

OVERSEAS CONTACT

Stijn Blommaert (NL) 02 509 33 60
Timo Blyaert (NL) 02 509 35 17
Amélie Elie (Fr) 02 509 38 22
Pascale Domken (Fr) 02 509 20 84

periodekeuitkeringen-osz@onsrszls.fgov.be
prestationsperiodiques-om@onsrszls.fgov.be

ADDRESS

AD VII - Payments and Benefits Department
Victor Hortaplein 11
1060 Brussels

SICKNESS AND DISABILITY INSURANCE

version of 1 february 2025

A sickness or disability allowance is granted to an insured person who is unable to provide for himself/herself as a result of an illness which manifests itself or of an accident (other than an accident at work) sustained while that person was contributing to insurance, or to an insured woman who interrupts her occupational activity during a period of maternity leave (maximum 15 weeks).

A. CONDITIONS

1. The claim for benefits must be submitted within 90 days following the day on which the insured person becomes entitled to the allowance.
2. A minimum qualifying period of six months' insurance contributions is required prior to the month in which the incapacity occurs, except if the incapacity results from the consequences of an accident or if there is a link with a social security scheme in Belgium or another member state of the European Economic Area or Switzerland (employed or self-employed person).
3. Residence:
During this period, the insured person must reside in a member state of the EEA (with the exception of Denmark, Iceland, Liechtenstein, Norway and Switzerland) except if:
 - you are Belgian or a national of another EEA state or Switzerland;
 - the General Directorate VII Overseas Social Security has granted exceptional authorisation.
4. The allowances are payable only to the extent that their amount exceeds that of any professional income (guaranteed wage), including benefits granted under social security legislation.

B. AMOUNT OF THE SICKNESS AND DISABILITY ALLOWANCE

Monthly rate of the allowance since 1 february 2025				
Monthly contributions	Ordinary rate		Dependants or assistance from third parties	
General Scheme	1 st year	From the 2 nd year of incapacity	1 st year	From the 2 nd year of incapacity
403,62 €	503,13 €	754,70 €	691,77 €	1.037,66 €
645,89 €	811,50 €	1.217,25 €	1.115,77 €	1.673,66 €
861,18 € to 2.454,38 €	973,78 €	1.460,67 €	1.338,94 €	2.008,41 €

The amount of the allowance is increased by 50% after an uninterrupted period of one year of receiving benefits under sickness and invalidity insurance.

The amount of sickness or disability allowance is based on the average of the 36 last contributions paid. If the person concerned has not paid contributions for 36 months, the calculation is based on all the contributions paid.

C. MISCELLANEOUS

1. The insured person who benefits from sickness and disability insurance is entitled to reimbursement of the costs of medical care, insofar as he or she is not entitled to similar benefits under other statutory, contractual or regulatory provisions, whether Belgian or foreign, or under a reciprocal agreement. Health care costs are refunded on the basis of the rates laid down by Belgian statutory provisions on compulsory sickness and invalidity insurance and on the conditions laid down in these provisions (sickness and invalidity insurance reimbursement scales).
2. It has been possible for an insured person to extend coverage by the General Directorate VII Overseas Social Security health care insurance contract signed before the onset of incapacity for work by paying the contribution. In this case, the benefit entitlement under this contract continues during the period of incapacity for work.
3. From the 13th month of incapacity for work, the allowance is reviewed if the insured person reaches the age of 65. The allowance is no longer paid when the insured person receives an General Directorate VII Overseas Social Security retirement pension.
4. Periods during which the insured person receives sickness or disability allowances paid by the General Directorate VII Overseas Social Security may be taken into account for the pension if these periods fall before the age of 65 provided that the person concerned has completed fewer than 20 years' insurance.