivors' benefits accessed?**

Applications for survivors' pensions must be sent to the fund for pension insurance and health at work (CARSAT) for your area or to the National Old-age Insurance Fund (CNAV) if you live in the Paris region.

Applications for a widow's/widower's invalidity pension should be made to the primary sickness insurance fund for your area, or the regional sickness insurance fund for the Ile de France region if you live in the Paris region.

For persons insured under a scheme other than the general scheme, see the addresses given in [Annex I](#).

If you live in France at the time you submit your application for a retirement pension to the basic fund, you must also contact the last supplementary retirement pension fund of which you were a member.

The pension will not start before the first day of the month after the application is made.

### **Death grant**

The application for a death grant must be submitted to the fund of which the deceased worker was a member.

### **Your right to survivors' benefits when moving within Europe**

In general, the rules which apply to pensions for surviving spouses or orphans and death grants are the same as the ones applying to invalidity and old-age pensions (see chapters V and VI). Namely, survivors' pensions and death grants have to be paid without any reduction, modification or suspension regardless of where the surviving spouse resides in the European Union, Iceland, Liechtenstein, Norway or Switzerland\*.

Further information about the coordination of social security rights when moving or travelling can be found at <http://ec.europa.eu/social-security-coordination>.

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\* Some special non-contributory cash benefits are provided exclusively in the country in which the beneficiary resides and are therefore not "exportable". These benefits are listed in the Annex II provided at the end of this guide.



## Chapter VIII: Benefits in respect of accidents at work and occupational Diseases

### When are you entitled to benefits?

Employed persons (agricultural and non-agricultural workers) and farmers are covered by compulsory accidents at work insurance.

Insurance against accidents at work and occupational diseases covers accidents at work resulting from or caused by your work, accidents which occur on the way to or from work, and diseases contracted at work which are included in official lists of occupational diseases or are directly caused by normal work, according to a report by a committee for the recognition of occupational diseases.

### What is covered?

Following an accident at work or an occupational disease, you are entitled to healthcare and daily allowances and, where appropriate, a pension for permanent disablement. In the event of death, your dependants may also receive pensions.

#### Daily allowance

If you are employed, you are entitled to a daily allowance from the first day on which you become unfit for work. The daily allowance is equal to 60% of gross daily earnings for the first 28 days and 80% subsequently, up to a limit of 0.834% of the annual social security ceiling. The daily allowance for farmers is fixed and is paid from the eighth day of the cessation of work.

#### Pension for permanent disablement

If as a result of your accident or disease you remain permanently partially (at least 10% for employed persons or 30% for farmers) or totally disabled from work, you are entitled to a pension. The amount of the pension depends on your earnings during the 12 months before you became disabled, and the degree of your permanent disablement.

#### Pensions in the event of death

The scheme for employed persons pays pensions to the spouse, partner or the person linked to the victim by a civil solidarity pact (*PACS*), children under 20 years of age and, in some circumstances, to the parents of the deceased insured person. They are equal to a percentage of the annual earnings of the deceased insured person. This percentage amounts to 40% for the spouse (60% in some cases), 25% each for the first two children and 20% for each additional child.

The total value of pensions granted to survivors of a victim of an accident at work may not exceed 85% of the deceased person's annual earnings.

#### Healthcare

On presentation of the accident form, you are entitled, free of charge and without advance payment, to healthcare, medicines, hospitalisation, equipment and prostheses (except where the amount in question exceeds the approved rate).

In certain circumstances you are entitled to vocational retraining or functional rehabilitation.



Those receiving an accident at work pension corresponding to a degree of permanent incapacity of at least 66.66% are entitled, without application of a *ticket modérateur*, to sickness and maternity benefits in kind. Those receiving survivor's pensions also receive sickness and maternity benefits in kind.

### **How are benefits in respect of accidents at work and occupational diseases accessed?**

You should inform your employer as soon as possible after an accident has occurred and give them the names and addresses of witnesses to the accident. The employer will notify your fund and issue you with an accident form, which gives you access to benefits in kind (care) without having to pay costs in advance.

In the event of a relapse, the accident form will be issued by the sickness insurance fund instead of your employer.

If you contract an occupational disease, you must inform your fund within 15 days of becoming unfit for work. Your notification must be sent to the fund, accompanied by two copies of the medical certificate issued by your physician. After a medical examination, the fund will inform you of its decision.

In the event of the victim's death, the survivor's application for benefits must be submitted to the primary sickness insurance fund (*caisse primaire d'assurance maladie (CPAM)*) for employed persons insured under the general scheme and the Agricultural Social Insurance Mutual Benefit Fund (*caisse de mutualité sociale agricole*) for agricultural workers and farmers.

### **Your right to benefits in respect of accidents at work and occupational diseases when moving within Europe**

The EU provisions on benefits in respect of accidents at work or occupational diseases are very similar to the provisions on sickness benefits (see sections II and III). Within the European Union, Iceland, Liechtenstein, Norway or Switzerland, if you reside or stay in a country other than the one in which you are insured against accidents at work and occupational diseases, you are normally entitled to receive healthcare there in respect of an accident at work or an occupational disease; benefits in cash will normally be paid by the institution by which you are insured, even if you reside or stay in another country.\*

Whenever certain conditions have to be fulfilled in order to become entitled to benefits in respect of accidents at work or occupational diseases, the institution where you are insured must take account of periods of insurance, residence or employment that you have completed under the legislation of other countries of the European Union, plus Iceland, Liechtenstein, Norway or Switzerland. This guarantees that people will not lose their insurance coverage when changing employment and moving to another country.

Further information about the coordination of social security rights when moving or travelling can be found at <http://ec.europa.eu/social-security-coordination>.

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\* Some special non-contributory cash benefits are provided exclusively in the country in which the beneficiary resides and are therefore not "exportable". These benefits are listed in the Annex II provided at the end of this guide.



## Chapter IX: Family benefits

### When are you entitled to family benefits?

You are entitled to a family allowance in France if you and your family live in France and you currently have continuous responsibility for at least one child. Some benefits are means-tested.

Family allowance itself (child benefit) becomes payable if you have responsibility for more than one child; however, certain benefits such as the infant welcome benefit, the housing allowance, the new school year allowance, the special education allowance and the maintenance allowance, may also be paid for a single child.

### Beneficiaries

For payment of the housing allowance and the family supplement, the age limit for children is set at 21 instead of 20 for the other benefits. Finally, in order to compensate for the financial loss suffered by a family with three or more children when the eldest reaches the age of 20, a fixed-rate allowance is paid for a year. Family allowance is not, however, payable for the first child.

### What is covered?

The following types of family benefits are provided for under French law.

- infant welcome benefit, which includes:
  - birth or adoption grant,
  - basic allowance,
  - complement for child education choice,
  - complement for child care choice;
- family allowance itself (child benefit);
- family supplement;
- housing allowance;
- special education allowance;
- maintenance allowance;
- new school year allowance;
- daily allowance for parent presence.

Family allowance increases may be granted on the basis of the child's age.

For more details on the other family allowances, please refer to the [MISSOC Tables](#).

### How are family benefits accessed?

You must send your application to the family allowance fund for the area where your family lives.

For a list of the documents required for each of the above benefits, refer to the family allowance guide published by the family allowance fund or contact the agricultural social mutual fund for your area or consult the Internet site of the family allowance fund.



## Your right to family benefits when moving within Europe

Characteristics and amounts of family benefits vary considerably from one state to another.\* It is therefore important for you to know which state is responsible for providing you with these benefits and what the conditions to entitlement are. You can find the general principles for determining the competent legislation at <http://ec.europa.eu/social/main.jsp?catId=849&langId=en>.

The country which is responsible for paying family benefits must take into account periods of insurance completed under the legislation of any other countries of the European Union, plus Iceland, Liechtenstein, Norway or Switzerland, if this is necessary to satisfy the conditions governing entitlement to the benefit.

If a family is entitled to benefits under the legislation of more than one country, they will, in principle, receive the highest amount of benefits provided for under the legislation of one of these countries. In other words, the family is treated as if all persons concerned resided and were insured in the state with the most favourable legislation.

Family benefits may not be paid twice over the same period and for the same family member. There are priority rules which provide for the suspension of benefits from one country up to the amount of those paid by the country which is primarily competent for payment.

Further information about the coordination of social security rights when moving or travelling can be found at <http://ec.europa.eu/social-security-coordination>.

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\* Some special non-contributory cash benefits are provided exclusively in the country in which the beneficiary resides and are therefore not "exportable". These benefits are listed in the Annex II provided at the end of this guide.



## Chapter X: Unemployment

### When are you entitled to unemployment benefits?

Only employed persons may claim unemployment benefit.

In order to qualify for unemployment benefits you must fulfil the following conditions:

- have become unemployed through no fault of your own;
- be registered as a jobseeker and agree to a personalised back-to-work action plan;
- be genuinely and continuously seeking employment;
- be physically fit for work;
- not meeting the conditions for receiving a full pension;
- produce evidence that you have been insured under the unemployment insurance scheme for at least four of the last 28 months (36 months if you are over 50).

### What is covered?

The daily allowance is composed of a fixed part and of a variable part which is equal to 40.4% of the reference wage; it cannot be lower than 57.4% of the reference wage nor exceed 75%.

The payment period for the unemployment benefit (between four and 24 months – or 36 months if the beneficiary is 50 years old or over) depends on the prior period of insurance and the age of the jobseeker.

### How are unemployment benefits accessed?

If you work in France and you lose your job, you must register immediately as a jobseeker with the Employment Service (*Pôle emploi*) for your area in order to receive any employment benefits to which you may be entitled, as well as to retain your entitlement to social security benefits.

You can submit your application for preregistration by telephone or on-line via the Employment Service's [website](#); you will get an appointment and a list of documents to be presented.

### Your right to unemployment benefits when moving within Europe

Normally, the Member State in which you are employed is the one responsible for granting unemployment benefits. Special provisions apply to frontier workers and other cross-border workers who have maintained their residence in a Member State other than the one in which they work.

Periods of insurance or employment completed in other countries of the European Union, Iceland, Liechtenstein, Norway or Switzerland, may be used to fulfil the contribution conditions.



If you want to look for a job in a different country of the European Union, Iceland, Liechtenstein, Norway or Switzerland, you may under certain conditions export these benefits for a limited period of time.\*

Further information about the coordination of social security rights when moving or travelling can be found at <http://ec.europa.eu/social-security-coordination>.

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\* Some special non-contributory cash benefits are provided exclusively in the country in which the beneficiary resides and are therefore not "exportable". These benefits are listed in the Annex II provided at the end of this guide.



## Chapter XI: Minimum resources

### When are you entitled to benefits regarding minimum resources?

French legislation provides for several minimum resource benefits for persons with stable and effective residence in France and whose means do not exceed a certain ceiling.

#### Active solidarity income

Active solidarity income (*revenu de solidarité active, RSA*) is intended to supplement income from work for those with insufficient professional income, to ensure a minimum income for persons without resources and to promote professional activity whilst fighting against exclusion.

It is paid to persons over 25 years of age (under 25 if they have to support at least one child, even if not yet born, or if they can prove a minimum period of activity) who did not reach retirement age.

Beneficiaries of the RSA are obliged to look for work, to take the necessary steps to generate their own activity or to follow the integration activities that are stipulated.

#### Allowance for disabled adults

The allowance for disabled adults (*allocation pour adulte handicapé, AAH*) guarantees minimum resources for disabled persons over 20 years and below 60.

#### Solidarity allowance for the elderly and supplementary invalidity allowance

The solidarity allowance for the elderly (*allocation de solidarité aux personnes âgées, ASPA*) and the supplementary invalidity allowance (*allocation supplémentaire d'invalidité, ASI*) top up social security benefits for old or disabled persons without a (sufficient) insurance record. ASPA is available for persons who have reached the age at which they can retire and ASI to invalid persons who do not fulfil the conditions to claim old-age pension.

#### Allowance of specific solidarity

The allowance of specific solidarity (*allocation de solidarité spécifique, ASS*) guarantees a minimum income for persons who are capable of working but who do not fulfil the conditions for drawing a full pension (see [Chapter VI](#)).

Beneficiaries must undertake positive actions towards regaining employment.

#### Temporary waiting period allowance

Finally, the temporary waiting period allowance (*allocation temporaire d'attente, ATA*) provides a temporary income to certain jobseekers (persons awaiting reintegration, asylum seekers, certain foreigners) who are not entitled to unemployment insurance benefits.

Beneficiaries must undertake positive actions towards regaining employment.

### What is covered?

The amount of the benefits can vary according to the composition and resources of the applicant's household.



### Active solidarity income

The active solidarity income is granted for 3-month periods, which can be renewed. Its amount depends on the family situation.

### Other benefits

The amounts of other available benefits are as follows:

- Allowance for disabled adults (*allocation pour adulte handicapé, AAH*) regardless of the composition of the household. Several supplements may be provided. The AAH is payable for a minimum of one year, up to a maximum of 10 years;
- Solidarity allowance for the elderly (*allocation de solidarité aux personnes âgées, ASPA*) is granted as long as the entitlement conditions are fulfilled;
- Supplementary invalidity allowance (*Allocation supplémentaire d'invalidité, ASI*) is granted as long as the entitlement conditions are fulfilled;
- Allowance of specific solidarity (*allocation de solidarité spécifique, ASS*) is paid for renewable periods of six months;
- Temporary waiting period allowance (*allocation temporaire d'attente, ATA*) is either renewable each month or paid for a maximum period of 12 months, according to the situation of the beneficiary.

### How are minimum resources benefits accessed?

For the active solidarity income (*revenu de solidarité active, RSA*), the claim is assessed by the body appointed by the General Councils (*conseils généraux*, i.e. the assemblies of the French departments).

The right to allowance for disabled adults (*allocation pour adulte handicapé, AAH*) is examined by the Disabled Persons' Rights and Independent-Living Commission (*commission des droits et de l'autonomie des personnes handicapées*).

Claims for allowance of specific solidarity (*allocation de solidarité spécifique, ASS*) and temporary waiting period allowance (*allocation temporaire d'attente, ATA*) are assessed by the body responsible for paying the unemployment benefits (*Pôle emploi*).

Claims for the solidarity allowance for the elderly (*allocation de solidarité aux personnes âgées, ASPA*) and supplementary invalidity allowance (*Allocation supplémentaire d'invalidité, ASI*) are assessed by the institutions (funds) responsible for paying the old-age or invalidity benefit.

### Your right to minimum resources benefits when moving within Europe

Some special non-contributory cash benefits are provided exclusively in the country in which the beneficiary resides and are therefore not "exportable". These benefits are listed in the Annex II provided at the end of this guide.

EU coordination rules apply only to social security, not to social assistance benefits.

Further information about the coordination of social security rights when moving or travelling can be found at <http://ec.europa.eu/social-security-coordination>.



## Chapter XII: Long-term care

### When are you entitled to long-term care?

The French social security system is not based on a homogeneous approach around the loss of autonomy and ability to conduct daily living activities. Long-term care benefits are instead spread over various pieces of legislation.

#### Supplement for assistance of a third party

This legislation provides for a supplement for assistance of a third party (*majoration pour aide d'une tierce personne*) in case of:

- an invalidity pension (*pension d'invalidité*);
- an old-age pension (*pension de vieillesse*) (subject to certain conditions) or
- a work injury pension (*rente d'accident de travail*).

The beneficiaries should not have reached the age at which they can receive a full pension, regardless of the length of insurance at the time of examination of entitlement, and need the assistance of another person in order to perform the majority of basic activities of daily life.

#### Special education supplement for a disabled child

A special education supplement for a disabled child (*complément d'allocation d'éducation de l'enfant handicapé*) is granted for children under the age of 20 who reside in France and who are at least 80% disabled or, in specific situations, disabled between 50 and 80%.

#### Disability compensation allowance and allowance for loss of autonomy

Two other long-term care allowances should be mentioned.

The first is the disability compensation allowance (*prestation de compensation du handicap*) for disabled persons who are younger than 60 years, who are residing in France and whose disability meets defined criteria.

The second is the allowance for loss of autonomy (*allocation personnalisée d'autonomie*) for elderly persons who are older than 60 years and who are residing in France, and who suffer from a loss of autonomy. The benefit is not subject to means-testing, although its amount varies according to the means/income level.

### What is covered?

#### Benefits in kind

Disability compensation allowance (*prestation de compensation du handicap*) and allowance for loss of autonomy (*allocation personnalisée d'autonomie*) can be used to cover the costs of home care and semi-residential and residential care.

Regarding home care, the assistance required for staying at home is assessed. The amount of the benefit depends on the assistance plan used, taking into account the level of participation of the beneficiary, and calculated according to his/her means.

For semi-residential care, it is possible to receive day care in a specialised centre. The number of hours granted depends on an evaluation of the need of assistance.



With respect to residential care (i.e.: accommodation in a social or medical-social institution; hospitalisation in a health institution or in an institution for accommodating elderly dependent persons (*Établissement pour hébergement pour personnes âgées dépendantes, EHPAD*)), the amount of the benefit equals the amount of the expenses corresponding to the degree of loss of autonomy according to the institution's tariffs, minus the participation of the beneficiary him/herself.

### Cash benefits

The supplement for assistance of a third party (*majoration pour aide d'une tierce personne*) is equal to a 40%-increase of the pension, which cannot be lower than a minimum amount fixed by decree.

The special education supplement for a disabled child (*complément d'allocation d'éducation de l'enfant handicapé*) comprises six categories of supplement. There is a specific increase for dependent children of a single parent who is benefiting from the allowance and from a supplement for a disabled child of at least the second category.

### Other benefits

Other benefits include technical grants for the purchase or renting of specific equipment, adaptation of frequently used equipment, housing support (adaptation), transport-related support, specific or exceptional help and assistance animals.

### How is long-term care accessed?

For the supplement for assistance of a third party (*majoration pour aide d'une tierce personne*), the medical service of the fund concerned will investigate your claim.

A multidisciplinary team will assess the need for the special education supplement for a disabled child (*complément d'allocation d'éducation de l'enfant handicapé*) and disability compensation allowance (*prestation de compensation du handicap*).

For the allowance for loss of autonomy (*allocation personnalisée d'autonomie*), a medical-social team will make the evaluation.

### Your right to long-term care when moving within Europe

Long-term care benefits also fall under EU social security coordination rules, in the same way as sickness benefits. Long-term care benefits in cash are paid according to the legislation of the state where you are insured, regardless of which state you are residing or staying in.\*

Long-term care benefits in kind are provided according to the legislation of the state in which you reside or stay as if you were insured in that state.

Further information about the coordination of social security rights when moving or travelling can be found at <http://ec.europa.eu/social-security-coordination>.

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\* Some special non-contributory cash benefits are provided exclusively in the country in which the beneficiary resides and are therefore not "exportable". These benefits are listed in the Annex II provided at the end of this guide.



## Annex I: Useful addresses and websites

For social security issues concerning more than one EU country, you may search for a contact institution in Europe on the Institutions' directory maintained by the European Commission and available at: <http://ec.europa.eu/social-security-directory>

### Ministries

Ministry of Labour, Work and Health  
<http://www.travail-emploi-sante.gouv.fr/>

Ministry of Solidarity and Social Cohesion  
<http://www.solidarite.gouv.fr/>

Ministry of Budget, Public Accounts and State Reform  
<http://www.budget.gouv.fr/>

Ministry of Agriculture, Food, Fisheries, Countryside and Land Use Planning  
<http://agriculture.gouv.fr/>

### Legal texts

<http://www.legifrance.gouv.fr>

### General information

<http://www.service-public.fr/>

### Social security portal

<http://www.securite-sociale.fr/>

### Liaison Body

European and international social security liaison centre (CLEISS)  
11 rue de la Tour des Dames  
F-75436 Paris Cedex 09  
<http://www.cleiss.fr/>

### Collection of social security contributions and premiums

ACOSS  
36, rue de Valmy  
F-93108 Montreuil Cedex  
<http://www.urssaf.fr/>

### Sickness, Maternity, Paternity, Invalidity, Death, and Accident at Work for Employees

*Caisse nationale d'assurance maladie maternité des travailleurs salariés*  
26-50, avenue du Professeur-André-Lemierre  
F-75694 Paris Cedex 20  
<http://www.ameli.fr/>

### General Information on Retirement

Conseil d'orientation des retraites  
<http://www.cor-retraites.fr/>

Info



<http://www.info-retraite.fr/>

### **Retirement for Employees**

- **Basic Pension**  
*Caisse nationale d'assurance vieillesse*  
110 avenue de Flandre  
F-75951 Paris Cedex 19  
<http://www.cnav.fr/>
- **Mandatory supplementary pensions**  
AGIRC ARRCO  
16-18, rue Jules-César  
F-75592 Paris 12  
<http://www.agirc-arrco.fr/>

### **Unemployment**

Unedic  
82, rue de Reuilly  
F-75012 Paris  
<http://www.unedic.org/>

Pôle emploi  
Le Cinétic  
1, avenue du Docteur Gley  
<http://www.pole-emploi.fr>

### **Family benefits**

*Caisse nationale des allocations familiales*  
32, avenue de Sibelle  
F-75685 Paris Cedex 14  
<http://www.caf.fr/>

### **Social scheme for self-employed workers**

RSI  
264, avenue du Président Wilson  
F-93457 La plaine Saint Denis cedex  
<http://www.le-rsi.fr/>

### **The Professions**

CNAVPL  
102, rue de Miromesnil  
F-75008 Paris  
<http://www.cnavpl.fr/>

### **Agricultural scheme (employed and self-employed) for all risks, including collection**

CCMSA  
Les Mercuriales  
40, rue Jean Jaurès  
F-93547 Bagnolet Cedex  
<http://www.msa.fr/>

### **Information on Special Schemes**

<http://www.regimesspeciaux.org/>



## Annex II: Special non-contributory cash benefits

Some social security benefits, referred to as special non-contributory cash benefits<sup>1</sup>, are provided exclusively in the country where the person concerned resides. It is therefore not possible to "export" these cash benefits when moving to another country in Europe, even if you are still insured in France.

The special non-contributory benefits listed for France are:

- Supplementary allowances of:
  - the Special Invalidity Fund; and
  - the Old Age Solidarity Fund in respect of acquired rights  
(Law of 30 June 1956, codified in Book VIII of the Social Security Code);
- Disabled adults' allowance (Law of 30 June 1975, codified in Book VIII of the Social Security Code);
- Special allowance (Law of 10 July 1952, codified in Book VIII of the Social Security Code) in respect of acquired rights;
- Old-age solidarity allowance (ordinance of 24 June 2004, codified in Book VIII of the Social Security Code) as of 1 January 2006.

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<sup>1</sup> In Annex X of Regulation (EC) No 883/2004 as amended by Regulation (EC) No 988/2009.