PREDLOG

Na osnovu člana 21 stav 2 Zakona o zaključivanju i izvršavanju međunarodnih ugovora („Službeni list CG", broj 77/08), Vlada Crne Gore na sjednici od _____ 2025. godine, donijela je

ODLUKU O OBJAVLJIVANJU ADMINISTRATIVNOG SPORAZUMA ZA SPROVOĐENJE SPORAZUMA IZMEĐU CRNE GORE I REPUBLIKE ALBANIJE O SOCIJALNOM OSIGURANJU

Član 1

Objavljuje se Administrativni sporazum za sprovođenje Sporazuma između Crne Gore i Republike Albanije o socijalnom osiguranju, potpisan u u Podgorici, 27. februara 2023. godine, u originalu na crnogorskom, albanskom i engleskom jeziku.

Član 2

Tekst Sporazuma iz člana 1 ove odluke, u originalu na crnogorskom i engleskom jeziku glasi:

ADMINISTRATIVNI SPORAZUM ZA SPROVOĐENJE SPORAZUMA IZMEĐU CRNE GORE I REPUBLIKE ALBANIJE O SOCIJALNOM OSIGURANJU

Na osnovu člana 26 stav 1 Sporazuma između Crne Gore i Republike Albanije o socijalnom osiguranju, koji je potpisan u Podgorici dana 27. februara 2023. godine (u daljem tekstu: Sporazum), nadležni organi država ugovornica iz člana 1 stav 1 tačka 4 Sporazuma dogovorili su sljedeće:

DIO I

OPŠTE ODREDBE

Član 1

Definicije pojmova

Pojmovi koji se upotrebljavaju u ovom sporazumu imaju isto značenje kao u članu 1 Sporazuma.

Član 2

Organi za vezu

(1) U skladu sa članom 25 Sporazuma, kao organi za vezu određuju se:

U Crnoj Gori:

- Ministarstvo rada i socijalnog staranja i Ministarstvo zdravlja, koja svoje nadležnosti iz djelokruga organa za vezu mogu prenositi na nadležne nosioce;

U Republici Albaniji:

- Za socijalno osiguranje:Institut za socijalno osiguranje;
- Za davanje u naturi: Fond obaveznog zdravstvenog osiguranja;

(2) U primjeni Sporazuma i ovog sporazuma organi za vezu sarađuju, uzajamno pružaju pravnu i administrativnu pomoć i mogu se neposredno obraćati nadležnim organima, nosiocima i zainteresovanim licima ili njihovim punomoćnicima.

(3) Organi za vezu dviju država ugovornica će, u cilju ispunjavanja obaveza propisanih Sporazumom i ovim sporazumom, utvrditi odgovarajuće dvojezične obrasce.

Član 3

Nosioci nadležni za primjenu Sporazuma

Nosioci nadležni za primjenu Sporazuma, su:

U Crnoj Gori:

1. Bolest

- Fond za zdravstveno osiguranje Crne Gore, Podgorica;

2. Starost, smrt i invalidnost

-Fond penzijskog i invalidskog osiguranja Crne Gore, Podgorica.

3. Povrede na radu i profesionalne bolesti

-Fond za zdravstveno osiguranje Crne Gore, Podgorica;

-Fond penzijskog i invalidskog osiguranja Crne Gore, Podgorica.

4. Nezaposlenost

-Zavod za zapošljavanje Crne Gore, Podgorica.

U Republici Albaniji:

- Za socijalno osiguranje:Institut za socijalno osiguranje;

- Za davanje u naturi: Fond obaveznog zdravstvenog osiguranja;

DIO II
ODREDBE O PRAVNIM PROPISIMA KOJI SE PRIMJENJUJU

Član 4

Primjena čl. 7 – 9 Sporazuma

(1) U slučajevima iz čl. 7 do 9 Sporazuma nadležni nosilac države ugovornice, čiji se pravni propisi primjenjuju, izdaje, na utvrđenom dvojezičnom obrazcu, potvrdu o primjeni tih pravnih propisa u određenom periodu.

(2) Obrazac iz stava 1 ovog člana, na zahtjev zaposlenog i poslodavca, odnosno lica koje obavlja samostalnu djelatnost, izdaje:

U Crnoj Gori:
- nadležna organizaciona jedinica Fonda za zdravstveno osiguranje

U Republici Albaniji:
- Institut za socijalno osiguranje;

(3) Nosioci iz stava 2 ovog člana međusobno razmjenjuju kopije izdatih obrazaca;

(4) U slučaju produženja privremenog upućivanja, nakon isteka prvih 24 mjeseca, nadležnom organu države ugovornice, čiji pravni propisi treba da nastave da se primjenjuju ili nadležnom nosiocu kojeg taj organ ovlasti, zaposleni i/ili poslodavac ili lice koje obavlja samostalnu djelatnost mogu podnijeti zajednički zahtjev za saglasnost. U ovom slučaju, taj organ ili nosilac će tražiti saglasnost nadležnog organa ili nadležnog nosioca druge države ugovornice. Nakon prijema saglasnosti, nadležni nosilac države ugovornice čiji pravni propisi treba da nastave da se primjenjuju, zavešće odobrenje o primjeni pravnih propisa i uputiti kopiju istog nosiocu druge države ugovornice.

DIO III
POSEBNE ODREDBE

GLAVA 1
Bolest i materinstvo

Član 5
Sabiranje perioda osiguranja

(1) Radi primjene člana 10 Sporazuma, nadležni nosioci država ugovornica, na utvrđenom dvojezičnom obrazcu, potvrđuju periode osiguranja navršene prema pravnim propisima koje primjenjuju.

(2) Obrazac iz stava 1 ovog člana, na zahtjev osiguranika ili nosioca osiguranja druge države ugovornice na čijoj teritoriji to lice ima prebivalište ili boravište izdaje nosilac države ugovornice na čijoj teritoriji je osiguranik zadnji put bio osiguran.

Član 6

Davanja u naturi u slučaju boravišta na teritoriji druge države ugovornice

(1) Radi korišćenja prava na hitnu zdravstvenu zaštitu, lice iz čl. 11 st. 2, 3 i 6 i člana 12 st. 4 i 5 Sporazuma obavezno je da nosiocu u mjestu boravišta ili pružaocu zdravstvenih usluga u mjestu boravišta, podnese, na utvrđenom dvojezičnom obrascu, potvrdu o pravu na davanje u naturi, u skladu sa pravnim propisima države boravišta.

(2) Nakon dobijanja obavještenja o bolničkom liječenju, u cilju primjene člana 11 ovog Sporazuma, nosioci mjesta boravišta odnosno pružaoci usluga zdravstvene zaštite će tokom trajanja bolničkog liječenja obavijestiti nadležnog nosioca o datumu prijema u bolnicu, očekivanog trajanja liječenja odnosno očekivanog datuma otpusta.

(3) Obrazac iz stava 1 ovog člana izdaje nadležni nosilac, na zahtjev podnosioca zahtjeva, prije nego što napusti teritoriju države ugovornice u kojoj on/ona ima prebivalište i naznačava dužinu perioda u kojem se takvo davanje može dodijeliti. Ako navedeno lice ne priloži navedeni obrazac, nosilac po mjestu boravka se može obratiti nadležnom nosiocu sa zahtjevom za dobijanje istog.

Član 7

Obezbjeđivanje proteza, medicinskih sredstava i drugih davanja u naturi veće vrijednosti

(1) Odobrenje proteza, medicinskih sredstava kao i drugih davanja veće vrijednosti iz člana 11 stav 5 Sporazuma izdaje se na utvrđenom dvojezičnom obrascu, kada vrijednost tih usluga prelazi 150 eura preračunato u nacionalnu valutu nosioca koji ih odobrava.

(2) Davanja u smislu stava 1 ovog člana su:

a) Proteze, protetika
b) Ortopedska obuća
c) Očna protetika
d) Slušni aparati
e) Zamjena za pomagala navedena od a)-d)

(3) Za obezbjeđivanje proteza, medicinskih sredstava i ostalih davanja veće vrijednosti iz stava 1 ovog člana, nosioci po mjestu prebivališta ili boravišta će, putem predviđenih obrazaca, tražiti prethodnu saglasnost nadležnog nosioca, osim ako se odobrenje davanja ne može odgoditi zbog ugrožavanja života ili zdravlja podnosicoa zahtjeva.

Član 8

Davanja u naturi u slučaju prebivališta na teritoriji druge države ugovornice za upućene radnike i penzionere

(1) Da bi se ostavrilo pravo na davanje u naturi shodno članu 11 stav 4 i članu 12 st. 1, 2 i 3 Sporazuma potrebno je da se lice registruje kod nosioca mjesta prebivališta podnošenjem dvojezičnog obrazca, u dva primjerka, kojim nadležni nosilac potvrđuje pravo lica na ta davanja i dužinu perioda u toku kojeg može da dobija davanje. Ako lice ne dostavi pomenuti obrazac, nosilac mjesta prebivališta obratiće se nadležnom nosiocu radi pribavljanja istog. Ovaj obrazac se koristi i za članove porodice iz člana 11 stav 6 i člana 12 stav 5 Sporazuma u skladu sa pravnim propisima države ugovornice

(2) Nosilac mjesta prebivališta obavijestiće nadležnog nosioca o registraciji.

(3) Nadležni nosilac će obavijestiti nosioca mjesta prebivališta o prestanku prava na davanje u naturi.

(4) Dodati novi

Član 9

Naknada troškova

(1) U skladu sa članom 13 Sporazuma, davanja u naturi, koja su odobrena u skladu sa čl. 11 i 12 Sporazuma nadoknadiće nadležni nosioci na osnovu stvarnih troškova davanja u naturi, koje je pružio nosilac države prebivališta ili boravišta, na način kako je iskazano u svakom obrascu pojedinačno o stvarnim troškovima, a koje nosioci dostavljaju za svako osigurano lice, pri čemu se ne uračunavaju administartivni troškovi.

(2) Naknada troškova se vrši u valuti EURO. Za albanskog nosioca, kurs EUR-a u odnosu na nacionalnu valutu određuje se prema zvaničnom kursu Nacionalne banke na dan podnošenja zahtjeva za naknadu troškova.

(3) Zahtjev za naknadu troškova dostavlja se na kraju svakog polugodišta, a najkasnije u roku od 2 godine, i plaća se u roku od 15 mjeseci od poslednjeg dana mjeseca u kome je zahtjev podnijet.

(4) U slučaju odbijanja isplate troškova, dokumentacija koja je u vezi sa zahtjevom za naknadu troškova mora biti dostavljena drugom nadležnom nosiocu, prije isteka dogovorenog roka za plaćanje a najkasnije u roku od 24 mjeseci od poslednjeg dana mjesca u kome je zahtjev podnijet.

(5) U slučaju kada nosilac mjesta prebivališta ili boravišta, koji je izvršio davanje u naturi, ne odgovori na prigovor podnijet u roku predviđenom stavom 4 ovog člana, odnosno 18 mjeseci od dana prijema zahtjeva, prigovor se smatra usvojenim.

Član 10

Novčana davanja

(1) Kako bi ostvario pravo na davanja u skladu sa članom 14 Sporazuma, lice podnosi zahtjev ljekaru, odnosno komisiji na teritoriji države ugovornice mjesta prebivališta ili boravišta, koji će izvršiti procjenu njegovog zdravstvenog stanja, kako bi potvrdio postojanje spriječenosti za rad i procijeniti dužinu njenog trajanja, u skladu sa pravnim propisima država ugovornica.

(2) Sertifikat se dostavlja nadležnom nosiocu u roku koji je određen pravnim propisima države ugovornice nadležnog nosioca.

(3) Isplata se vrši neposredno osiguranom licu u skladu sa pravnim propisima koje primjenjuje nadležni nosioc.

GLAVA 2

Starosna, invalidska i porodična penzija

Član 11

Podnošenje zahtjeva

(1) Nosilac jedne države ugovornice prima zahtjeve za davanje prema pravnim propisima druge države ugovornice. Nosilac države ugovornice kod koga je podnijet zahtjev za davanje zatražiće od podnosioca zahtjeva da priloži raspoloživu dokumentaciju potrebnu nadležnom nosiocu druge države ugovornice za obradu zahtjeva, a naročito podatke o periodima, vrsti i mjestima zaposlenja, odnosno obavljanja djelatnosti, kao i podatke o poslodavcu ili licu koje obavlja djelatnost.

(2) Nadležni nosilac države ugovornice, koji primi zahtjev za davanja, isti će bez zadržavanja proslijediti organu za vezu ili nadležnom nosiocu druge države ugovornice, navodeći datum prijema istog.

Član 12

Obrada zahtjeva i pokretanje postupka

(1) Nadležni nosioci su dužni da se međusobno obavještavaju o svakom zahtjevu za davanje i svim činjenicima od značaja za ostvarivanje prava i utvrđivanje visine davanja, pri čemu potvrđivanje podataka na utvrđenom dvojezičnom obrascu zamjenjuje dostavljanje originalne dokumentacije.

(2) Nadležni nosilac kome je podnijet zahtjev za davanje potvrđuje na utvrđenom dvojezičnom obrascu, nosiocu druge države ugovornice periode osiguranja koji se uzimaju u obzir prema pravnim propisima koje on primjenjuje.

(3) Radi utvrđivanja invalidnosti nosilac u mjestu prebivališta odnosno boravišta dostavlja utvrđeni dvojezični obrazac u kojem su sadržani rezulati vještačenja.

Član 13

Obavještenje o završetku postupka za utvrđivanje prava na davanje

Nadležni nosioci se međusobno obavještavaju, na utvrđenom dvojezičnom obrascu, o završetku postupka za utvrđivanje prava na davanje, pri čemu navode:

1. u slučaju priznavanja prava na davanje-vrstu i početak davanja;

2. u slučaju odbijanja-razlog odbijanja.

Član 14

Obavještavanje

Nadležni nosioci se međusobno obavještavaju o svim raspoloživim činjenicama značajnim za davanje, a naročito o:

1. utvrđivanju prava na davanje;
2. prestanku prava na davanje, odnosno obustavi davanja;
3. promjeni u periodima osiguranja, uz potvrdu novih perioda osiguranja;
4. početku zaposlenja odnosno obavljanja djelatnosti korisnika prava;
5. novom bračnom statusu udovice, odnosno udovca;
6. promjeni adrese;
7. prestanku školovanja djeteta i
8. smrti korisnika prava.

Član 15

Isplata novčanih davanja

(1) Nadležni nosioci država ugovornica će davanja isplaćivati direktno korisnicima, u skladu sa pravnim propisima koje primjenjuju.

(2) Nadležni nosilac će od korisnika informacije u vezi sa mjestom prebivališta, bankom, žiro računom na koji treba isplaćivati davanja, kao i o ostalim podacima od značaja za isplatu davanja.

(3) Korisnik koji prima davanja od jedne države ugovornice, a ima prebivalište na teritoriji druge države ugovornice, obavezan je dva puta godišnje dostaviti potvrdu o životu nadležnom nosiocu, koja će biti popunjena i potpisana od strane korisnika i ovjerena od strane nadležnog organa odnosno nadležnog nosica.

(4) Ukoliko korisnik prava ne dostavi potvrdu iz stava 3 ovog člana, u predviđenom roku, privremeno će se obustaviti isplata penzije do prijema potvrde, osim ako pravnim propisima države ugovornice nije drugačije propisano.

Član 16

Razmjena statističkih podataka

Organi za vezu, do kraja, juna tekuće godine, međusobno razmjenjuju statističke podatke o broju korisnika po vrsti davanja i isplaćenim iznosima na teritoriji druge države ugovornice za prethodnu godinu.

GLAVA 3

Povreda na radu i profesionalna bolest

Član 17

Davanja u naturi

(1) U cilju ostvarivanja prava na davanja u naturi za slučaj povrede na radu ili profesionalne bolesti, u skladu sa članom 21 Sporazuma, osiguranik, na koga se primjenjuju pravni propisi jedne države ugovornice, a koji ima prebivalište ili boravište na teritoriji druge države ugovornice, nosiocu države prebivališta ili boravišta podnosi obrazac, koji je izdao nadležni nosilac, koji potvrđuje da on/ona ima pravo na davanja u naturi za slučaj povrede na radu ili profesionalne bolesti. Navedeni obrazac sadrži vrstu davanja u naturi kao i period u toku kojeg će se davanje pružati. Ukoliko osiguranik ne posjeduje navedeni obrazac, nosilac države prebivališta ili boravišta se može obratiti, putem dogovorenih obrazaca nadležnom nosiocu, sa zahtjevom za dostavljanje istog.

(2) Odredba člana 7 stav 1 i 3, ovog sporazua, se primjenjuje i u slučaju povrede na radu i profesionalne bolesti.

(3) Nakon dobijanja obavještenja o bolničkom liječenju, u cilju primjene člana 21 ovog Sporazuma, nosioci mjesta boravišta odnosno pružaoci usluga zdravstvene zaštite će tokom trajanja bolničkog liječenja obavijestiti nadležnog nosioca o datumu prijema u bolnicu, očekivanog trajanja liječenja odnosno očekivanog datuma otpusta

(4) Naknadu troškova davanja u naturi iz člana 21 i člana 26 stav 7 Sporazuma vršiće nadležni nosilac, na osnovu dokumentacije koja sadrži pregled stvarnih troškova izdat od strane nosioca mjesta boravišta ili prebivališta za svakog osiguranika pojedinačno, izuzimajući administrativne troškove.

(5) Naknada ovih troškova će se izvršiti nakon utvrđivanja karaktera povrede na radu ili profesionalne bolesti od strane nadležnog nosioca, u skladu sa odredbama pravnih propisa koje on primjenjuje.

(6) Odredbe člana 9 st. 2, 3, 4, 5 i 6 ovog sporazuma, primjenjuju se i u slučaju povrede na radu i profesionalne bolesti

Član 18

Razmjena informacija i dokumentacije između nosilaca u vezi sa povredom na radu ili profesionalnom bolesti

(1) Ako je povreda na radu nastala ili je profesionalna bolest dijagnostifikovana na teritoriji jedne države ugovornice, koja nije država nadležnog nosioca, prijava povrede na radu ili registracija profesionalne bolesti utvrđuje se u skladu sa pravnim propisima koje primjenjuje nadležni nosilac, bez obzira na pravne propise koji su na snazi na teritoriji države ugovornice u kojoj se dogodila povreda na radu ili je registrovana profesionalna bolest.

(2) Nosilac države ugovornice na čijoj teritoriji se dogodila povreda na radu ili je registrovana profesionalna bolest, proslijediće nadležnom nosiocu svu potrebnu dokumentaciju, uključujući izvještaj o zdravstvenom stanju lica, zajedno sa medicinskom dokumentacijom, na kraju trajanja nesposobnosti za rad.

Član 19

Osporavanje karaktera povrede na radu ili profesionalne bolesti

(1) U slučaju kada nadležni nosioc osporava karakter povrede na radu ili profesionalne bolesti, o tome će bez odlaganja obavijestiti nosioca države prebivališta ili boravišta koji je pružio davanja u naturi, koja će se u tom slučaju, počev od dana pružanja, smatrati davanjima za slučaj bolesti, ako lice u pitanju ispunjava uslove za njihovo pružanje, a naknada troškova će se izvršiti u skaldu sa pravnim propisima iz oblasti bolesti i materinstva.

(2) Ako nadležni nosilac potvrdi osnovanost povrede na radu ili profesionalne bolesti, pružena davanja u naturi će se smatrati davanjima za slučaj povrede na radu ili profesionalne bolesti, a priznaju se od dana nastanka povrede na radu ili dijagnostifikovanja profesionalne bolesti.

GLAVA 4

Nezaposlenost

Član 20

Sabiranje perioda osiguranja

(1) U cilju primjene člana 24 Sporazuma, podnosilac zahtjeva može nadležnom nosiocu podnijeti dvojezični obrazac, koji je izdao nosilac nadležan u drugoj državi ugovornici, kojim se potvrđuju periodi osiguranja navršeni u skladu sa pravnim propisima te države ugovornice, kao i periode u kojima je bio korisnik davanja za slučaj nezaposlenosti.

(2) Ako podnosilac zahtjeva ne dostavi obrazac iz stava 1 ovog člana nadležni nosilac ili organ za vezu tražiće od organa za vezu ili nosioca nadležnog u drugoj državi ugovornici navedeni obrazac.

DIO IV

ZAVRŠNE ODREDBE

Član 21

Izmjene i dopune

(1) Ovaj Sporazum se može mijenjati i dopunjavati uzajamnom pisanom saglasnošću država ugovornica.

(2) Izmjene i dopune iz stava 1 ovog člana će biti sastavni dio ovog Sporazuma.

Član 22

Stupanje na snagu

Ovaj sporazum stupa na snagu danom stupanja na snagu Sporazuma i ima isti period važenja kao i Sporazum.

Potpisano u Podgorici, dana 27. februara 2023. godine, u dva originalna primjerka, na crnogorskom, albanskom i engleskom jeziku, pri čemu su svi tekstovi podjednako vjerodostojni. U slučaju razlike u tumačenju, mjerodavan će biti tekst na engleskom jeziku.

Za nadležne organe
Crne Gore

Admir Adrović, s.r.

Za nadležne organe
Republike Albanije

Delina Ibrahimaj, s.r

ADMINISTRATIVE AGREEMENT

ON THE APPLICATION OF THE AGREEMENT

BETWEEN

MONTENEGRO AND REPUBLIC OF ALBANIA

ON SOCIAL SECURITY

Pursuant to Article 26, paragraph 1 of the Agreement between Montenegro and Republic of Albania on Social Security signed at Podgorica on February 27, 2023 (hereinafter referred to as the Agreement) the Competent Authorities of both Contracting States, referred to in Article 1 paragraph 1 subparagraph 4 of the Agreement, have agreed as follows:

PART I
GENERAL PROVISIONS

Article 1
Definitions of terms

The terms used in this Agreement shall have the same meaning as in the Article 1 of the Agreement.

Article 2
Liaison bodies

(1) The liaison bodies referred to in Article 25 of the Agreement are specified as follows:

For Montenegro:

- Ministry of Labour and Social Welfare and Ministry of Health, whose competencies from the scope of the liaison bodies can be transferred to the Competent Institutions.

For the Republic of Albania:

- for social insurance: Social Security Institute
- for benefits in kind: Compulsory Healthcare Insurance Fund

(2) For the application of the Agreement and this Administrative Agreement the Liaison Bodies shall cooperate, provide mutual legal and administrative assistance, and can directly address the Competent Institutions, Institutions and the persons concerned or the persons authorized by them.

(3) The Liaison Bodies shall jointly determine appropriate bilingual forms for the application of the Agreement and this Administrative Agreement.

Article 3
Institutions competent for the application of the Agreement

Institutions competent for the application of the Agreement are:

For Montenegro:

1) For the legislation covering health insurance:
- Fund for Health Insurance of Montenegro, Podgorica.

2) For the legislation covering old age, death and invalidity:
- Fund for Pension and Disability Insurance of Montenegro, Podgorica.

3) For the legislation covering accidents at work and occupational diseases:
- Fund for Pension and Disability Insurance of Montenegro, Podgorica;
- Fund for Health Insurance of Montenegro, Podgorica.

4) For the legislation covering unemployment
- Employment Agency of Montenegro, Podgorica

For the Republic of Albania:

- For the legislation covering social insurance: Social Insurance Institute
- For the legislation covering health insurance: Compulsory Healthcare Insurance Fund

PART II
APPLICABLE LEGISLATION

Article 4
Application of Articles 7-9 of the Agreement

(1) For the application of Articles 7 – 9 of the Agreement, the Competent Institution of the Contracting State, whose legislation is applied, shall issue a confirmation of the application of such legislation in certain period, at the determined appropriate bilingual form.

(2) Certificate referred to in Paragraph 1 of this Article, shall be issued upon the request of the insured person and/or employer or self-employed person, by:

In Montenegro:
- The competent organizational unit of the Fund for Health Insurance of Montenegro

In the Republic of Albania
- Social Insurance Institute

(3) Institutions referred to in paragraph 2 of this Article shall exchange copies of forms issued.

(4) In case of the extension of the posting period over the initial period of 24 months, the joint request of the employee and/or the employer or self-employed shall be addressed to the Competent Authority or to the designated institution of the Contracting State whose legislation continues to apply. In this respect, that authority or institution shall request the consent of the Competent Authority or the designated institution of the other Contracting State. Upon receipt of the consent, the Competent Institution of the Contracting State whose legislation continues to apply shall register in the form on the applicable legislation the number and date of approval and shall submit a copy of it to the Institution of the other Contracting State.

PART III
SPECIAL PROVISIONS

SECTION 1
SICKNESS AND MATERNITY BENEFITS

Article 5
Aggregation of periods of insurance

(1) For application of Article 10 of the Agreement, the Competent Institutions of Contracting States shall certify insurance periods completed under the legislation it applies, at the determined appropriate bilingual form.

(2) The form referred to in Paragraph 1 of this Article, may be issued subsequently upon the request of the insured person or the institution of the second Contracting State in whose territory the person concerned is staying or residing, by the Institution of the other Contracting State where the person was last insured.

Article 6
Benefits in kind in case of stay in the territory of the other Contracting State

(1) In order to receive emergency benefits in kind, the person referred to in the Article 11, paragraphs (2), (3) and (6) and the article 12 paragraphs (4) and (5) of the Agreement is required to submit the form on entitlement to benefits in kind in accordance to the legislation of the State of stay, to the Institution of the place of stay or directly to the health care services providers of the place of stay, at the determined appropriate bilingual form.

(2) Upon notification that the hospital treatment is provided, for the purpose of the application of the Article 11 of the Agreement, the Institution of the place of stay or health care services provider is obliged to inform during the hospital treatment the Competent Institution about the date of admission to the hospital, expected duration of the treatment and/or the expected release date.

(3) The form referred to in paragraph (1) of this Article shall be issued by the Competent Institution, at the request of the person, before it leaves the territory of the Contracting State where he/she resides and it indicates the exact length of the period in which such benefits may be granted and provided that the purpose of their travel is not to seek the benefits in kind. If

the person does not submit the referred form, the Institution of the place of stay may address to the Competent Institution to obtain it.

Article 7
Providing prostheses, medical devices and other substantial benefits in kind

(1) The approval for the providing of prostheses, medical devices as well as other substantial benefits in kind requiring higher costs referred to in paragraph (5) of the Article 11 of the Agreement, shall be issued on the agreed form, when the value of those services exceeds 150 EUR, denominated in national currency of the Institution which grants them.

(2) The benefits referred to in paragraph 1 of this Article are:

a) Prostheses, orthotics,
b) Orthopedic footwear;
c) Medical devices for eye deficiencies;
d) Hearing aids;
e) Replacements for the devices mentioned under lines a)-d).

(3) For providing prostheses, medical devices and other substantial benefits in kind provided under paragraph (1) of this Article, the Institution of the place of residence or stay shall require through a certificate, the prior approval of the Competent Institution, unless provision of benefits cannot be postponed without endangering the life or health of the person concerned.

Article 8
Benefits in kind in case of residence in the territory of the other Contracting State for the posted workers and pensioners

(1) In order to receive benefits in kind under paragraph (4) of the Article 11, paragraphs (1), (2) and (3) of the Article 12 of the Agreement, a person should register at the Institution of the place of residence, submitting a bilingual form issued in duplicate by the Competent Institution attesting that he/she is entitled to receive these benefits and indicating the period for which such benefits may be provided. If the person does not present the respective form, the Institution of the place of residence may address the Competent Institution in order to obtain them. This form shall also be used for the family members, referred to in paragraph (6) of the Article 11 and paragraph (5) of the Article 12 of the Agreement only in accordance with the legislation it applies.

(2) The Institution of the place of residence shall notify the competent institution on all the registrations made by it.

(3) The Competent Institution shall notify the Institution of the place of residence on the cessation of entitlement to benefits in kind.

(4) In case of temporary incapacity for work of an insured person during their stay in the territory of the other Contracting State, the Institution of the place of stay is obliged to inform the other Competent Institution.

Article 9
Reimbursement of costs

(1) According to Article 13 of the Agreement, the cost of benefits in kind granted according to Articles 11 and 12 of the Agreement shall be reimbursed by the Competent Institutions, based on actual costs of benefits in kind provided by the Institution of the place of stay or residence, as shown in the individual forms with actual expenditure that this Institution presents for each insured person, excluding administrative costs.

(2) Reimbursement shall be made in Euros. For Institution in Republic of Albania the exchange rate of the national currencies in Euro, shall be the rate of the National Bank on the date of the issuing reimbursement request.

(3) The request for expenditure reimbursement shall be sent after each semester, but not later than two years and it shall be paid within 15 months of the end of the month in which the request was submitted.

(4) In case of payment refusal of documents regarding the reimbursement of expenses, this shall be communicated to the other Competent Institution, until the expiry of agreed deadline for payment, but not later than 24 months following the month in which the claim was introduced.

(5) In case when the Institution of the place of residence or stay, which has provided benefits in kind does not respond to the complaint introduced within the deadline provided in the paragraph (4) of this Article, respectively within 18 months of the end of the month in which the claim was introduced, the complaint shall be considered accepted.

Article 10
Payment of cash benefits

(1) To qualify for cash benefits under the provisions of Article 14 of the Agreement, the person requests to the doctor, or the medical committee from the territory of Contracting State of the place of stay or residence who evaluated its health to certify its temporary inability to work and its probable duration, according to the legislation it applies.

(2) The certificate shall be sent to the Competent Institution in the timeframe set by the legislation of the Contracting State of the Competent Institution.

(3) The payment shall be made directly to the insured person according to the legislation applied
by the Competent Institution.

SECTION 2
OLD AGE, INVALIDITY AND SURVIVOR'S PENSIONS

Article 11
Submission of claim

(1) The Institution of a Contracting state shall receive the claims for benefits pursuant to the legislation of the second Contracting State. The Institution of Contracting State in which the claim for benefit was submitted, shall request the claimant to provide available documentation necessary for the Competent Institution of the second Contracting State for processing the claim, in particular information on the periods, types and places of employment or activities, as well as information on the employer or the person performing the activity.

(2) The Competent Institution of the Contracting State which receives a claim for benefits shall send, without delay the claim to the Liaison Body or Competent Institution of the other Contracting State, indicating the date on which the claim was received.

Article 12
The processing of claims and initiation of proceedings

(1) The Competent Institutions shall notify each other on any claim for the benefit and other related matters significant for the entitlement and determination of the amount of the benefit, where by validation of data at the determined bilingual form replaces the communication of the original documentation.

(2) The Competent Institution to which the claim has been submitted shall confirm the periods of insurance to be taken into account pursuant to its applicable legislation to the Institution of the other Contracting State at the determined bilingual forms.

(3) Institution of the place of residence/stay shall send determined bilingual forms containing results of medical examinations for the determination of work incapacity.

Article 13
Notice of completion of the process to determine entitlement to benefits

The Competent Institutions shall notify each other, by the determined bilingual form, on the completion of procedures for determining entitlement to benefits, wherein they should indicate:

1. in case of awarding the right to benefit-type and beginning of benefit;
2. in case of refusal – the reason for the refusal.

Article 14
Notifications

The Competent Institutions shall notify each other on all available facts significant for the determination of benefit, particularly on:

1. determination of the right to benefit;
2. termination of the right to benefit, or suspension of the same;
3. any changes in insurance periods, with the confirmation of new insurance periods;
4. the beginning of the employment or performing activities of the beneficiaries;
5. any changes in the marital status of the widow or widower;
6. change of address;
7. termination of the education of a child;
8. death of the beneficiary.

Article 15
Payment of cash benefits

(1) The pensions due by the Competent Institution of a Contracting State shall be paid directly to the beneficiaries, according to the legislation which that Institution applies.

(2) The Competent Institution shall request from the beneficiary information regarding the place of residence, the bank and the account number where the benefits shall be paid and other relevant data for the payment of benefits.

(3) The beneficiary who receives benefits under the legislation of one Contracting State and has the place of residence in the territory of the other Contracting State shall submit the life certificate to the Competent Institution every six months, which shall be filled in and signed by the beneficiary, and certified by a legal authority and/or the Competent Institution.

(4) If the certificate referred to in paragraph (3) of this Article is not submitted by the determined deadline, the payment of the pension is temporary suspended until its receipt unless the legislation of the Contracting States provides otherwise.

Article 16
Exchange of statistical data

By the end of June of the current year the liaison bodies shall exchange statistical data on the number of beneficiaries, sorted out by type of benefit and the amounts paid in the territory of the other Contracting State for the previous year.

SECTION 3
ACCIDENTS AT WORK AND OCCUPATIONAL DISEASES

Article 17
Benefits in kind

(1) In order to receive benefits in kind as a result of a work accident or an occupational disease based on Article 21 of the Agreement, the insured person, subject to the legislation of a Contracting State that has its stay or residence on the territory of the other Contracting State, shall submit to the Institution of the place of stay or residence a form issued by the Competent Institution certifying that he/she is entitled to receive benefits in kind as a result of its work accident or occupational disease. The form indicates the type of benefits in kind and the period during which they may be granted. If the person does not have the said form, the Institution of the place of stay or residence addresses through the form agreed, to the Competent Institution, in order to obtain it.

(2) Provisions of the paragraph (1) and (3) of the Article 7 of this Agreement, shall also apply in case of work accident or an occupational disease.

(3) Upon notification that the hospital treatment is provided, for the purpose of the application of the Article 21 of the Agreement, the Institution of the place of stay or health care services provider is obliged to inform during the hospital treatment the Competent Institution about the date of admission to the hospital, expected duration of the treatment and/or the expected release date.

(4) The reimbursement of expenses for benefits in kind provided under Article 21 and paragraph (7) of the Article 26 of the Agreement shall be made by the Competent Institution, based on the individual forms with actual expenses issued by the Institution of the place of stay or residence for each insured person, except the administrative costs.

(5) The reimbursement of these expenses is made only after establishing the work character of the accident or the occupational character of the disease by the Competent Institution, according to the provisions of the legislation it applies.

(6) Provisions of paragraphs (2), (3), (4), (5) and (6) of the Article 9 of this agreement shall also apply in case of work accidents and occupational diseases.

Article 18
Exchange of information and documents between institutions referring to work accidents or occupational diseases

(1) In the event in which an accident at work is occurring or an occupational disease is diagnosed in the territory of a Contracting State other than that on which the Competent Institution is, declaring the work accident or the registration of occupational disease must comply with the legislation the Competent Institution applies without prejudice to the legal provisions in force in the territory of the Contracting State where the accident at work occurred or occupational disease was registered.

(2) The Institution of the Contracting State in whose territory the accident at work occurred or the occupational disease was recorded, shall send to the Competent Institution all necessary information and documents, including a report on the state of health of the person concerned, accompanied by medical report at the end of the period of working incapacity.

Article 19
Disputing the work character of an accident or disease

(1) Where the Competent Institution disputes the work character of the accident or the occupational character of the disease, it shall inform without delay the Institution of the place of residence or stay which provided the benefits in kind, which will be considered benefits under sickness insurance starting with the date from which they were provided, if the person concerned is entitled to receive them and reimbursed according to the legislation in the field of sickness and maternity.

(2) Where the work character of the accident or the occupational character of the disease is confirmed, the benefits in kind granted to the person concerned shall be considered benefits for work accident or occupational disease starting with the date at which the accident at work occurred or the occupational disease was first time diagnosed.

SECTION 4
UNEMPLOYMENT BENEFITS

Article 20
Aggregation of periods of insurance

(1) For the application of Article 24 of the Agreement, the claimant shall submit to the Competent institution of one Contracting State a bilingual form issued by the Institution responsible for issuing this form in the other Contracting State, certifying the insurance periods completed under the legislation of this Contracting State, as well as the periods in which he/she was beneficiary of unemployment benefits.

(2) If the claimant does not submit the form from the paragraph (1) of this article, the Competent Institution or liaison body of that Contracting State shall request the liaison body or Institution responsible for issuing this form in the other Contracting State to issue the form.

PART IV
FINAL PROVISIONS

Amendments and additions
Article 21

(1) The amendments and additions to this Agreement may be made by the mutual written consent of the Contracting States.

(2) The amendments and additions referred to in paragraph (1) shall be considered an integral part of this Agreement.

Entry into Force
Article 22

This Agreement shall enter into force at the same date with the Agreement and shall have the same period of validity as the Agreement.

This Administrative Agreement is signed in two originals at Podgorica on February 27, 2023 each in the Montenegrin, Albanian and English languages, all texts being equally authentic. In case of discrepancy of interpretation, the text in English language shall prevail.

On behalf of the Competent Authority of Montenegro

Admir Adrović, s.r.

On behalf of the Competent Authority of Republic of Albania

Delina Ibrahimaj, s.r.

Član 3

Ova odluka stupa na snagu osmog dana od dana objavljivanja u „Službenom listu Crne Gore - Međunarodni ugovori".

Broj:

Podgorica, _____ 2025. godine

Vlada Crne Gore

Predsjednik,

mr Milojko Spajić