

Health insurance provided by the Agricultural Social Insurance Fund

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Abstract

The article characterises the health insurance (HI) operating in the Agricultural Social Insurance Fund (KRUS, Fund), including the terms and conditions of coverage, the subjective scope of this insurance, the assessment of premiums and their payment, exclusions from insurance and exemptions from payment of dues on account of HI premiums. In addition, figures are presented for HI payers and other persons subject to this insurance, taking into account the types of analytical account (special branches of agricultural production, farms, farmer's assistants, subsidised premiums), as well as the functionality of the information system on which KRUS operates (nSIU). Application forms with the required registration documents are also presented. Further, the article addresses the issue of recoverability of dues and settlements in the accounts of HI payers, including settlements of overpayments. The article uses the document survey method and the individual case method.

Key words: Agricultural Social Insurance Fund (KRUS), coverage, payer, being subject to, farmer, health insurance (HI).

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Introduction

The article characterises the health insurance (HI) operating in the Agricultural Social Insurance Fund (KRUS, Fund), including the terms and conditions of coverage, the subjective scope of this insurance, the assessment of premiums and their payment, exclusions from insurance and exemptions from payment of dues on account of HI premiums. The Agricultural Social Insurance Fund (KRUS) is a state institution responsible for performing social-insurance and health-insurance tasks. Health insurance (HI), in the broadest terms, is a form of insurance where an insured person is entitled to health benefits to preserve health, protect against the effects of disease, and provide treatment. The Agricultural Social Insurance Fund (KRUS) performs these tasks for farmers, their spouses, family members, household members and the farmer's assistants¹. KRUS activities include a wide range of functions separated from the general system, including: (1) providing services to farmers in matters of covering with social and health insurance; (2) paying insurance premiums; (3) granting and paying monetary benefits based on these premiums; (4) carrying out preventive activities to disseminate principles of labour safety on farms; (5) eliminating all hazards at work in agriculture; and (6) conducting voluntary and unpaid medical rehabilitation. KRUS activities are aimed at continuous development and improvement of stakeholder service in accordance with the law, as well as the principles of rational and transparent management of financial resources. Through professional, efficient and reliable customer service, KRUS constantly strives to become an innovative institution of social trust, using its personnel and technological resources.

1. Article 6 of the Act on Social Insurance of Farmers (Dz. U. 2024 poz. 90) defines terms and specifies that whenever the Act refers to:

- 1) farmer – this means a natural person of legal age, residing and conducting agricultural activities on the territory of the Republic of Poland, personally and as a self-employed person, on their agricultural holding, including within a group of agricultural producers, as well as a person who has allocated the land of their agricultural holding for afforestation;
- 2) household member – this means a person close to the farmer who is at least 16 years of age, remains in a common household with the farmer or resides on their agricultural holding or in their close proximity, permanently works on the agricultural holding, and is not in an employment relationship with the farmer;
- 3) farmer's assistant – this means a person of legal age with whom the farmer has entered into a harvest assistance contract, as referred to in Article 91a; in addition, according to the Act Amending the Act on Social Insurance of Farmers and Certain Other Acts (Dz. U. 2018 poz. 858), a farmer's assistant is a person who provides assistance to the farmer in harvesting hops, fruits and vegetables, tobacco, herbs and herbaceous plants against remuneration on the basis of a harvest assistance contract. A Polish citizen, a foreigner authorised to work in Poland or exempted under special regulations from the obligation to have a work permit, can be an assistant.

Historical outline of health insurance in KRUS

One of the tasks delegated to the Agricultural Social Insurance Fund by the state is to handle health insurance for farmers, household members, farmer's assistants, pensioners, and members of their families. KRUS, in this regard, performs the function of a premium payer to the National Health Fund (NHF). However, farmers and their family members were not entitled to free medical care until 1 July 1977. Previously, they paid all the costs of medical services. Since the establishment of KRUS, i.e. since 1 January 1991, health premiums have been paid by farmers and remitted by KRUS to the relevant health insurance funds. In addition, until 1 April 2012, premiums for farmers operating farms, regardless of their area, were reimbursed from the state budget. As of then, the state subsidised premiums only for farmers cultivating land of less than six conversion hectares. However, the obligation to pay the HI premium without state financial participation existed from the very beginning for those running special branches of agricultural production². Starting from the second quarter of 2012, the size of the health insurance premium paid is closely related to the area of the farm expressed in conversion hectares.

Subjective scope and health insurance coverage

Pursuant to the Act of 27 August 2004 on Publicly-Funded Health Care Benefits (Journal of Laws No. 2024, item 146), health insurance must be provided to:

- farmers subject to social insurance for farmers (SIF) by operation of law, as well as upon application; in addition, also those who are not subject to SIF or HI on another basis and conduct agricultural activities on a farm of an area of up to and including one conversion hectare of agricultural land;

2. Types and sizes of special branches of agricultural production (Załącznik do ustawy z 20 grudnia 1990 r. o ubezpieczeniu społecznym rolników, Dz. U. 2022 poz. 933):

- cultivation of ornamental and other plants in heated greenhouses over 100 m²,
- cultivation in unheated greenhouses over 100 m²,
- cultivation of ornamental and other plants in heated plastic tunnels over 200 m²,
- cultivation of mushrooms and their mycelium – more than 100 m² of cultivated area,
- slaughter poultry, laying poultry, poultry hatcheries, fur animals,
- apiaries above 80 bee colonies and off-farm breeding and rearing of pigs over 100.

- the farmer's household members permanently working on the farmer's farm, regardless of the farm area;
- recipients of an agricultural old-age or disability pension;
- family members of farmers, household members, old-age and disability pensioners;
- farmer's assistants.

It should be noted that not every person insured in the KRUS can be subject to health insurance. This is not possible for recipients of a structured disability pension and those who have ceased to conduct agricultural activities but continue agricultural insurance only in the disability and old-age pension fund.

It is not enough to meet the conditions for health insurance coverage to be fully eligible for health benefits under the NHF. It is also necessary to register for HI coverage within a certain period counted from the date these conditions are met:

- 14 days – for a farmer and a household member;
- seven days – for a family member of a farmer³, household member, old-age and disability pensioner.

The application is made on a special KRUS form UD-2Z, "Application for Health Insurance Registration". A certificate of continued education must accompany the form presented below if the child is registered for the HI after attaining 18 years of age. The application form is submitted to the KRUS organisational unit, which has jurisdiction over the farm's location. Applications can be made via the Postal Service, ePUAP dropbox or in person. For data protection reasons, documents should not be sent via e-mail. After verifying the completeness and correctness of the data, an authorised KRUS employee compares it with the data in the PESEL database (KRUS form UD-2Z) and transmits the information to the NHF. Only from the moment a person is registered for the HI at KRUS and the application is forwarded to the National Health Fund, does the person become eligible for primary health care benefits. A family member of a person subject to health insurance is also subject to this insurance and enjoys the benefits of the National Health Fund, provided that they are named in Part II of the KRUS form UD-2Z "Identification Data of Family Members

3. A family member is: an own child, a spouse's child, an adopted child, grandchild, or a child for whom custody has been established, or a child within a foster family or family orphanage, until the child is 18 years of age, and if the child further studies at a school, teacher training institution or scientific unit providing doctoral studies – until the child is 26 years of age; and if the child has a certificate of a severe degree of disability or other equally treated certificate – without age limit; a spouse who does not have their own entitlement to health insurance; an ascendant (parents, grandparents) who remains in a common household with the insured and does not have their own entitlement to health insurance – Rozdział I, art. 5 pkt. 3 Ustawy z 27 sierpnia 2004 r. o świadczeniach opieki zdrowotnej finansowanych ze środków publicznych, Dz. U. 2004 nr 210 poz. 2135.

Registered for Health Insurance”. Family members do not have premiums charged – they benefit from the insurance of the person who registered them as premiums for their insurance are not paid.

Health insurance for farmers and their household members continues until the end of the month, regardless of what day of the month their social insurance for farmers ceased. In turn, family members’ health insurance terminates simultaneously with the cessation of the farmer’s or household member’s insurance. If the family member is a student, their HI will cease on the date they attain 26 years of age. After that, the university should register the student for health insurance. Pursuant to Article 67(5) of the Act of 27 August 2004 on Publicly-Funded Health Care Benefits, the right to health care benefits for school leavers expires:

- after six months of graduation from high school or removal from the list of students;
- after four months of graduation from university or doctoral studies or removal from the list of students or participants in doctoral studies.

Within the framework of KRUS health insurance, the HI for the farmer’s assistant is also distinguished. The obligation of this health insurance arises from the date of registration for the above insurance pursuant to the Act on Social Insurance for Farmers, and ceases on the date of termination or expiration of a harvest assistance contract. An important difference with the farmer’s assistants is that in their case, it is not possible to register the family members of the farmer’s assistant for the HI. An assistant is reported for insurance in the KRUS by the farmer within seven days from the date of conclusion of the harvest assistance contract, but no later than before the expiration of the period for which the contract was concluded. An assistant can be reported to the KRUS insurance, including HI, by a self-employed farmer conducting agricultural activities on a farm who:

- is subject to the SIF himself, regardless of the basis therefor (by operation of law or on application);
- is subject to other social insurance or has established entitlement to a pension or the entitlement to social security benefits;
- is not subject to the SIF, and is not even listed in the KRUS records.

The fact that a farmer’s assistant may simultaneously be subject to the SIF in the KRUS or the SI in the ZUS does not relieve the farmer of the obligation to register the assistant for insurance in the KRUS and pay premiums for them.

Source: Agricultural Social Insurance Fund (KRUS), <https://www.krus.gov.pl/bip/formularze-i-wnioski/ubezpieczenia/>, access 16.03.2022.

Drawing 1. Application Form for Health Insurance Registration in KRUS, page 2

III. OŚWIADCZENIE UBEZPIECZONEGO ROLNIKA / DOMOWNIKA / EMERYTA / RENCISTY ^{1/}:

1. Jestem: **rolnikiem** i prowadzę działalność rolniczą / **domownikiem** i stale pracuję ^{1/} (**wpisać TAK lub NIE**):

- 1) wyłącznie w gospodarstwie rolnym - _____
- 2) w gospodarstwie rolnym i dziale specjalnym produkcji rolnej - _____
- 3) wyłącznie w dziale specjalnym produkcji rolnej - _____
- 4) grunty rolne przeznaczone do zalesienia decyzją starosty powiatu z dnia _____

2. Całkowita powierzchnia użytków rolnych gospodarstwa rolnego wynosi:

_____ hektarów przeliczeniowych, w tym przeznaczonych do zalesienia ^{1/} _____ ha przeliczeniowych,
_____ hektarów fizycznych.

3. **UWAGA - wypełniają rolnicy prowadzący działy specjalne produkcji rolnej**

Od _____ prowadzę dział/ły specjalny/le produkcji rolnej (wpisać rodzaj i rozmiar prowadzonej działalności)

Przewidywany dochód z prowadzonej działalności w zakresie działów specjalnych produkcji rolnej w _____ roku stanowi kwotę _____.

Dołączam odpis decyzji naczelnika urzędu skarbowego wydanej na podstawie deklaracji o rodzajach i rozmiarach zamierzonej produkcji w tym roku podatkowym (**wpisać TAK lub NIE**) _____.

Pouczenie

Powyższa deklaracja o przewidywanym dochodzie, zgodnie z przepisami o postępowaniu egzekucyjnym w administracji, stanowi podstawę do wystawienia tytułu wykonawczego w przypadku nieopłacenia składek w ustawowym terminie.

4. Jestem emerytem/rencistą ^{1/} (**wpisać TAK lub NIE**) _____,
jeśli **TAK** należy podać rodzaj świadczenia oraz organ rentowy wypłacający świadczenie - ZUS, KRUS lub inny organ rentowy _____

5. Podlegam obowiązkowemu ubezpieczeniu społecznemu (np. z tytułu umowy o pracę, umowy zlecenia, powołania do rady nadzorczej) lub zaopatrzeniu emerytalnemu (**wpisać TAK lub NIE**) _____,
jeśli **TAK** należy podać tytuł ubezpieczenia: _____

6. Posiadam ustalone prawo do świadczeń z ubezpieczeń społecznych (zasilek chorobowy, świadczenie rehabilitacyjne) (**wpisać TAK lub NIE**) _____,
jeśli **TAK** należy podać rodzaj: _____

7. Posiadam inny tytuł do obowiązkowego ubezpieczenia zdrowotnego (np. z tytułu korzystania z „ulgi na start”, powołania do pełnienia funkcji na mocy aktu powołania, w związku z którym pobierane jest wynagrodzenie) (**wpisać TAK lub NIE**) _____,
jeśli **TAK** należy podać tytuł ubezpieczenia zdrowotnego _____

Oświadczam, że powyższe dane zostały podane zgodnie z prawdą i świadomy(a) jestem odpowiedzialności z art. 233 § 1 Kodeksu karnego. O wszelkich zmianach w zakresie podanych wyżej danych zobowiązuję się powiadomić niezwłocznie Kasę Rolniczego Ubezpieczenia Społecznego.

_____ (miejscowość i data)

_____ (podpis osoby wypełniającej zgłoszenie)

Objaśnienia:

^{1/} - niepotrzebne skreślić

^{2/} - Unikalny numer osoby (UNO) wpisuje pracownik KRUS - jest to numer nadawany przez jednostkę KRUS

^{3/} - symbol i numer emerytury/renty wpisują pracownicy KRUS

^{4/} - numer PESEL - jest to numer ewidencji ludności nadawany przez właściwy dla miejsca zamieszkania Wydział Ewidencji Ludności i wymieniony w dowodzie osobistym

^{5/} - numer NIP - numer identyfikacji podatkowej nadany podatnikom podatku dochodowego przez urząd skarbowy

Uwaga

Rolnicy, domownicy, emeryci i renciści, których małżonkowie z tytułu własnych uprawnień zdrowotnych zgłosili do ubezpieczenia członków rodziny nie mają obowiązku wypełnienia części II druku.

INFORMACJA DLA UBEZPIECZONEGO

Kasa Rolniczego Ubezpieczenia Społecznego informuje, że dane dotyczące osób podanych w niniejszym zgłoszeniu podlegają ochronie na podstawie Rozporządzenia Parlamentu Europejskiego i Rady (UE) 2016/679 z dnia 27 kwietnia 2016 r. w sprawie ochrony osób fizycznych w związku z przetwarzaniem danych osobowych i w sprawie swobodnego przepływu takich danych oraz uchylenia dyrektywy 95/46/WE (RODO) oraz ustawy z dnia 10 maja 2018 r. o ochronie danych osobowych.

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Source: Agricultural Social Insurance Fund (KRUS), <https://www.krus.gov.pl/bip/formularze-i-wnioski/ubezpieczenia/>, access 16.03.2022.

Handling of registration applications

Among the tasks of a KRUS employee in the field of health insurance is to keep a register and records of premium payers and persons subject to health insurance. These tasks mainly include receiving applications for the HI registration, recording registration applications in the HI application registry, performing preliminary verification and checking the completeness of the data contained in the registration application and documents attached thereto. If formal deficiencies are found within seven days from the date of receipt of the application documentation, the employee returns it to the applicant for completion, which should be noted in the register of receipt of applications, together with the reason and date of return. No deficiencies in the application should be recognised if there is no obligation to have additional documents under the current state of the law, and the application was submitted by a person who does not meet the conditions for being subject to the HI under the law. In addition, a KRUS employee assesses whether the reported persons meet the conditions for HI coverage, including family members and persons not subject to social insurance for farmers (SIF) by operation of law. Following a positive analysis of the application documentation, an authorised KRUS employee enters the data from the application into the computer system (nSIU), assigns the insured's account number in the system, first checking whether the person appears in the records of the Central Personal Data Directory (CZDO). The next stage of the work is to determine and enter into the system the parameters providing the basis for the assessment of premiums (the area of the farm in conversion hectares), to set up a summary file of the HI payer or the farmer for whom premiums are refunded, containing the application documentation and correspondence for the HI of the payer, the farmer's spouse, the household member and their family members. Documents inside the collection folder should be arranged chronologically, numbered and stored in accordance with data protection regulations. In addition, a KRUS employee prepares and sends letters to the farmer regarding the assessment of the premium, the date of payment, changes in the assessment and the payment method. Farmers paying premiums from special branches of agricultural production are furnished with information on how premiums are calculated, the Fund's bank account to which payments should be made, the deadline for payment of premiums, the need to make payments on their own (without a remittance from KRUS) on the payment deadline. The information in the insured person's file is reflected in the computer system; to this end, periods of HI coverage are

recorded, and data on the farm area is entered and updated. A KRUS employee also issues decisions on the assessment and collection of HI premiums in disputed cases⁴.

Size of the premium for health insurance and the deadline for its payment

The health insurance premium is set as a monthly and indivisible premium, payable for the entire month. The size of the HI premium for farms is defined as an amount based on the farm area – PLN 1.00 was adopted for each full conversion hectare of agricultural land. In the case of special branches of agricultural production, however, the premium for the farmer and the household member is 9% of the declared premium basis, corresponding to:

- income established for personal income taxation, in an amount not less than the amount corresponding to the minimum wage; or
- the minimum wage in the case of activities not subject to personal income tax;
- for household members working exclusively in self-contained special branches of agricultural production, the size of the premium is the amount of 33.4% of the average monthly salary in the enterprise sector in the fourth quarter of the previous year (including profit distributions), as announced by the President of the Statistics Poland in the Official Gazette “Monitor Polski”. The premium on the new basis is effective as of 1 April of a given year. With regard to old-age and disability pensioners, the health insurance premium is 9% of the assessment basis; of which the insured person pays the premium in full, i.e. at 9.00% of the basis, from the net amount of the old-age or disability pension (excluding allowances, benefits, cash benefits and energy lump sum, cash equivalent for the right to free coal and coal deputation).

Further to the introduction of the provisions of the Act of 18 May 2018 amending the Act on Social Insurance of Farmers and Certain Other Acts (Journal of Laws No. 2018, item 858), farmers are required to report an assistant with whom a harvest assistance contract has been concluded, to the KRUS insurance. As for the size of the HI premium for the farmer’s assistant, it is 9% of the amount of the assessment basis, which is 33.4% of the average monthly salary in the enterprise sector in the

4. Instrukcja techniczno-biurowa w zakresie wykonywania zadań dotyczących podlegania ubezpieczeniu zdrowotnemu oraz rozliczeń z tytułu składek na to ubezpieczenie, Zarządzenie nr 17 Prezesa Kasy Rolniczego Ubezpieczenia Społecznego z 10 kwietnia 2019 roku.

fourth quarter of the previous year, including profit distributions. The premium on the new basis is effective as of 1 April of a given year. The notion of the farmer's assistant has existed in KRUS since 18 May 2018. Starting from the introduction of this regulation, the amount of the monthly HI premium for the farmer's assistant was as follows: in 2018 – PLN 142, in 2019 – PLN 152, in 2020 – PLN 161, in 2021 – PLN 170, and since 1 April 2022 – PLN 187.

The HI premium for the farmer's assistant is monthly and indivisible, regardless of the number of days subject to this insurance in a given month. The farmer is obliged to calculate the premiums on their own and pay them on time, without being called upon by KRUS.

It is important to note that in the case of co-owners, tenants, as well as heirs or members of a land community, without the area of used land in conversion hectares being separated for each of them (this concerns the situation with no division of inheritance or abolition of co-ownership), the premium is calculated in the same amount for each person covered under this farm.

Farmers and household members engaged in non-agricultural business activities are subject to HI only on account of their agricultural activity, and the HI premium is paid on this account as well.

Payment, collection and settlement of HI premiums

For farms of less than six conversion hectares of agricultural land, HI premiums are covered by the state budget. In contrast, farmers pay the HI premium on their own for farms of 6 or more conversion hectares (in this case, the due date coincides with the due date for the farmers' social security premium, i.e. by the last day of the first month of a given quarter). Farmers engaged in special branches of agricultural production are required to pay premiums on their own, by the 15th of the following month. The farmer must also pay health insurance premiums for the farmer's assistant for a given month by the 15th of the following month.

The Agricultural Social Insurance Fund collects health insurance premiums from payers and other persons required to pay them. To this end, every quarter, together with the remittances for the SIF, it also sends remittances for HI premiums to premium payers. In the case of those who pay HI premiums based on special branches of agricultural production operated by them, KRUS also sends letters with the remittances for the first quarter, reminding them of the obligation to submit a statement/certificate/decision of the Head of the Tax Office on the income declared for the year from special branches, the type and size of these branches, by January 31 of the

calendar year. KRUS also informs the payer of the bank account number for making HI payments. Premiums paid after the statutory due date are collected together with interest due for late payment as per the Act of 29 August 1997 – Tax Ordinance (Journal of Laws 2023, item 2383).

In each calendar month, the determination and current posting of HI premium assessments, in the form of accrual of premiums for farmers, spouses, household members, and farmer's assistants, is made to the payers' settlement accounts. In order to provide full support for settlements with HI premium payers, the KRUS employee maintains the payer's settlement account in the computer system, their summary file (hard copies of documentation), schedules for reminders for forced recovery of debts, collection sheets, balance inventory, control of turnover and balances, and relevant auxiliary records.

In accordance with § 35 of the technical and office instructions on the performance of tasks related to being subject to social insurance for farmers and health insurance and to settlements of premiums for these types of insurance (Appendix to Order No. 17 of the President of the Agricultural Social Insurance Fund dated 10 April 2019), the turnover in the accounts of premium payers is posted in the computer system (nSIU) through:

- accrual/deduction of HI premiums,
- accrual/deduction of default interest on HI,
- payment of amounts due on HI,
- refund of overpaid HI premiums,
- accrual/deduction of reminder costs,
- payment of reminder costs,
- transfer of payments,
- cancellation of amounts due for HI premiums,
- deductions for HI premiums from benefits,
- accrual/deduction on account of prescription of HI premium accrual,
- accrual/deduction due to prescription of payments.

On the “Dt” side, the following are posted: accrual of premiums and other receivables, refund of overpaid premiums, transfer of operations that were posted on the “Ct” side to another account, accrual due to prescription of premiums, and prescription of payments.

On the “Ct” side, the following are posted: write-off of undue accruals of receivables, cancellation of receivables, transfers of operations that were posted on the “Dt” side to another account, prescription of accruals of premiums, write-off of prescription of payments, payments of receivables, and payments for deductions from benefits.

Duplicates of payment receipts, as received from the KRUS organisational unit for finance and accounting, are the basis for posting premium payments in the nSIU system. Posting activities of individual operations in the accounts of payers are carried out separately for HI from special branches of agricultural production, from farms of six or more conversion hectares, and from farms of less than six conversion hectares, as well as in the case of farmer's assistants.

Settlement of premium payers' accounts

A KRUS employee performs accounting operations on premium payers' accounts on an ongoing basis. These operations relate to own payments of obligors, deductions of receivables from granted benefits to payers and their spouses, and received payments from Tax Offices and court enforcement officers from ongoing enforcement proceedings.

Accounts with a "Dt" balance, i.e. negative, should, as a rule, be analysed every quarter or, in the case of insufficient collection of premiums – every month. If the amount owed exceeds the amount specified in the regulations on administrative enforcement proceedings and implementing regulations, enforcement proceedings should be initiated to collect the amount owed from debtors, as provided for in applicable regulations⁵.

Payers' accounts with a positive ("Ct") balance, i.e. overpayment, should be analysed every month. If on a payer's account, within single insurance, one fund/account has a "Ct" balance and another fund/account has a "Dt" balance, then the "Ct" balance should be immediately transferred to a "Ct" balance (this applies to physical accounts, not to accounts of entities such as mayors who pay premiums for the insured).

If there is an overpayment in the account ("Ct" balance):

- arising from an erroneous posting of a payment, it should be immediately reposted to the correct account;
- resulting from the enforcement authority's remittance of an amount greater than the amount due under the enforcement title, after covering the enforced arrears and receiving information from the enforcement authority that the overpayment is not refundable to the authority, the difference should be refunded immediately to the payer without request if the account is idle. In the case of

5. Pursuant to Article 6(1) of the Act on Administrative Enforcement Proceedings of 17 June 1966 (Dz. U. 2023 poz. 2505), in the event of evasion by the obligor of their obligation, the creditor should take steps to apply enforcement measures. The creditor may refrain from taking enforcement measures if the total amount of the monetary claim, late interest and reminder costs does not exceed ten times the reminder costs, unless the period until the expiration of the statute of limitations for the monetary claim is less than six months.

existing arrears, the surplus is credited to cover them, and when there are none, it is credited to future premiums;

- resulting from the write-off of premiums due to the termination of retroactive insurance, it should be handled following the applicable regulations;
- arising after the deduction from benefits, and there is a “Dt” (underpayment) balance on the other insurance, the overpayment is automatically reallocated to debt, without the need for instructions from the payer (this applies to physical accounts).

If the account has a refundable “Ct” balance, it should be checked whether the other insurance does not show “Dt” balance. At the same time, a determination is made with the relevant KRUS benefits unit as to whether there are any undue benefits to be recovered. The payer is informed of the overpayment, and in the case of improperly collected benefits that are recoverable, also of the amount of the overpayment to be credited to these benefits for refund⁶.

If a refundable “Ct” balance is found on one type of insurance and a “Dt” balance on the other type of insurance, the payer is notified of the overpayment and the possibility of having it reposted to the existing debt, with the information that in the absence of instructions from the payer, the overpayment will be reposted ex officio to the debt on the other type of insurance.

Once the “Ct” balance is found in the active account, the insurance employee prepares and sends a notice of overpayment to the payer and waits for their written instructions. Having received such instructions, the employee proceeds accordingly, and in the absence of instructions, the overpaid amount of premiums is credited to future liabilities.

The situation is different in idle accounts, i.e. accounts where no one is insured. In this case, after finding the “Ct” balance, the employee informs the payer accordingly – prepares and sends them a decision regarding overpayment; this is in respect of social insurance, while in respect of health insurance, the decision regarding overpayment is replaced by a letter informing the payer of overpayment. If the payer and owner of the idle account is a deceased person, an investigation must be conducted to identify the heirs eligible for a refund. In the case of a refundable “Ct” balance, the amount of overpayment to be refunded is generated from the nSIU system on form UD-Z34, which is approved by the head of the KRUS organisational unit. Then the employee forwards the document to the financial and accounting organisational unit in order to prepare a postal order and calculate postal fees or transfer the overpayment to the payer’s bank account – if they have one and have provided it to KRUS.

6. Section IV § 43.4 of “Instrukcja techniczno-biurowa w zakresie wykonywania zadań dotyczących podlegania ubezpieczeniu społecznemu rolników i ubezpieczeniu zdrowotnemu oraz rozliczeń składek na te ubezpieczenia”, załącznik do Zarządzenia nr 17 Prezesa Kasy Rolniczego Ubezpieczenia Społecznego z 10 kwietnia 2019 roku.



After receiving a confirmed “Statement of refund of overpayments from the National Health Fund account” from the financial and accounting unit, the insurance employee posts the refund of overpayment to the payer’s account. If the payer has not collected the transferred amount (by postal order), the amount of the uncollected overpayment is reduced by the costs of its refund.

The employee posts the transfer of the “Ct” balance amount to the “payment limitation period” when:

- the right to demand the refund of the “Ct” balance has become time-barred,
- the payer has refused to collect the overpayment amount or has failed to collect it despite an attempt to refund it,
- this amount does not exceed the equivalent of the total costs of notifying the payer of the overpayment by registered mail and the costs of the overpayment refund.

With respect to payers of premiums who fail to pay them on time, KRUS, in accordance with the applicable procedures, initiates enforcement proceedings against them aimed at recovering the due HI premiums, in cooperation with Tax Offices and Court Enforcement Officers.

Flow of registration data of persons covered by health insurance in KRUS to the National Health Fund

The duties of a KRUS employee in the scope of transferring registration data of persons subject to HI to the National Health Fund and conducting an investigation regarding simultaneous coverage of health insurance in KRUS and ZUS include:

- 1) verifying the data required for registering for HI with the data from the records of the Universal Electronic Population Registration System (PESEL);
- 2) ongoing monitoring of the process of transmitting information to the National Health Fund on periods of coverage and non-coverage by health insurance and on paid and due health insurance premiums, using the Central Data Aggregation Module system (CMAD-N);
- 3) ongoing downloading of reports from the CMAD-N system and analysis of the inconsistencies in personal data contained therein with the PESEL records and overlapping KRUS and ZUS insurance periods;
- 4) taking ongoing actions to clarify inconsistencies in data or overlapping insurance periods:
 - on their own, if the KRUS employee has documents enabling any correction of data in this procedure;

- as part of the investigation, directly with the insured farmer or household member;
 - as part of the investigation, with the appropriate organisational unit of KRUS;
 - as part of the investigation, with the appropriate organisational unit of ZUS;
- 5) performing ongoing transmission of corrected data on insured persons to the National Health Fund using the CMAD-N system.

Conclusion

Health insurance at the Agricultural Social Insurance Fund is an integral part of insurance for a very important social group: farmers, their families and people co-operating with them. The article presents the characteristics of health insurance not only from the formal and substantive perspective but also from the IT perspective. The article describes rules for being subject to HI, paying premiums, conducting settlements on payer accounts, as well as obtaining premiums from debtors who are more sluggish in responding to KRUS calls. The Agricultural Social Insurance Fund for Farmers is an institution that not only collects and settles premiums but also supports agriculture by providing relief in the payment of liabilities and paying the benefits due to insured persons. The observations indicate that the number of people insured in KRUS is decreasing year by year. The table below shows the downward trend in the number of insured persons and their family members under HI in the area of operation of the KRUS Local Branch in Gniezno, i.e. in the following municipalities: Czarniejewo, Kłecko, Kiszkowo, Łubowo, Mieleszyn, Mieścisko, Niechanowo, Trzemeszno, Witkowo and the city and municipality of Gniezno in the years 2019–2023 (as of 31 December of the given calendar year).

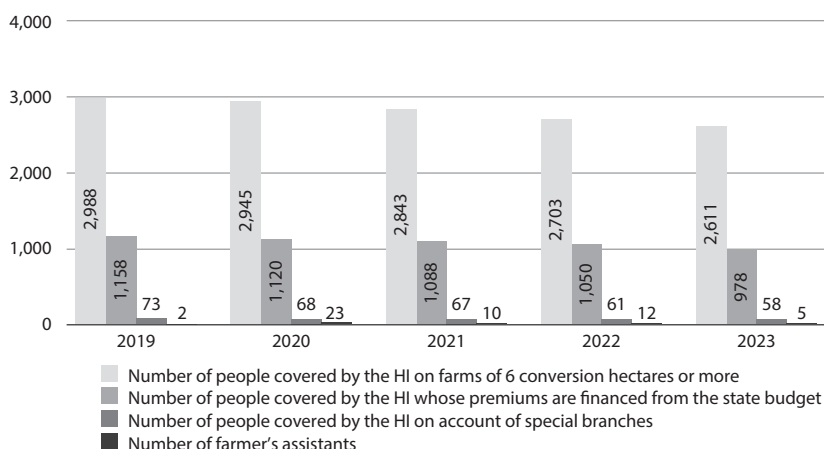
Table 1. Persons insured under HI by age category in the area of operation of KRUS Local Branch in Gniezno

Year	Number of insured persons			Number of family members		
	total	up to and including 60 years of age	more than 60 years of age	total	up to and including 60 years of age	more than 60 years of age
2019	4,146	3,834	312	2,147	2,145	2
2020	4,076	3,735	341	2,046	2,044	2
2021	3,935	3,568	367	1,935	1,933	2
2022	3,754	3,398	356	1,856	1,853	3
2023	3,590	3,247	343	1,770	1,766	4

Source: UD-Z31 report generated from the KRUS nSIU IT system, current access.

In addition, the figures provided in Chart 1 present the structure of persons covered by health insurance for farmers, divided into types of payers, specifying persons covered by health insurance in KRUS: on account of running a farm with an area of agricultural land of six or more conversion hectares, on account of special branches of agricultural production, as well as persons covered by this insurance whose premiums are financed from the state budget. The data analysis also shows a downward trend in the number of those insured under HI, which is also connected with the decline in the total number of KRUS payers, for whom running a farm and living on it are no longer as attractive as for the older generations, today's old-age and disability pensioners.

Figure 1. Numerical structure of persons covered by HI in KRUS Local Branch in Gniezno by types of payer accounts, in the years 2019–2023, as of 31 December



Source: RS-11 Z and RS-20Z reports generated from the nSIU IT system, current access.

The authors of this article intended to present and characterise the health insurance functioning in the Agricultural Social Insurance Fund in an accessible and transparent manner, which was achieved.

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