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JSIS

Joint Sickness Insurance Scheme

- ⇒ Legislation
- \Rightarrow Useful information
- ⇒ Supplementary Health

Insurance (conferences on 9 April & 22 May 2024)

> Responsible Editor Cristiano Sebastiani

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Humans are at the heart of every action we take, and health is a fundamental pillar of that!

Dear colleagues,

More than 2,000 of you followed our two online conferences (video <u>EN</u> <u>FR</u>) on supplementary health insurance, organised in partnership with our friends and volunteers : "Active Seniors DG HR D2" is responsible for providing information on health and accident insurance in addition to the JSIS. These volunteers are members of Afiliatys (<u>link</u>), SFPE-SEPS (<u>link</u>) and AIACE (<u>link</u>).

Thank you very much for your trust and loyalty!

Your health and that of your loved ones is our priority! That's why we've shared those valuable hints with you and benchmarked the supplementary health insurance products on the market. This presentation has been prepared with complete objectivity so that you can make your choice according to your needs.

We have also made a point of answering all the questions and as promised, all the answers are now published on our website (<u>link</u>). You can always send us your questions and/or requests via this <u>link.</u>

To meet your specific JSIS needs, we can arrange a personal consultation. Please send your enquiry to osp-rd@ec.europa.eu.

Together with our colleagues, we are at your disposal to provide you with all the necessary and useful information, as well as individual consultations. (Add contact details)

In response to your various requests, we have prepared this special edition of "Renard Déchaîné" devoted to the Joint Sickness Insurance Scheme (JSIS). The first part contains all the legislation and useful information, and the second part includes the replay, support and useful documents mentioned during the conference.

Our health insurance scheme is highly sought-after, and we are keen to uphold it so that all our members can benefit from proper reimbursements for their medical treatment.

We would like to extend our warmest thanks to our colleagues in the PMO for their work in conditions that are not always easy. We are delighted that the first signs of the new management are moving in the right direction, towards a more humane management of both members and our colleagues in the PMO.

It is important to be able to continue to benefit from our JSIS and to preserve it, and this can only be done if we are well informed about the legislation and the terms and conditions of cover and reimbursement, and also by consulting the agreements signed by the JSIS and the health professionals.

This is what we wanted to share with you in our special Renard!

Enjoy your reading !

Cristiano Sebastiani, Chairman

Legislation & Useful information

Source my intracomm

In this edition, we have brought together the legislation and useful information to help you prevent accidents and protect your health.

Social security is governed by our Staff Regulations under Title V-Chapter 2. It covers sickness, accident and occupational disease insurance.

To meet our needs, health insurance has been reformed. The latest social negotiations resulted in significant progress. **R&D** was at the forefront of the discussions, in

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particular to support and obtain higher reimbursement ceilings and wider access to medically assisted procreation.

R&D, the leading trade union in the European civil service, continues to be one of the key players in this issue, with the help of our representatives in the Joint Sickness Insurance Management Committee (CGAM), to guarantee you the highest standards of care and reimbursement.

Commission Decision of 17.11.2023—Higher reimbursement ceiling, broader access to medically assisted reproduction

Sickness insurance

 \Rightarrow Legislation,

EN

Staff Regulations, Article 72 & 85a

EN

Article 72

1.An official, his spouse, where such spouse is not eligible for benefits of the same nature and of the same level by virtue of any other legal provision or regulations, his children and other dependants within the meaning of Article 2 of Annex VII are insured against sickness up to 80 % of the expenditure incurred subject to rules drawn up by agreement between the appointing authorities of the institutions of the Union after consulting the Staff Regulations Committee. This rate shall be increased to 85 % for the following services: consultations and visits, surgical operations, hospitalization, pharmaceutical products, radiology, analyses, laboratory tests and prostheses on medical prescription with the exception of dental prostheses. It shall be increased to 100 % in cases of tuberculosis, poliomyelitis, cancer, mental illness and other illnesses recognized by the appointing authority as of comparable seriousness, and for early detection screening and in cases of confinement. However, reimbursement at 100 % shall not apply in the case of occupational disease or accident having given rise to the application of Article 73.

The unmarried partner of an official shall be treated as the spouse under the sickness insurance scheme, where the first three conditions in Article 1(2) Annex VII (c) of are met. The appointing authorities of the institutions may, under the rules referred to in the first subparagraph, confer on one of their number the power to lay down the rules governing the reimbursement of expenses in accordance with the procedure laid down in Article 110.

One-third of the contribution required to meet such insurance cover shall be charged to the official but so that the amount charged to him shall not exceed 2 % of his basic salary.

1a. An official whose service terminates and who provides evidence that he is not in gainful employment may, not later than one month following that in which his service terminates apply to continue, for a maximum of six months after termination of service, to be insured against sickness as provided in paragraph 1. The contribution referred to in the previous paragraph shall be calculated by reference to the last basic salary received by the official, half the contribution being borne by him.

By decision of the appointing authority taken after consulting the institution's medical officer, the period of one month for making application and the six months' limit specified in the preceding paragraph shall not apply where the person concerned is suffering from a serious or protracted illness which he contracted before leaving the service and of which he notified the institution before the end of the six months' period specified in the preceding subparagraph, provided that the person concerned undergoes a medical examination arranged by the institution.

1b. Where the ex-spouse of an official, a child who ceases to be an official's dependant or a person who ceases to be treated as a dependent child within the meaning of Article 2 of Annex VII to the Staff Regulations can provide evidence that he or she is not in gainful employment, he or she may continue for a maximum of one year to be insured against sickness as provided for in paragraph 1, in his or her capacity as insured persons covered under that official's insurance; this cover shall not give rise to the levy of a contribution. This one-year period shall commence on the date of the decree absolute of divorce or of the loss of status of dependent child or of person treated as a dependent child.

2. An official who has remained in the service of the Unionuntil pensionable age or who is in receipt of an invalidity allowance shall be entitled to the benefits provided for in paragraph 1 after he has left the service. The amount of contribution shall be calculated by reference to the amount of pension or allowance.

Those benefits shall also apply to the person entitled to survivor's pension following the death of an official who was in active employment or who remained in the service of the Unionuntil pensionable age, or the death of a person entitled to an invalidity allowance. The amount of contribution shall be calculated by reference to the amount of the survivor's pension.

2a. The following shall likewise be entitled to the benefits provided for in paragraph 1, on condition that they are not in gainful employment:

•(i) former officials entitled to retirement pensions who leave the service of the Unionbefore reaching pensionable age,

•(ii) persons entitled to a survivor's pension as a result of the death of a former official who left the service of the Unionbefore reaching pensionable age.

The contribution referred to in paragraph 1 shall be calculated by reference to the former official's pension before application, where appropriate, of the reduction coefficient provided for in Article 9 of Annex VIII to the Staff Regulations. However, persons entitled to an orphan's pension shall not receive the benefit provided for in paragraph 1 unless they apply for it. The contribution shall be calculated by reference to the orphan's pension.

2b. In the case of persons entitled to a retirement pension or a survivor's pension, the contribution referred to in paragraphs 2 and 2a may not be less than that calculated by reference to the basic salary corresponding to the first step in grade AST 1.

2c. Officials dismissed in accordance with Article 51 and not entitled to a retirement pension shall likewise be entitled to the benefits provided for in paragraph 1, on condition that they are not gainfully employed and that they bear half the contribution calculated by reference to their last basic salary.

3. Where the total expenditure not reimbursed for any period of twelve months exceeds half the official's basic monthly salary or pension special reimbursement shall be allowed by the appointing authority, account being taken of the family circumstances of the person concerned, in manner provided in the rules referred to in paragraph 1.

4. Persons entitled to the foregoing benefits shall declare the amount of any reimbursements paid or which they can claim under any other sickness insurance scheme provided for by law or regulation for themselves or for persons covered by their insurance. Where the total which they would receive by way of reimbursement exceeds the sum of the reimbursements provided for in paragraph 1, the difference shall be deducted from the amount to be reimbursed pursuant to paragraph 1, with the exception of reimbursements obtained under a private supplementary sickness insurance scheme covering that part of the expenditure which is not reimbursable by the sickness insurance scheme of the Union.

C(2023)7673 - Commission Decision of 17.11.2023 amending Decision C(2007) 3195 laying down general implementing provisions for the reimbursement of medical expenses

C(2020)3002 - Commission Decision of 12.5.2020 amending the Decision of 2 July 2007 laying down general implementing provisions for the reimbursement of medical expenses

C(2019)2084 final Commission Decision of 25.3.2019 Amending Commission Decision C(2007) 3195 of 2 July 2007 laying down the general implementing provisions for the reimbursement of medical expenses

C(2007)3195 - Commission Decision laying down general implementing provisions for the reimbursement of medical expenses

Joint Rules on sickness insurance for officials of the European Communities

Article 85a

1.Where the death, accidental injury or sickness of a person covered by these Staff Regulations is caused by a third party, the Union shall, in respect of the obligations incumbent upon them under the Staff Regulations consequent upon the event causing such death, injury or sickness, stand subrogated to the rights, including rights of action, of the victim or of those entitled under him against the third party

2. The subrogation provided for by paragraph 1 shall extend inter alia to the following:

•continued payment of remuneration in accordance with Article 59 to the official during the period when he is temporarily unfit to work,

•payments effected in accordance with Article 70 following the death of an official or of a former official entitled to a pension,

•benefits paid under Articles 72 and 73 and their implementing rules, relating to insurance against sickness and accident,

•payment of the costs involved in transporting the body, as referred to in Article 75,

•supplementary family allowances paid in accordance with Article 67 (3) and with Article 2 (3) and (5) of Annex VII in respect of a dependent child suffering from serious illness, infirmity or handicap,

•invalidity allowances paid in the event of accident or sickness resulting in permanent invalidity preventing the official from performing his duties,

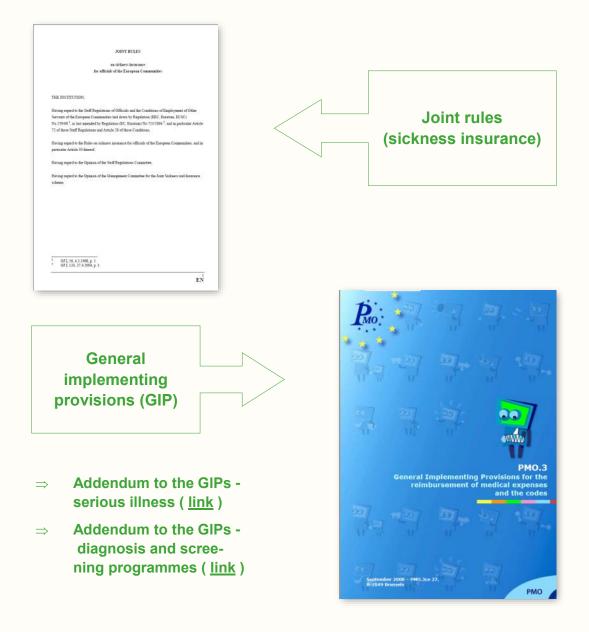
•survivor's pensions paid in the event of the death of an official or of a former official or the death of the spouse of an official or of a former official entitled to a pension, where the spouse is not an official nor a member of the temporary staff,

•orphan's pensions paid regardless of age to the child of an official or former official where that child is prevented by serious illness, infirmity or handicap from earning a livelihood after the death of the person on whom he was dependent. **3.** However, the Union shall not be subrogated to rights of compensation in respect of purely personal damage such as nonmaterial injury, damages for pain and suffering or compensation for disfigurement and loss of amenity over and above the allowance granted for those headings under Article 73.

4. The provisions of paragraphs 1, 2 and 3 may not be a bar to direct action by the Union.

 \Rightarrow Conditions of Employment of Other Servants of the European Communities (CEOS): Articles <u>28</u>, <u>95</u> and <u>112</u>

 \Rightarrow **Agreements** signed by the JSIS with health providers (*link*)



Accidents and occupational Diseases

⇒ Législations

Staff Regulations

Article 73, <u>85a</u> and 25 of Annex X to the Staff Regulation

Article 73

- 1. An official is, from the date of his entry into the service, insured against the risk of occupational disease or accidents in the manner provided for in rules drawn up by common agreement of the appointing authorities of the institutions of the Union after consulting the Staff Regulations Committee. He shall contribute to the cost of insuring against non-occupational risks up to 0.1 % of his basic salary. Such rules shall specify which risks are not covered.
- 2. The benefits payable shall be as follows:
 - •(a) In the event of death:

*Payment to the persons listed below of a lump sum equal to five times the deceased's annual basic salary calculated by reference to the amounts of salary received during the twelve months before the accident:

*to the deceased official's spouse and children in accordance with the law of succession governing the official's estate; the amount payable to the spouse shall not, however, be less than 25 % of the lump sum;

*where there are no persons of the category above, to the other descendant in accordance with the law of succession governing the official's estate;

*where there are no persons of either of the two categories above, to the relatives in the ascending line in accordance with the law of succession governing the official's estate;

*where there are no persons of any of the three categories above, to the institution.

•(b) In the event of total permanent invalidity:

Payment to the official of a lump sum equal to eight times his annual basic salary calculated on the basis of the amounts of salary received during the twelve months before the accident. •(c) In the event of partial permanent invalidity:

Payment to the official of a proportion of the sum provided for in subparagraph (b), calculated by reference to the scale laid down in the rules referred to in paragraph1.

As provided in these rules an annuity may be substituted for the payments provided for above.

The benefits listed above may be paid in addition to the benefits provided for in Chapter 3.

3. The following shall also be covered in the manner provided for in the rules referred to in paragraph 1: medical, pharmaceutical, hospital, surgical, prosthesis, radiography, massage, orthopaedic, clinical and transport expenses and any other similar expenditure incurred as a result of the accident or occupational disease. Reimbursement shall, however, only be made where the amount paid to the officials under Article 72 does not fully cover the expenditure incurred.

Article 25 of Annex X to the Staff Regulation

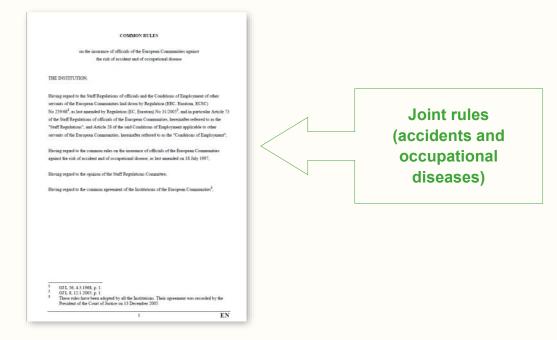
The spouse, children and other persons dependent on the official shall be insured against accidents occurring outside the Union in the countries appearing on a list adopted for this purpose by the appointing authority. Half the premium shall be paid by the official and half by the institution.

C(2023)622 final Commission Decision of 27.1.2023 on specific employment conditions applicable to the staff posted to the Commission Office in Nuuk, Greenland

C(2005)1871 General implementing provisions on insurance against the risk of accident for the spouse, children and other dependants of an official or a member of the temporary or contract staff of the European Communities serving in a third country

⇒ Conditions of Employment of Other Servants of the European Communities (CEOS):

Articles <u>28</u>, <u>44bis</u>, <u>95</u> and <u>112</u>



Accident or illness during holliday

Before you leave on holiday, do not forget:

- ⇒ JSIS membership proof (https:// webgate.ec.testa.eu/RCAM/secured/ certificates.do)
- \Rightarrow Hospitalisation direct billing form <u>(link</u>)
- \Rightarrow Accident form (<u>link</u>)
- ⇒ Inform your hierarchy and send your medical certificate within 48 hours via MyPmo or by email (<u>HR BXL CERTIFICATS MEDICAUX</u>; <u>HR LUX CERTIFICATS MEDICAUX</u>; <u>HR ISP CERTIFICATS MEDICAUX</u>) with your current contact details (the address of the place where you are staying, a phone number/email address to contact you), with also contact details of the doctor who wrote your certificate (name, address, phone/email).

Sick leave

\Rightarrow Legislation

Staff Regulation: Article 59

1. An official who provides evidence of being unable to carry out his duties by reason of illness or accident shall be entitled to sick leave.

The official concerned shall notify his institution of his incapacity as soon as possible and at the same time state his current address. He shall produce a medical certificate if he is absent for more than three days. This certificate must be sent on the fifth day of absence at the latest, as evidenced by the date as postmarked. Failing this, and unless failure to send the certificate is due to reasons beyond his control, the official's absence shall be considered as unauthorised. The official may at any time be required to undergo a medical examination arranged by the institution. If the examination cannot take place for reasons attributable to the official, his absence shall be considered as unauthorised as from the date that the examination is due to take place.

If the finding made in the examination is that the official is able to carry out his duties, his absence shall, subject to the following subparagraph, be regarded as unjustified from the date of the examination.

If the official considers the conclusions of the medical examination arranged by the Appointing Authority to be unjustified on medical grounds, he or a doctor acting on his behalf may within two days submit to the institution a request that the matter be referred to an independent doctor for an opinion.

The institution shall immediately transmit the request to another doctor agreed upon by the official's doctor and the institution's medical officer. Failing such

agreement within five days of the request, the institution shall select a person from a list of independent doctors to be established for this purpose each year by common consent of the Appointing Authority and the Staff Committee. The official may within two working days object to the institution's choice, whereupon the institution shall choose another person from the list, which choice shall be final. The independent doctor's opinion given after consultation of the official's doctor and the institution's medical officer shall be binding. Where the independent doctor's opinion confirms the conclusion of the examination arranged by the institution, the absence shall be treated as unjustified from the date of that examination. Where the independent doctor's opinion does not confirm the conclusion of that examination, the absence shall be treated for all purposes as having been justified.

2. If, over a period of 12 months, an official is absent without a medical certificate for up to three days because of sickness for a total of more than 12 days, he shall produce a medical certificate for any further absence because of sickness. His absence shall be considered to be unjustified as from the thirteenth day of absence on account of sickness without a medical certificate.

3. Without prejudice to the application of the rules on disciplinary proceedings, where appropriate, any absence considered to be unjustified under paragraphs 1 and 2 shall be deducted from the annual leave of the official concerned. In the event that the official has no outstanding leave entitlement, he shall lose the benefit of his remuneration for the corresponding period.

4. The Appointing Authority may refer to the Invalidity Committee the case of any official whose sick leave totals more than 12 months in any period of three years.
5. An official may be required to take leave after examination by the institution's medical officer if his state of health so requires or if a member of his household is suffering from a contagious disease.

In cases of dispute, the procedure laid

down in the fifth to seventh subparagraphs of paragraph 1 shall apply. 6. Officials shall undergo a medical check-up every year either by the institution's medical officer or by a medical practitioner chosen by them.

In the latter case, the practitioner's fees shall be payable by the institution up to a maximum amount fixed for a period of no more than three years by the Appointing Authority after consulting the Staff Regulations Committee.

Opinion of the Medical council

The Medical Council decides if a treatment can be reimbursed or not.

As a precaution, we recommend that you consult the list of non-reimbursable pharmaceutical products (or products that need prior authorisation) via <u>JSIS online</u> or <u>PMO</u> Mobile.

Annual medical check-up

Legislation

Staff Regulation : Article 59§6 (here above)

Administrative notice (<u>n° 45/2014</u>)

Annual medical visit: Reimbursement of additional consultations – Reimbursement of glasses for working on a computer (\underline{n}° <u>46-2014 / 09.12.2014</u>)

The Medical Service, which is responsible for occupational health medicine, offers all eligible staff (officials, temporary agents, contractual agents) a comprehensive annual preventive medical check-up that includes:

1. A thorough review of your medical history and clinical examination and advice by a medical doctor;

2. A comprehensive battery of biological (blood, urine, stool) tests that can be performed by the Medical Service laboratory:

- Haematology (full blood count); inflammation screening (CRP)
- Biochemical tests: kidney and liver function, diabetes and metabolic syndrome screening (full lipid profile, glucose);

- Control of thyroid function;
- Screening for prostatic cancer (PSA), for men > 50 years old
- Screening for colon cancer (blood in stool), for all > 50 years old

3. If medically indicated, an electrocardiogram (ECG) and a vision test;

Additional tests are offered within the framework of the annual preventive medical check-up for staff members that work in jobs with special risk profiles (e.g. interpreters, drivers, nuclear inspectors as well as other staff exposed to ionising radiation, bodyguards, kindergarten staff, kitchen staff, people working in laboratories, staff in certain delegations depending on country etc).

The annual medical check-up takes place with your General Practitioner (GP) only (Brussels), or you can choose between your GP or the Medical Service (for Luxembourg and Ispra). When the examination takes place with your GP, they carry out the clinical examination, in accordance with the Commission's standard protocol. (<u>Annual</u> <u>medical check-up</u>)

Health screening

Screening is a voluntary set of medical tests that allows for the early detection of anomalies characteristic of certain diseases. Screening is not a substitute for treatment and follow-up provided by healthcare providers. It is a preventive, not a diagnostic, tool: the results will be preliminary and may subsequently be followed by appropriate treatment.

The screening programmes offered by the JSIS to its members are different from the annual medical check-up for active staff covered by the <u>Medical Service</u>.

There are six screening programmes organised according to your gender/age. For morinformation, please consult intranet page: <u>Health screening (europa.eu)</u>



Supplementary Health Insurance

How do you know if such insurance is necessary? How do you figure out which insurance is best for you?

The – sometimes-limited – reimbursements of the JSIS (ceilings, excessiveness, exclusions,...) may yield significant costs for you in case of illness and hospitalisation

If you are ill or have an accident during your holiday, some hospitals do not accept the JSIS and require immediate payment.

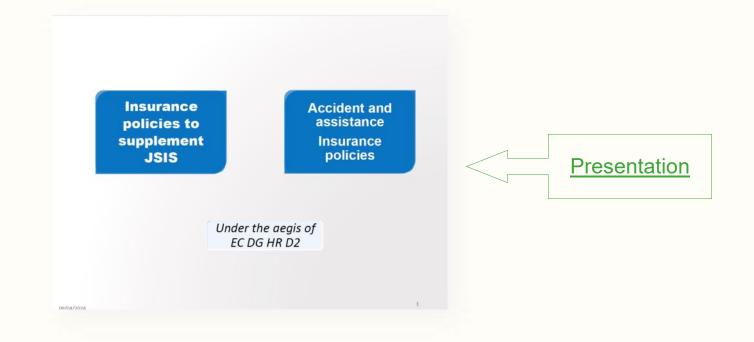
A supplementary insurance could help you avoid this situation.

Replay—Conference Supplementary Health Insurance... held on Tuesday 9 April 2024 with Jean-Pierre AMOND SFPE/SEPS

This conference was proposed by SEPS

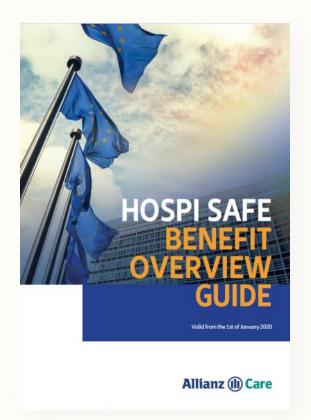


Answers to your questions (read)



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Applies only to supplementary insurance coupled with the JGIS and based on the reinibursement slip of that scheme. Should be applicable for children in the near future. Tat on supplementary health and accident insurance palacies Working document 02.02.2024



File on health and accident insurance policies to supplement JSIS – Working paper (Annex

1)

Benefit overview guide (Annex 2)

Contact

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Allianz Care Experts Experts consultations Allianz World Wide Care If having a Hospi Safe Contrat N105 00 06

> Thursday 9.00 à 16.30 - appointment : https://calendly.com/hospi-safe/20min)

Brokers recommended by Allianz

Vanbreda Risk and Benefits, « Bureau Eurlnsurances »

Rue Stévin, 144 B– 1000 Bruxelles (derrière le Berlaymont) Tél. 02 230 16 60 www.eurinsurances.be

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