

Market and Benchmark Insight Report for Belgium — 2022

Competitive benefit norms for midmarket employers in Belgium

Introduction

Van Dessel Insurance Brokers is an independent, familyowned employee benefits consultancy established in 1946. We are the fourth-largest insurance broker in Belgium, providing companies and individuals tailor-made insurance solutions and risk-control advice (life and nonlife benefits). Specializing in transport, logistics, building companies, and IT services, Van Dessel is well known for its self-labeled insurance products – VD Manager Solutions, VD Sports Solutions, and VD Horeca Solutions. The company employs 215 people in five locations over Belgium, with one office in Luxembourg and another in Slovakia.

We are a consistent value in the top five of the largest insurance brokers in Belgium and are close to our 32,000 local and international clients. Our independence and expertise ensure we offer the best possible insurance solutions.

The key advantages of working with Van Dessel include:

- Acts globally and thinking locally
- Has a direct line with clients and is highly responsive
- Offers the best value for money thanks to our independent position

We are proud to be an Asinta Partner and hope this document is of use to you.

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1. Belgian Benefits Landscape

Belgium has a comprehensive social security system that the government administers. There are three different settlements (for employees, independents, and civil servants) and seven branches, including:

- Pension
- Unemployment
- Insurance for accidents at work (employees only)
- Insurance for occupational diseases (employees only)
- Family benefit
- · Mandatory health insurance
- Annual leave

This basic insurance is extensive compared to other countries and is why, until the 90s, employee benefits were not developed. Moreover, until recently, foreign companies typically imported benefit structures for their Belgian employees.

Until now, Belgium has a distinguished payment of blue and white collars. Blue collars ('arbeiders") receive payment by the hour, whereas white collars ('bedienden) receive a monthly salary. However, this distinguishment will disappear in 2030.

At first, employers only gave supplementary employee benefit plans to white collars, especially directors and staff members. Today most white collars have a benefit settlement, but many blue collars don't. In 2030, this distinguishment ends, and every employee will receive benefits.

Still, it will be possible to have different settlements within the company. For example, directors, senior executives, and technical professionals can have superior benefits than other employees. The main rule is that all employees belonging to a category must have the same level of settlement. Benefit plans mainly offer:

- Pension build-up, additional to the legal pension
- Disability insurance
- Life insurance
- Health care insurance (in- and outpatient)

Belgium has a lot of small enterprises and independent workers. Therefore, it is also possible to provide collective benefit plans for those people. There is no minimum in the headcount, but the minimal premium threshold must reach €1500 per insured person.





2. Social Insurance in Belgium

As explained earlier, there are three different settlements in Belgium: for employees, selfemployed and civil servants. We will only look into the first two categories since the settlement for civil servants is too complicated and not very useful for Asinta members.

EMPLOYEES

Anyone wishing to employ staff in Belgium must register as an **employer** with the National Social Security Office (NSSO). After registration, the employer receives an identification number, the NSSO number. The social insurance funds help in this procedure.

EMPLOYMENT CONTRACT

The employment contract is a fundamental part of the relationship between the employee and the employer.

The rules attached to it can vary according to the worker's status: blue-collar worker, employee, salesman, domestic worker, student, or according to the working regime (full-time or part-time) or the duration of the contract (permanent or fixed-term contract).

SALARY

In Belgium, the **minimum wage** and the **working hours** are regulated by law and/or by collective labor agreements at the sector level. The actual wage is part of a larger remuneration package received by the employee

In Belgium, the applicable minimum wages are traditionally stated in collective labor agreements (CLAs) (in French) that are agreed in joint committees (in French). These collective agreements are usually declared generally binding by Royal Decree. Therefore, they apply to everyone working in the sector. If the sectoral collective agreement prescribes a minimum wage, the employee's contract may not set a lower payment amount, only a higher amount.

The minimum amounts prescribed in a collective labor agreement are gross.

To determine the net pay, i.e., the amount actually received by the worker, payroll tax, and the worker's social security contributions, must be deducted from their gross pay. By paying social security contributions, employees may receive income replacement benefits and supplementary benefits. Payroll tax is the tax deducted from an employee's pay each month.

The absolute lowest wage is the guaranteed average minimum monthly income set by the National Work Council (Nationale Arbeidsraad / NAR).

The guaranteed average minimum monthly income is not the same as the minimum monthly wage. This is because the guaranteed average minimum monthly income includes specific amounts paid out during the year. For example, an end-of-year bonus or thirteenth month is considered when checking whether the guaranteed average minimum monthly income complies with the law.

The NAR concluded many collective agreements on minimum income. The NAR website (in French) has all these collective agreements and their commentary.

Other important NAR collective agreements contain provisions for equal pay for women and men, the minimum wage for the disabled, the indices, etc.

To find out the minimum wages laid down in the sectoral collective labor agreements, please consult the Minimum Wage Database on the FPS Employment, Labour, and Social Dialogue website.

For important sectors, datasheets are available on the wages page of the FPS Employment, Labour, and Social Dialogue website. These pages summarise the working conditions that are universally applicable and agreed upon in sectoral collective agreements.



WORK ARRANGEMENT

In Belgium, work arrangement is considered 'normal' without having any exemption clause, when:

- Working hours are limited to 8 hours a day and 40 hours a week (38 hours a week annually).
- The working week is from Monday to Saturday (at the latest).
- No work is carried out overnight (between 8.00 p.m. and 6.00 a.m.).
- Rest on public holidays is respected.

Any arrangement departing from this conventional system requires, in addition to an amendment of the terms of employment, the benefit of an exemption and possibly the following of different or supplementary procedures.

MINIMUM LIMITS

The length of each service may not be less than 3 hours. A service is understood to be a continuous period of work, possibly interrupted by a short break (lunch break, coffee break, etc.). It is possible to depart from the minimum of 3 hours per service in the cases provided for by the royal decree of 18 June 1990, such as where professional premises are being cleaned.

In cases not covered by this royal decree, an exemption is possible through a collective agreement concluded at the sector or company level.

MAXIMUM LIMITS

Working hours may not exceed 8 hours a day or 40 hours a week or a shorter period established to reduce working hours.

However, since 1 January 2003, all companies need to reduce their working week to 38 hours. This is either an average working week to be observed over a reference period by granting days off in lieu or an actual length of time that must be observed each week.

THE REDUCTION OF WORKING HOURS

Various instruments may reduce the standard limits to working hours of 8 hours and 40 hours. This reduction is generally made by a collective agreement, concluded either at the sector or company level. However, it may be made through other legal instruments, such as the terms of employment or the individual employment contract.



LEAVE

In Belgium, full-time workers are generally entitled to 4 weeks' annual leave. They are also entitled to take leave in case of sickness or other circumstances.

SICK LEAVE

As an employee, if you cannot work due to illness or an accident, your employment contract will be suspended. However, during an initial period, the employer pays the salary: this is the guaranteed salary.

If you cannot work due to illness or an accident, the employment contract is suspended. During an initial period, the employer pays the salary: this is the guaranteed salary. If the incapacity for work continues for a relatively long time, you will receive a replacement income covered by compulsory sickness insurance.



In case you are unable to work due to health reasons, you need to:

- Inform your employer immediately
- Provide your employer with a medical certificate within the set deadline
- Submit to being examined by a supervising physician when required

The employer pays for the first days of incapacity for work.

- The salary of white-collar employees is guaranteed for the first 30 days of incapacity for work.
- The salary of blue-collar workers is guaranteed for the first 7 days of incapacity for work. After this, they will receive 85.88 % of their normal gross salary for 7 days. From the 15th to the 30th day of incapacity for work, blue-collar workers are entitled to a percentage of their salary, which the employer pays on top of the sickness insurance benefit. Thus, the scheme for bluecollar workers is designed so that they continue to receive their normal net salary for the first 30 days of incapacity for work.

If the incapacity for work will last for a long time, you must inform the sickness insurance fund of this by providing them with a certificate of incapacity for work completed by the doctor treating you.

White-collar workers must notify the sickness insurance fund within 28 days and blue-collar workers within 14 days of the start of the incapacity for work



THEMATIC LEAVE

In Belgium, there is the system of thematic leave, which allows workers to be absent for short periods or even to choose to reduce their working hours for various reasons. Different possibilities depend on their situation, including:

- Parental leave
- Palliative care leave
- Leave to support or care for a family member who is seriously ill
- Leave for informal care

WORKERS RIGHTS

Belgium has a strong tradition of social dialogue, in which social partners and acknowledged labor and employers' organizations determine labor policy. The interests and rights of employees are also protected within consultative bodies at different levels or via trade-union organizations active at the level of sector, statute, or profession.

The 'social partners' — recognized trade unions and employers' organizations — determine labor policy autonomously or have an important advisory role.

Social dialogue in Belgium takes place on three levels:

- Interprofessional level, for example, within the National Labour Council
- Sectoral level, for instance, within the joint committees
- Undertaking level

Within the undertaking, there are several bodies in which social dialogue takes place between the social partners. These are collective bodies where an officially recognized and appointed or democratically elected representation of workers consults with the employer or the company management. Apart from specific arrangements for managerial staff, the specified trade unions always take on the role of worker representation. Due to their position, these representatives also have special protection against dismissal.



A works council (OR) is set up in undertakings with 100 workers or more and is renewed in undertakings with 50 workers or more. It is a joint body, including representatives of both the employer and the workers. This consultative body focuses on the economic, financial, and work organization aspects of the undertaking. The OR is kept up to date regarding the financial and economic situation and future of the company by the employer. Within the OR, the employer must also provide information on significant planned changes to the organization, including the work. It is also the OR that draws up and amends the working regulations applying within the undertaking.

A committee for prevention and protection at the workplace (CPBW) is set up in undertakings with 50 workers or more in a joint committee. It has an advisory role in relation to the undertaking's welfare and occupational safety policy. It deals with the following areas:

- occupational safety,
- the protection of workers' health at work,
- · psychosocial stress caused by work,
- ergonomics,
- occupational hygiene,
- the improvement of jobs,
- the undertaking's measures relating to the human environment, in terms of their influence on points 1 to 6,
- the protection of workers from violence, bullying, and sexual harassment at work.

The CPBW prepares risk analyses and action plans relating to this policy and monitors the (internal) prevention and protection at work service, which plays a crucial role in drawing up and implementing this policy.

The composition on the workers' side of both the OR and the CPBW is determined by four-yearly workplace elections, for which the trade unions mentioned above can nominate candidates. This is also possible for the managerial staff of an undertaking via local candidate lists or the National



Confederation of Managerial Staff (NCK). Both the elected (and thus the effective and deputy workers' representatives) and the candidates for these elections have special protection from dismissal.

The trade union delegation in an undertaking is set up following sectoral provisions. This body is authorized to participate in negotiations on collective agreements and assist individual workers in the case of complaints. Furthermore, in the absence of an OR and/or CPBW, the trade union delegation performs the tasks of these bodies.

If an undertaking has neither a CPBW nor a trade union delegation, welfare legislation gives workers a say in welfare issues. Both the employer and the workers can take the initiative.

Finally, many undertakings operate not only within Belgium but increasingly in an international context. In undertakings with a transnational structure, workers are informed and consulted, among other things, in the European Works Council. There is also co-determination in undertakings registered as a Societas Europaea and in the context of cross-border mergers.

PENSION

If you are an employee, you are entitled to a Belgian retirement pension from your first workday.

To determine your pension (retirement or old age pension) as an employee, primarily the periods you have worked and the periods you have not worked (but are regarded as worked periods) are taken into account



CHILD BENEFIT

Almost every child living in Belgium is entitled to child benefits. Child benefit is paid monthly. Anyone who is not entitled to childbirth allowance or family benefit for the children in their family under any Belgian, foreign or international scheme can apply for a guaranteed family benefit.

Additionally, you are entitled to a maternity allowance for the birth of a child and an adoption allowance for the adoption of a child. These are one-off allowances.

Female workers are entitled to maternity leave when pregnant.

If you are an employee, maternity leave is 15 weeks (17 weeks in the case of multiple births). This is made up of two periods:

- Prenatal leave of a maximum of 6 weeks (maximum of 8 weeks in the case of multiple births)
- Postnatal leave of a minimum of 9 weeks

During maternity leave, your employer does not have to pay you a salary. However, you can claim a maternity benefit.



PRENATAL LEAVE

This leave will begin no earlier than 6 weeks before the expected delivery date (no earlier than 8 weeks before this date in the case of multiple births).

The prenatal leave comprises:

 An optional leave period lasting for the first 5 weeks (7 weeks in the case of multiple births): this leave can be taken in full before the obligatory prenatal rest period of 1 week, in full after the compulsory postnatal rest period of 9 weeks, or part before the obligatory prenatal rest period and part after the obligatory postnatal rest period;

- An obligatory rest period amounting to 1 week before delivery.
- If the child is born after the expected delivery date, the prenatal leave is extended to the actual date of the birth.

POSTNATAL LEAVE

The postnatal leave comprises:

- an obligatory leave period amounting to 9 weeks immediately after the delivery;
- if necessary, following this obligatory postnatal leave, the optional prenatal leave that was not taken (maximum of 5 weeks or maximum of 7 weeks in the case of multiple births).

A female employee who gives birth to more than one child can extend her postnatal leave by a maximum of 2 weeks on request.

If the newborn child needs to stay in hospital for longer than the first 7 days following birth, the female worker can request the extension of the postnatal leave by a period equal to the amount of time her child remains hospitalized after the first 7 days. The duration of this extension or these extensions may not amount to more than 24 weeks.

Pregnant employees and those who have just given birth are protected from dismissal. This means that they cannot be dismissed by their employers from the moment at which the employer becomes aware of the pregnancy up until 1 month after the end of the postnatal leave, except for reasons not relating to the physical condition resulting from the pregnancy or childbirth.

The maternity benefit is fully covered by the sickness and invalidity insurance (maternity insurance). The sickness insurance fund pays maternity benefits. To receive maternity benefits, you must submit an application to your health

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insurance fund, together with a medical certificate stating the expected delivery date and the date on which the period of maternity leave will begin.

If you are in employment, you must prove that you have completed a waiting period of 6 months at the start of maternity leave. During these 6 months, you must demonstrate a minimum working volume and that you have paid sufficient social contributions. This minimum working volume is 120 days if you are a full-time worker.

The maternity benefit amounts to:

- 82 % of the non-ceiled salary for the first 30 days;
- 75 % of the ceiled salary from the 31st day onwards.
- If you are unemployed, from 1 March 2020, the benefit will, in principle, amount to:
- a basic payment equivalent to the amount of your unemployment benefits + an allowance of 19.5 % of the gross salary ceiled for the first 30 days;
- a basic payment equivalent to the amount of your unemployment benefits + an allowance of 15 % of the gross salary ceiled from the 31st day onwards

PATERNITY OR CHILDBIRTH LEAVE FOR EMPLOYEES

Regardless of the working regime in which he is employed (full-time or part-time), each male employee has the right to be absent from work for 10 days following the birth of a child whose parentage has been established on his part. Workers who are not the biological parent of the child in question also have this right provided that, at the time the child is born, they are married to the person in respect of whom the parentage has been established or are legally or permanently and affectively cohabiting with this person.

The employee is free to choose these 10 days within 4 months, starting from the date of birth. They do not necessarily need to be taken all at once but can be spread over 4 months from the birth at the worker's discretion. The date of the

birth is considered to be the first day of this period of 4 months.

In the event of the birth of twins or multiple children, the 10 days of paternity leave are only granted once.

During the first 3 days of the paternity/childbirth leave, the employee retains his full salary at his employer's expense.

For the following 7 days of the paternity/childbirth leave, the employee does not receive any salary but is granted a benefit via the payment institutions of the insurance provider for medical care and benefits (health insurance funds). The worker must request this benefit himself from his health insurance fund on presentation of the birth certificate.

To be entitled to this benefit, you must demonstrate that you have completed a waiting period of 6 months. During these 6 months, you must demonstrate a minimum working volume and that you have paid sufficient social contributions. This minimum working volume is 120 days if you are a full-time employee.

The paternity/childbirth benefit amount is set at 82 % of the foregone (ceiled) gross salary.

Workers who take paternity or childbirth leave are protected from dismissal. This means that, except for a reason unrelated to this leave, the employer cannot unilaterally terminate the employment contract for a period starting when the employer receives written notification of the intention to take paternity or childbirth leave up until 3 months after this notification.

During the paternity and childbirth leave, you are entitled to the paternity and childbirth benefit. This is a fixed-rate amount per day or per half-day.





SICKNESS BENEFITS

If you are an employee, in the majority of cases, there will be an initial period in which your employer will continue to pay your salary:

- white-collar workers receive 100% of their salary in the first month;
- blue-collar workers receive:
 - 100% of their salary during the first seven days of incapacity for work;
 - 85,88% from the 8th to the 14th day of incapacity for work;
 - From the 15th to the 30th day: 25,88% of their pay below the ceiling set by the sickness and disability insurance scheme and 85.88% of their pay above the ceiling.

At the end of this initial period of guaranteed salary paid by the employer, the health insurance fund takes over the responsibility for making the payments.

You must provide the advising doctor working for your health insurance fund with a medical certificate from your treating physician. This must be done at the very latest at the end of the initial period in which your employer continues to pay your salary. This medical certificate must state how long you have been incapacitated for work.

The benefit amount corresponds to 60% of your salary, and a daily capped amount applies.

From the seventh month of incapacity for work, the benefit amount can be increased to align with the minimum benefit amount.

From that date onwards, the daily allowance may not be less than a specific fixed amount. Depending on your situation, specific minimal amounts apply.

If you are still incapacitated for work after 1 year, your sickness benefit is converted into a disability benefit.

BENEFITS FOR ACCIDENTS AT WORK AND OCCUPATIONAL DISEASES

You are entitled to a benefit for an accident at work if you have an accident that causes an injury during, or as a result of, work carried out as an employee.

Every employee who is incapacitated as a result of an accident at work is entitled to compensation. An accident at work is:

- a sudden event that causes an injury and that happens during, or as a result of, work carried out as an employee;
- an accident that occurs on the way to or from work

This insurance is installed and arranged by private insurance companies, not by the state. Every employer has an obligation to start up this insurance from the first day he offers employment to workers. If not, he will be fined.

You are entitled to a benefit for an occupational disease if you become ill because you work in a sector in which you are exposed to an occupational disease. There is an official list of occupational diseases. However, it is possible to have a disease that does not appear on the list recognized as an occupational disease.

The following are insured for the effects of an occupational disease:

- Private-sector employees working under a contract of employment. These include:
 - Students and trainees, even if they are unpaid
 - Disabled persons undergoing rehabilitation
 - Job seekers engaged in vocational training
 - Apprentices and students at risk of contracting an occupational disease during their training
- Public-sector employees



DISABILITY BENEFITS

If it has been officially established that you cannot work for more than one year, you become incapacitated for work. The period of incapacity for work, therefore, starts from the second year of your incapacity for work.

As a salaried employee, you must be registered with a health insurance fund in the capacity of beneficiary. In Belgium, health insurance funds are entitled to pay medical care and benefits.

You must also have:

- Worked 180 days over a period of 1 year (certain periods of inactivity, for example, as a result of paid leave or sickness, are regarded as working days)
- Paid the minimum social security contributions
- Been recognized as being incapacitated for work for at least 1 year

If you are an employee, the amount of the benefit depends on your family situation and the salary you were earning when you ceased your professional activity due to illness or an accident.

The daily allowance cannot be lower than a specific amount, which is set once a year.

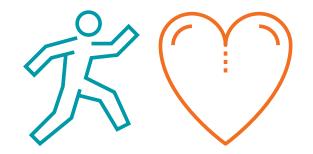
UNEMPLOYMENT BENEFITS

If you have worked and paid social security contributions as an employee in Belgium or another European Union country, you can enjoy an unemployment benefit in Belgium when you meet the applying conditions and complete some formalities.

Please note: Belgium does not have an unemployment insurance scheme for the self-employed. This information concerns employees only.

INTEGRATION INCOME

Under certain conditions, when your income does not grant you a decent living, you can benefit from social support, more specifically, an integration income. It is provided at a local level by the Public Social Welfare Centre (Openbaar Centrum voor Maatschappelijk Welzijn — OCMW), which offers, amongst other things, financial support.



3. Insured Benefits Overview

The legal scheme is extensive but lacks optimal insurance in several cases. Therefore the following benefits are highly recommended.

- 1. Medical Insurance
 - a. Supplemental to social security. Reimburses the costs that are not paid by the legal health insurance. Especially useful in case of serious disease and long-term hospitalization. Outpatient care (especially dental care) becomes more and more expensive and is in many cases not paid back by social security
 - b. FOR WHO: all employees, white and blue collars, and self-employed

2. Additional Allowance in Case of Disability Due to Illness or Accident

- a. Offers a supplemental income above the allowance of social security until a maximum of 80 % of the gross salary
- b. FOR WHO:
 - Staff members, management, board members: as social security only pays allowances based on a gross maximum wage of €45.856,89, everyone who has a larger annual salary is not reimbursed for the part above that threshold by social security
 - ii. Self-employed: their legal allowance is a fixed amount (+/- 800 EUR monthly) which is much too low.MARK: in Belgium, lots of management members of companies are self-employed!

- 3. Life Insurance
 - a. Pays out a lump sum to the family members in case of death of the insured person
 - b. FOR WHO: everybody who has a family
- 4. Pension Build-Up
 - a. Offers an additional pension besides the legal pension
 - b. FOR WHO:
 - i. Everybody, because the legal pension is relatively low
 - ii. Especially for people who gain more than
 €60.026,75 gross per year (this is the maximum salary that is taken into account for the calculation of the legal pension)
 - iii. Self-employed: they get a meager legal pension because they pay less social contributions than employees



4. Insured Benefits – Design and Typical Costs

Benefit	Comment/Cost	Lower Quartiles	Medium Quartile	Upper Quartile
Medical and outpatient insurance	Most valued benefit. Employees have access to inpatient benefits with free choice of hospital, doctor, room. Reimbursements are in addition to the National Health Insurance. Third-party payer regime usually applies.	This is often provided at a sectoral level for employees only. Employers can choose to offer similar insurance for family members.	Employer offers insurance to the employees. Family members can be covered but at employee's expense.	Employer offers insurance to the employees. Family members can be covered but at employee's expense.
Life and Income Protection / Long term disability Insurance	 Following benefits are usually included in the group insurance: Death: a lump sum of, for example, 1 x yearly salary Waiver of premium Long term disability After a deductible period of 1 month, the insurance company pays a replacement income which, together with the payment from the National Health insurance, amounts to a maximum of 80% of the last known salary. 	No additional benefits are offered. Sometimes only senior staff.	All employees covered. They often have a choice to insure certain benefits and how high these benefits need to be.	All employees covered. Mostly the maximum benefits are provided.
Pension	Defined contribution scheme. Funding through an insurance contract. Payout via lump sum at the time of taking the statutory pension.	Often provided at a sectoral level Limited employer contribution, for example, 1%–2%	Contributions vary between 2% and 6% of each employee's yearly salary.	Contribution varies between 5% and 10%. Often also a personal contribution of the employee to increase pension capital build-up.

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5. Onboarding and Policy Administration

1. Onboarding

In Belgium, van Dessel Insurance brokers handle the onboarding process and assist both employer and employee with the decisions needed regarding their pension and life and income protection.

Employee communication, we offer the following services:

- Staff presentations
- Benefit communication packets, including new employee packets
- Benefit videos/webinars
- Insurance companies offer online portals to consult on the benefits of the group insurance.
- MyPension.be is the online portal of the Belgian Government.
- All of the additional pension schemes are incorporated and can be accessed by employees at any time.

2. Full Benefits Administration

The whole team with Van Dessel Insurance Brokers has at least a Bachelor's degree in insurance. We provide full policy administration support, including the daily administration, any questions the employer or employee might have, ensuring policies are up to date and market-based, and help with claims.

Insurance companies also offer online systems where the employer can work independently with Van Dessel Insurance Brokers as a support system to answer any questions raised.

3. Remuneration

- 2% commission on premiums for pension and life
- 5% commission for waiver of premium, disability allowance, and medical cover

6. Contact

Please contact Paul Vinck if you wish to inquire about employee benefits in Belgium.



Paul Vinck

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