

Law on Amendments to the Law on Health Insurance ("Official Gazette of RS", No. 92/2023)

The National Assembly of the Republic of Serbia adopted the Law on Amendments to the Law on Health Insurance ("**the Law**") which was published in the "Official Gazette of the Republic of Serbia" No. 92/2023 as of October 27, 2023 and which entered into force on November 4th, 2023.

The reasons for the amendments to the Law are contained in the need to regulate more rationally the issue of determining the temporary incapacity for work of the insured (sick leave), that is, to reduce abuses in exercising the right to temporary incapacity for work.

In the supervision procedures, it was observed that the doctors establish temporary incapacity for work for a length that exceeds the prescribed recommended length of temporary incapacity for work, without additional diagnosis and treatment by a specialist in the appropriate specialty, i.e. without additional explanation of the patient's health condition, which affects the length of the temporary incapacity to work, **as a result of which the powers of the doctor were reduced.**

The selected doctor now, in accordance with the Law, in terms of linking the number of days of temporary incapacity to work with or without interruption, in a certain period of time, determines the temporary incapacity for work for **up to 30 days**, instead of up to 60 days (as was the case under the previously valid provisions of the law), and after that the temporary incapacity is determined by the first instance medical commission of the Republic Health Insurance Fund ("**RFZO**").

The possibility is left that the selected doctor can establish temporary incapacity for work for up to 60 days, but only in prescribed cases.

In order to more efficiently exercise the right to compensation during temporary incapacity for work, and in the case when the compensation is paid from the funds of the mandatory health insurance, it is stipulated that the **calculation of the compensation is performed only by the RFZO**, which body submits the calculation to the employer (in accordance with the previously valid provisions, the calculation of compensation for employees, which is paid at the expense of RFZO funds, was performed first by the employer, and then by the RFZO).

The employer submits to the RFZO branch a request for the payment of the compensation when the payer of the compensation is RFZO and the branch determines the right to compensation, the amount of the compensation, and no later than **within 21 days** from the date of receipt of the request for the payment of the compensation, performs the calculation, which it submits to the employer and transfers the appropriate amount of funds to the employer's separate account.

The Law also stipulates that the employer is obliged to pay the funds received to the insured person **no later than seven days** from the day of receipt (as opposed to the previously prescribed 30 days), and if the payment is not made within the specified period, the employer is obliged to return the funds to the branch with interest for which the funds were increased while they were in the employer's separate account.

In addition, the employer is obliged to submit a request for compensation to the branch **no later than 15 days** from the day of salary payment for the month to which the compensation applies (compared to the previously valid deadline of 30 days).

The new law shortens the number of days for which the selected doctor can determine temporary incapacity for work, which is **30 days**, with the possibility that the selected doctor can determine temporary incapacity for work up to 60 days.

Temporary incapacity for work for up to 60 days is determined by the selected doctor for: the insured suffering from a malignant disease; an insured person temporarily prevented from working due to illness or complications related to pregnancy maintenance; insured persons with disabilities; the insured person who underwent immediate surgical intervention, except in the case when the intervention was performed in a day hospital.

The Law also stipulates that the first instance medical commission of the RFZO:

- gives an assessment and determines the insured's temporary incapacity for work on the proposal of the selected doctor for over 30, i.e. 60 days (in cases where the doctor has determined the temporary incapacity for work for up to 60 days), as well as to
- decides on the objection of the insured or the employer to the assessment of the selected doctor on temporary incapacity for work.

Penal provisions have also been corrected in accordance with the adopted amendments, and it is prescribed that an employer with the capacity of a legal entity will be fined from 300,000 to 1,000,000 dinars for a misdemeanour if it does not submit to the branch a request for the payment of wages with all the necessary evidence for payment for employees whose wage compensation is provided from compulsory health insurance funds or compensation from compulsory health insurance funds that was transferred to a separate account of the employer is not paid to the insured within seven days from the day of

their receipt at the latest, and is not returned to the branch with interest for which the funds were increased while they were in the employer's separate account.

Also, it is prescribed that a fine of 300,000 to 1,000,000 dinars will be imposed on RFZO for misdemeanour, if it does not determine the right to compensation, the amount of compensation, or no later than within 21 days from the date of receipt of the request for the payment of compensation with all the evidence necessary for the payment of such from the funds of the mandatory health insurance does not calculate the compensation, or does not submit the calculation to the employer or does not transfer the appropriate amount of funds to the employer's separate account.

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