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Accident Insurance Contribution Rates in Europe: Comparable?

Comparisons between accident insurance contribution rates in different countries often lead one astray as numerous aspects cannot be compared, both with regard to the burdening of the economy and a benchmarking of the systems with regard to the price-performance ratio. With the following text, the author is presenting the methodical difficulties and possibilities of a contribution comparison, restricted to some fundamental aspects. It would appear that this is the first attempt to have been made and the author hopes that he has at least not omitted anything fundamental and that he has presented the law of other countries correctly; he would be pleased to be corrected should this not be the case.

I. The basic problem

The basic problem here is that prices for different products are being compared: different products have different prices and the products provided by each of the accident insurance systems are different by all means. Here are some examples: the term “occupational accident“ can be understood so differently that it can have a restrictive or extensive affect on the costs; the same benefits are not offered everywhere and corresponding benefits are calculated differently; the health market charges different prices; the level of remuneration as a staff costs factor for the insurance body also differs.

II. Common denominator: average contribution rate, flat-rate

A comparison of contributions requires a common denominator. In those cases where the contributions are scaled, this is the average contribution rate, calculated as a percentage of the sum of the remuneration in a country which is subject to accident insurance contributions. This average rate is being referred to when reference is made to the contribution rate in the following. In those cases where there is not a risk-based scaling of contribution, but a flat-rate contribution, as is the case in Austria, this is taken as the criterion. The following should be taken into account however: the average rate is not an absolute quantity but is qualified upwards and downwards by assessment limits (see III. 1 in this regard). The respective contributions paid by each of the companies obviously results in considerable spreads in some circumstances where there is a scaling of risks¹: Belgium between 0.5% and 10%; Finland between 0.3% and 4%; France between 1% and 35%; Italy 0.5 and 13%; Luxembourg between 0.61% and 16.2%; Portugal between 1.5% and 22%; Spain between 0.81% and 16.2%; Germany between well under 1% and around 7%.

III. Average rate, assessment limits

1. Upper limit

1.1 Burdening the economy

¹ Belgium, Finland, Portugal see Munich Re, Rating Systems, 2002, S. 12, 16, 44 ; Italy, Luxembourg and Spain see SSPTW ; France see Eurogip, L'assurance AT-MP dans les pays de l'Union européenne, 2004, p.36.

A higher contribution rate with a higher or even lack of an upper limit of the remuneration which is taken as the basis is a greater burden for the contribution-paying economy than a lower one. It makes most sense to compare the economic burden on the basis of the average remuneration payments made in each of the countries. The following contribution burden figures are from EUROSTAT (Europe in figures – Eurostat yearbook 2008 p. 129) showing the average remuneration for 2006 (the rounded-off assessment limit/contribution rate/average remuneration are in brackets):

- Belgium (35,000 €/3.5%/37,700 €): 1190 € = 3.24 %.
- Germany (70,000 €/1.28%/42,400 €): 542 € = 1.28%.
- Finland (no upper limit/1.1%/34,000 €): 374 € = 1.1% (whereby the employer's excess referred to below is not taken into account)
- France (unrestricted/2.26%/31,000 € in 2005) 700 € = 2.26%
- Luxembourg (90,000 €/1.45%/44,000 €): 638 = 1.45%.
- Austria (55,000 €/1.4%/36,000 €): 504 € = 1.4%.
- Portugal (unrestricted/3.5%/15,000 €): 525 € = 3.5%.
- Spain (37,000 €/2.75%/21,000 €): 1017 € = 2.75%.

1.2 Social security level and the effect on the contribution rate

Contribution assessment limits are normally the same as the assessment limits for cash benefits. Low contribution rates resulting from lower upper remuneration limits also result in reduced financial compensation. However, one should not take absolute figures to designate the level, but should then determine the extent to which the upper limit is lower than the average remuneration.

1.3 Effect which the benefits structure has on the contribution rate

In as far as contribution assessment limits are in line with the assessment limits for benefits, this is admittedly structurally neutral as far as the contribution rate is concerned. As however employment which attracts a higher remuneration normally attracts lower risks (such as with executives), there is an inherent burden relief factor they subsidise the contribution rate so to speak. Finland, Portugal and especially France (due to its concurrent assessment limit for benefits) benefit from this.

The benefits assessment limits are only applicable to cash benefits however and not to benefits in kind and services, such as for medical treatment and rehabilitation. It is therefore the case in connection with these that the higher a contribution assessment limit is, the lower the contribution rate. The overall effect therefore depends on the ratio of the cash benefits to the others. The higher the share of the benefits which are not related to the remuneration, the greater the relief provided by a higher assessment limit and vice versa.

A reduced average rate for example, results in a system not only no longer offering certain benefits or only doing so within a restricted scope, but also leaving them to other branches, such as with medical treatment and rehabilitation (e.g. Italy) or with cash benefits during an incapacity to work (e.g. in Austria temporarily). It admittedly reduces the contribution rate for the accident insurance but is reflected in the other branches.

2. Lower limits

If a minimum remuneration is stipulated for the contribution and benefits assessment and this is inevitably lower than the actual earnings, this has an increasing effect on the contribution rate in principle due to the fact that contributions and benefits are not vis-à-vis with actual remunerations. The higher the lower limit and the more it is higher than the actual remuneration, the greater the contribution rate burden.

IV. Frequency of the insured events

Last but not least, the frequency (and severity) of the insured events which occur also plays a role in the contribution rate. The higher it is, the greater the extent to which it burdens the contribution rate and vice versa. It is among others, related to industrial structures and the reporting behaviour (high or low “reporting morale“), among others. Not the standardised incidence rate is to be taken into account, but the number of events which really are reported, as only they cause costs which have an effect on the contribution.

V. Financing systems

It is obvious that financing systems have an effect on the contribution rate, whether as a result of fundamental differences between the systems with regard to the adjustable contribution procedure and the funding procedure, in the form of the accumulation of reserves and/or working funds in different amounts. The contexts are too complicated to go into them here however.

VI. Administrative costs

The administrative costs are reflected in the discussed contribution rates. They should therefore be briefly referred to. They account for around 10% of the total expenditure in Germany and around 14/15%² with the private insurance companies for example; the figure for Austria is 7.7%; in Finland 11%³ and in Luxembourg 11%⁴. A direct comparison is therefore only possible to a restricted extent, especially as the allocation of expenditure to the administrative costs is not the same everywhere. That is to say that the more different the benefits and their requirements, etc. are, the greater is the difference between the administrative costs. The more simple the benefits systems are for example, with regard to the types of benefits, complexity of the requirements and calculations, the lower the administrative costs – and vice versa.

VII. Comparisons of countries – preliminary remarks

1. General information

The comparisons should on the basis of the aforementioned factors which have an effect on the contributions exemplify the differences which exist between the different countries and which have to be considered when making comparisons with regard to the economy burdens and the contribution reasonability of a system. The complexity which this shows makes it

² 2006: 21.1% less 6.2% commission; see Belgium below.

³ <http://www.tvl.fi/asp/system/empty.asp?P=1056&VID=default&SID=397628530714768&S=0&C=27959>.

⁴ Rapport General sur la Sécurité Social 2006 (Dec. 2007) p. 215

(www.mss.public.lu/publications/rapport_general/rg2006/rg_2006.pdf): 5.5%, whereby the assumption is made that the half contribution made by the state is not included.

clear that only rough approximations are possible at most. The individual differences are often irrelevant when considered alone, but these can add up when considered together with others, although they could also possibly cancel each other out. Only a somewhat simplified presentation of some of the basic features of the respective state provisions is possible here. The stated figures are rounded-off and can have been subjected to slight changes in the meantime due to dynamisations, etc..

Only those countries were selected which have a system which at least comes close to being similar to the German system as regards the insured people, the insured events and the benefits. The former East European countries have not been considered due to them being young systems, among others. It is therefore normally the case that they do not have any burdens from a former state system.

2. Terminology, sources

The terminology is not consistent on an international scale. That which one country refers to as sickness benefit for example, is known as a daily benefit (injury benefit in Germany) and is granted when there is an incapacity to work, which is mainly described as being a temporary restriction of the earning capacity, contrary to a longer-lasting restriction of the earning capacity (permanent disability). As far as the sources are concerned, I would like to refer to the MISSOC tables from the EU and the country summaries in *Social Security Programs Throughout the World 2006/2007 (SSPTW)*⁵ beforehand. It was not always possible to determine clear rules from all of the sources so that some vagueness has to be accepted.

VIII. The countries

1. Germany

The focus here is only on the trade social insurance institutions for occupational accidents with the classic group of insured people. The insurance with the agricultural social insurance institutions for occupational accidents only accounts for a small amount. The insurance with the state accident insurance institutions are subject to great peculiarities. Both of these areas are therefore not being considered, especially as they are also mainly special systems in the compared countries. The following are especially the single contribution-effective factors which are compared with those in the other countries:

A relieving factor when compared with some countries is especially the calculation of the full pension on the basis of only 2/3 of the annual wage with corresponding consequences for the partial pension and the required minimum reduction in the earning capacity of 20%. Factors which are a higher burden when compared to some of the other systems are: sole and full bearing of the costs for treatment and all forms of rehabilitation, including their management (disease management) right from the start; the amount of nursing allowance and its independence from the maximum earning capacity; a relatively high minimum wage; the payment of social insurance contributions from the benefits paid for a temporary incapacity to work by the accident insurance, when these benefits were not determined elsewhere (no additional reference being made to this for the other countries below); the statutory prevention mandate with the maintaining of an own prevention services with consultation, control and sanctioning obligations in addition to research tasks (around 7% of the expenditure).

⁵ SSPTW-Website: <http://www.ssa.gov/policy/docs/progdesc/ssptw/2006-2007/europe/index.html>.

2. Belgium

The Belgian system leaves the insuring of occupational accidents in the private economy to the commercial insurance companies or employers' federations in the form of a mutual insurance (*caisses communes*), with which the employer has to take out compulsory insurance. The taking out of the insurance is compulsory and profit possibilities are restricted by the state. The occupational accident fund which is governed by public law (*Fonds des Accidents du Travail – FAT*) is the supervisory authority in addition to it having a particular controlling and administrative function, provides not only low benefits on their behalf and is responsible for insuring seamen. Occupational diseases are the responsibility of the state occupational diseases fund.

The contribution and benefits assessment limit amounts to around 35,000€. It has not been possible to determine new figures for the average contribution. The flat-rate contribution to the occupational disease insurance alone amounts to 1.1% nowadays. In the accident insurance a differentiation is made between salaried and waged workers, each of them making a separate contribution for commuting accidents. The wages paid to the workers which is subject to contributions is calculated with 108%. The insurers' federation (*UPEA*) has on the one hand quoted a contribution rate of 3% without this differentiation for 2001 or 2002, and on the other quoted one of 2.95% for workers (it not being clear whether this is based on 108% or 100%) and 0.80% for salaried employees (each including commuting accidents)⁶. If one assumes that the latter is the case and that the number of workers is slightly less than the number of salaried employees, the rate would amount to around 1.8%. It is hardly to have been reduced significantly, especially as the premiums were not continuously cost-covering at that time and reserves had to be used so that the state conceded a state linear increase of 7%⁷. The employers have to transfer an additional 0.3% to the *FAT* due to their above duty to cooperate; they are not subjected to a maximum remuneration limit however, which would be difficult to take account of in the average rate, despite it increasing it in total. If one reckons with a rate which is not below 3.5%, then one would hardly be calculating too high. The 1.1% for occupational diseases alone is noticeably high and is almost as high as the comprehensive German rate, this presumably being due to it having the highest compensation burden⁸ of all of the compared countries in proportional terms.

If we consider the 1.8% of the private insurers for occupational accidents alone, then we find factors which are a greater burden than is the case in Germany: a pension entitlement from a reduced earning capacity of just 1%, calculated for the full pension with 100% of the calculation wage and salary with a corresponding effect on the partial pension (not the small pensions which have to be compensated for, s. VII.1 however); the sick pay is shorter or lower; the lower contribution assessment limit is a burden as regards the treatment costs. Any profits and the agency commissions and reinsurance premiums are not included in the comparison in as far as they do not reflect any benefits but are naturally additional system-related costs.

The following have a relieving effect: only those receiving a wage or salary are insured; this system does not compensate for occupational diseases; the *FAT* provides considerable bene-

⁶ Anniversary report from the UPEA, Centenaire de la Loi sur les Accidents du Travail, 2003, p. 13: 2.95% (<http://www.assuralia.be/fr/pdf/brochure%20AT%20centenaire.pdf>); <http://www.assuralia.be/fr/pdf/exergue%20A1%2037.pdf>: 3%.

⁷ Anniversary report from the UPEA p. 11, 12 ; also compare the figures on accident occurrences and contribution income there with newer ones for 2006 in Assur-info No. 33 p. 23 (http://www.assuralia.be/fr/sector/key_figures/Assurinfo07.pdf).

⁸ Details : Eurogip, Coût et financement de maladies professionnelles en Europe, 2004 (www.eurogip.fr > Infobase > documents en ligne).

fits (see above); the accident pension is reduced when the old-age pension is paid; other parties are responsible for occupational and social rehabilitation; the prevention expenses are much lower⁹; the accident frequency is lower.

4. Finland

The Finnish statutory accident insurance has been transferred to private insurers¹⁰, which are however not permitted to make a profit and are under a compulsory obligation to take the insurance out. Depending on the source, the contribution rate has been 1-1.2%¹¹, for a longer period of time, but without a contribution and benefits assessment limit. This is a false picture in as far as pursuant to section 12 (1) of the Finnish legislation, the employer has to pay benefits himself up to a maximum of 167.50 € (should he not have taken out an additional voluntary insurance for this).

The contribution rate is placed under a greater burden when compared with Germany, due to the following deviations: the full pension is 85% of the annual wage (up to the age of 65, 70% thereafter), this having a corresponding consequence for the proportionally calculated partial pension; the minimum earning capacity amounts to 10%; sick pay is shorter; integrity compensation is also paid in addition to the reduced earning capacity pension (at the highest level 60% of the minimum wage or salary of around 10,000.00€).

In addition to the above excess, the following also have a relieving effect: only those receiving a wage or salary are insured; the nursing allowance is only around half and is only a discretionary benefit; a daily benefit is only paid for maximum one year and then pension payments are made which are lower in some cases (see I. and VII.1); the pension entitlement presupposes a lower earning of at least 5% of the above minimum wage or salary; the prevention costs are much lower¹²; the accident frequency is lower. The minimum earning referred to above as being a pension requirement would have a strong contribution relieving effect in Germany and a considerable reduction in pension expenditure (new and existing). The unlimited contribution and benefits assessment limits also relieve the contribution rate (see III.1.3), also as regards the integrity compensation which limits the minimum wage and salary and degressive percentage levels in the remuneration assessment basis for the daily benefit¹³; for the above lower minimum limit, see III.2.

5. France

The general statutory accident insurance (*régime générale*) is a financially independent section within the health insurance, whereby there are also special institutions for the mining, maritime, gas and electricity industries, among others (*régimes spéciaux*). The average rate is

⁹ e.g. according to the anniversary report of the UPEA p. 5 around 11.5 mill. € with coptribution earnings of just under 900 mill. € (p. 9) and compensation benefits of around 947 mill. € (p.9), this therefore being around 1.2%.

¹⁰ Details: Ministry of Social Affairs and Health, Characteristics of the Social Security System in Finland, p. 15 ff (<http://www.stm.fi/Resource.phx/publishing/store/2007/11/aa1197637712844/passthru.pdf>); unauthorised version of the legislation <http://www.finlex.fi/en/laki/kaannokset/1948/en19480608.pdf>.

¹¹ Insurers' Federation (TVL/FAI) (www.tvl.fi) > English > Finnish statutory accidents insurance system > Financing; Finnish Insurance Today, p. 17 (http://www.expatsfinland.com/insurance_market_in_finland_2005.pdf); Missoc – Finanzierung, Std. 1.2.2007; SSPTW on Finland.

¹² Statutory transfer of 2% of the premiums to the responsible state institutions; one also has to add some own measures, e.g. through clarification into account.

¹³ SSPTW on Finland.

stated as being 2.26%, whereby a contribution assessment limit does not exist¹⁴. The benefits assessment limit is around 127,000 € but only one-third is taken into account for remunerations of between 32,000 € and this amount.

Factors which have a greater burden on the contribution rate than in Germany are: no or a shorter continuation of wage payments in case of sickness; there is already a pension entitlement from with a reduced earning capacity of 1% (see VII.1); the accident frequency is higher. The following have a relieving effect: the high risk miners and mariners are covered by a special insurance; there is a benefits assessment limit without a contribution assessment limit (see III.1.3); the sickness benefit only initially amounts to 60% and 80% of the computed remuneration from the 29th day; Only those insured people with a reduced earning capacity of at least 80% are entitled to nursing benefits. The pension of 100% of the calculated remuneration with a full capacity to work does not have an effect on the partial pensions however, as they are not calculated proportional to the full pension. With reduced earning capacity rates of 20-50%, the pensions only account for half the percentage rate, i.e. a reduced earning capacity of 50%, the definitive remuneration is only 25%. This means that all of these pensions are some percentage rates under the corresponding German calculations which are based on 66 2/3 of the full pension (e.g. 50% reduced earning capacity is equal to 33 1/3% of the definitive remuneration). The effect is therefore a relieving one, when compared with Germany.

6. Italy

Responsibility for the Italian system lies with State Institution for Insurance against Occupational Accidents (*Istituto Nazionale per l'Assicurazione contro gli Infortuni sul Lavoro - INAIL*). It covers a wider scope of areas as the trade social insurance institutions for occupational accidents, e.g. agriculture, but always with separate contributions. The *INAIL* has not published any information on the average contribution. External sources have for a long time been quoting a rate of 3% or a little less¹⁵. The contribution and benefits assessment rate is around 24,000 €.

When compared with Germany, the contribution rate is above all burdened to a greater extent by the following pension deviations: pensions (as a compensation for remuneration and integrity losses) are already paid from a reduction in the earnings capacity of more than 16%, whereby an integrity loss which is lower than this is only compensated for when it is at least 6%.; seriously injured receive a child allowance in addition to the pension; there is only a continuation of wage payments for 3 days; financial specifics are disadvantageous (e.g. no complete assessment system, earned surpluses are partially returned to the national budget; liquid funds have to be partially invested in a non interest-bearing account held by the state treasury).

The following have a relieving effect: commuter accidents are only insured to a restricted extent (e.g. when using one's own car), whereby it is questionable whether this has an effect when taking the practical handling into account; as these have only been insured since 2000 however, they cause much lower old pension burdens; the daily benefit initially only amounts to 60% of the assessment remuneration, 75% from the 91st day; the nursing allowance ("ac-

¹⁴ SSPTW on France.

¹⁵ SSPTW on Italy for "industrial workers", where it is assumed that this refers to the sectors *industria* and *terziario/servizi* (services) (this therefore excluding the others, e.g. *agricoltura* - agriculture), which the *INAIL* statistics normally include under *industria*. The 0.7% quoted in Münchener Rück, Rating Systems, 2002, p. 36, 57 is based on ambiguous sources. The information from SSPTW, that the state bears the costs is incorrect.

companying allowance") has a maximum which is half of this and only payable with a reduced earning capacity of 100%; nursing care is neither a non-cash benefit nor a service; bridging benefits when a person has to give up his or her job due to a health risk are only payable in case of silicosis or asbestosis; only around 5% of the budget¹⁶ is set aside as expenditure for prevention, medical treatment and rehabilitation due to statutory close restrictions with regard to its competencies and possibilities to act, which is also the express subject of complaint by INAIL and the public (Germany: around 7% and 31%); as regards the reduced lower limit (approx. 12,600 €) see III.2.

7. Luxembourg

The Luxembourg system is governed by public law and is the responsibility of the accident insurance institution (*Association Assurance contre les Accidents – AAA*). The contribution rate in 2006 was 1.45%, the contribution and benefit assessment rates was around 90,000 €. When compared with Germany, this is burdened to a greater extent by the following deviations: there is no statutory continuation of wage payments for workers (except for collective agreements in some cases); a pension is already to be paid from a reduction in the earning capacity of 1%; the full pension amounts to 85.6% of the annual wage with a corresponding consequence for the proportionally calculated partial pension; compensation for property damage is also paid to a restricted extent; the accident frequency is higher. The following have a relieving effect: sickness benefit is only paid for 13 weeks, then a pension is paid which is lower in certain circumstances; it is normally the case that no benefits are paid for professional and social rehabilitation; the continuation of salary payments is for a maximum of 3 months for salaried employees; the state contributes to the staff and administration costs (50%) and the dynamisation of the pension (1/3) which corresponds to around 14%¹⁷ (which would reduce the German rate to around 1.10%).

8. Austria

The Austrian system which is administered by the General Accident Insurance Institution (AUVA) under public law is the closest to the German system as regards the details and system¹⁸. The contribution rate is however not risk-related, but amounts to a statutory amount of 1.4% for all companies with an assessment limit for contributions and benefits of around 55,000 €.

It is especially subjected to heavier burdens when compared to Germany due to the following deviations: the seriously injured are entitled to a child benefit and additional pension; a one-off integrity compensation payment (only totalling 0.5 million in 2006 however) is payable in addition to the pension for a reduced earning capacity (disablement pension) if the accident was the result of a gross violation of occupational health and safety regulations; subsidies to small and medium-sized companies which are not related to the cause of the incapacity to work are extraneous insurance benefits (which after all accounted for around 6% of the expenditure in 2007). The following have a relieving effect: sickness benefit is only 50% of the calculated remuneration for the first 6 weeks and then 60%; sickness benefit and treatment costs are normally borne direct by the health insurance or it reimburses these costs during the

¹⁶ See www.inail.it > Pubblicazioni e riviste > Tutti i titoli > Bilanci sociali > Bilancio sociale anni 2005 e 2006 – Indice > La riclassificazione, letzte Tabelle.

¹⁷ See the Rapport General p. 215, referred to above.

¹⁸ Summarised presentation of the AUVA, gemeinsam sicher (www.auva.at/mediaDB/118736.PDF); refer to the General Social Security Act (ASVG) for the statutory regulations [http://www.jusline.at/Allgemeines_Sozialversicherungsgesetz_\(ASVG\)_Langversion.html](http://www.jusline.at/Allgemeines_Sozialversicherungsgesetz_(ASVG)_Langversion.html).

first 4 weeks; the continuation of wage payments is longer (max. 12 weeks depending on the employment duration and 50% for a further 4 weeks); only people receiving a full pension receive a nursing allowance; other institutions are responsible for the provision of care as a non-cash benefit or service; the prevention expenses are a little lower (5% instead of around 7% in Germany); the accident frequency is lower. See III.2 with regard to the lack of a low remuneration limit for the contribution and benefits assessment.

9. Portugal

There is a state system for occupational diseases with a contribution rate of 0.5%, a regardless of culpability civil employer liability with commercial insurers which is within a social insurance law framework, for which there is no compulsion to take out insurance cover and which has a contribution rate which is estimated as being 3%; this includes 0.15-0.18% of the remuneration for a state guarantee fund (similar to the *FAT* in Belgium, which is to come into effect if the company (mainly due to a high risk) is unable to find an insurer or does not pay a contribution due to insolvency¹⁹.

When compared with Germany, the contribution rate is subjected to a much greater burden due to the lack of a statutory continuation of wage payments, an insurance tax, the contribution to the guarantee fund and the higher accident frequency. The following especially have a relieving effect: the daily allowance is only 70% of the assessment remuneration and 75% after one year; there is not a prevention duty; occupational rehabilitation benefits are restricted; there are no contribution and benefits assessment limits. As far as the occupational diseases insurance is concerned, the treatment is provided by the national health service, so that this is not a burden on the contribution rate. It is difficult to estimate the effects of the pension regulations, but they are hardly expected to have a burdening effect; these are roughly: 50-70% of the decisive remuneration is paid in the case of a complete loss of the capacity to work in the chosen profession, in the case of a complete incapacity to work without taking the profession into account with the addition of family allowances; in the case of a partial restriction of the earning capacity of more than 30%, there is entitlement to a benefit of 70% of the loss of earnings (?), compensation being paid if this should be less. All in all, the contribution burden should also be higher than in Germany when relatively based on the benefits.

10. Spain

The Spanish system is administered by state institutions and non-profit oriented employer federations in the form of a mutual insurance (*mutuas patronales*, comparable with the *caisses communes* in Belgium); more than 90% of the employers are insured here. The contribution and benefits assessment limit is around 36,000 €. The average contribution is quoted with different figures, these last being 1.98% and 2.75%²⁰.

Factors which place a higher burden on the contribution rate than in Germany are the lack of or shortened statutory continuation of wage payments, the payment of integrity compensation for impairments which do not result in invalidity and a much higher accident frequency. Relieving factors: the daily allowance is only 75% of the assessment remuneration; the national health service provides medical treatment; state bodies are responsible for certain functions (e.g. collection of contributions, expert evaluations). The pensions expenditure should also have a relieving effect: in the case of a full reduction in the earnings capacity in the general

¹⁹ Munich Re, Rating Systems, 2002, S. 44, 43.

²⁰ 1.98%: SSPTW on Spain; 2.75%: Forum News 01/2007.

market, there is an entitlement to 100% of the decisive remuneration, but to only 55% in the case of a full reduction in the earning capacity in the learned profession and in the case of a partial reduction of at least 33%, there is an entitlement to compensation amounting to two average annual salaries. The expenditure for prevention and rehabilitation which was very low in the past has been subjected to a high increase in recent years thanks to the commercial success of the *mutuas*²¹, but they are together still much lower than the proportion in Germany.

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²¹ Bis 2004 etwa 50 Mio jährlich, 2006 und 2007 rd. 386 bzw. 600 Mio: Angabe des Verbandes der Mutuas, AMAT: www.amat.es > Prensa y Comunicación > Noticias > Año 2008.