Försäkringskassan and social insurance in 2005
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A review of the past year

Försäkringskassan [The Swedish National Social Insurance Agency] was established on 1 January 2005. The previous 21 independent social insurance offices and the National Social Insurance Board were then merged into one agency and one of the largest agency transformations in Sweden had started. One of the underlying reasons for the decision to reorganise the social insurance administration was the large increase in the number of people on long-term sick leave, which had taken place for many years. The goal was to create a clearer control of work in the social insurance sphere and a more uniform application of laws and regulations. We can now sum up Försäkringskassan’s first year of operations as an agency.

The first year was, for natural reasons, dominated by the work of setting up the new agency. This will continue to be a central issue for the next few years. Merging organisations, combining different cultures, is a process that can take several years. A goal scenario has been produced as a basis for further work. This scenario focuses on 2008 and confirms that Försäkringskassan is then to be a first-class agency – good for citizens and good for its staff. As one of three designated goals, Försäkringskassan shall also make an active contribution to reducing the number on sick leave and getting more people back to work.

It is gratifying that the work of reducing the number of people on sick leave is now starting to show positive results. One of the explanations for this is the ability of the integrated organisation to adopt uniform methods of work and place a clear focus on this area. The incapacity rate has decreased at the same time as the increase in expenditure has been reversed. Fewer people are now forced to be on sick leave – although it may be the case that we have succeeded in dealing with the “easy part” while the most difficult part remains to be tackled.

A considerable part of the long sick leaves is not a problem of ill health in the real sense but directly or indirectly an effect of today’s labour market. Many people on long-term sick leave would very probably both be able and want to work to some extent. It is important to make use of that ability and willingness for a number of reasons. This makes great demands on collaboration between Försäkringskassan and the employment offices. An action plan has been produced in 2005 to support this work.

One of the reforms that has been carried out during the year is co-financing by employers. To provide service for the employers, Försäkringskassan has built up a special customer centre during the year. According to the studies that have been made, this has worked well. The customer centre is also an example of the ability of the new agency to concentrate resources. Creating uniform processing is another example. Processing times are slowly but surely being reduced and an increasing number of cases are now dealt with in the same way at every office. This means that assessments will be uniform throughout Sweden, which the insured are entitled to expect. This was also the intention with the new Försäkringskassan.

Social insurance administration is to be efficient, fair and easy to understand. The insured should be able to carry out a large part of the services themselves in a simple way and be able to have access to Försäkringskassan’s service on the Internet and telephone. Processing is to be designed in such a way that the staff and taxpayers can feel certain that only those entitled to benefits and allowances receive them. There is to be zero tolerance towards cheating.

2005 was the first year for Försäkringskassan as an agency. A lot of work remains to be done. The great journey of change has begun.

Stockholm, February 2006

Curt Malmborg
Director-General
The result in brief

Work against ill-health

- Total absence due to incapacity is decreasing.
- Total expenditure for sickness benefit and sickness and activity compensation has started to decrease.
- The regional spread of incapacity is decreasing.
- The number of sick leaves is falling sharply.
- The inflow of new cases of sickness is decreasing.
- Sick leave periods are becoming shorter.
- The number of persons with sickness compensation or activity compensation is still increasing although at a slower rate.
- The co-financing reform for employers has been introduced with good results.

Other areas

- The pension system is working as expected. The right amount is paid at the right time to the right person.
- The share of parental benefit days taken by men is increasing but at a slower rate than before.
- More separated parents make their own arrangements for child support for children they do not live with.

Quality and productivity of activities

- Processing times are decreasing for most types of cases, including sickness benefit, temporary parental benefit and sickness and activity compensation.
- Improved ratings from Försäkringskassan’s customers.
- The new version of support for officials processing cases has not yet produced the expected rationalisation gains.
Benefits - an overview

Health and medical policy
Dental care
- Dental care

Health and medical care
- Health care in an international context
- Disease carrier’s allowance

Allowances for work incapacity
Allowances for work incapacity
- Sickness benefit
- Voluntary health insurance
- Benefit for care of closely-related persons
- Activity compensation
- Sickness compensation
- Occupational injury allowances ("arbetsskadeersättningar")
- Occupational injury allowances ("yrkesskadeersättningar")
- Disability allowance

Measures against ill-health
- Rehabilitation allowance
- Grants for working aids

Economic old age policy
Allowances in old age
- Guarantee pension for old age pension
- Housing supplement for pensioners
- Maintenance support for the elderly
- Special pension supplement

The old age pension system outside the state budget
- Income pension
- Supplementary pension
- Premium pension

Allowances in the event of death
- Adjustment pension
- Special survivor’s pension
- Widow’s pension

Other benefits
- Voluntary pension
- Seaman’s pension

Disability pension

Measures for participation and gender equality
- Assistance allowance
- Car support

Economic financial policy
Insurance
- Parental benefit
- Temporary parental benefit
- Pregnancy benefit
- Child pension
- Survivor’s support for children
- Pension entitlement for child years

Needs-tested allowances
- Housing allowance
- Maintenance support
- Childcare allowance

General allowances
- Child allowance including the large family supplement
- Adoption cost allowance

Other payments
- Activity support
- Daily allowance for total defence conscripts
- Family benefit
- Insurance against holiday pay costs
- Insurance against sick pay costs
Social insurance is very important for the individual’s financial security and welfare. By redistributing money between different groups and different phases of life, social insurance makes it possible to, for instance, take care of children when they are small, cope with periods of illness and provide financial security in old age. In all, there are fifty different insurances and allowances in social insurance. Total social insurance expenditure was SEK 435 billion in 2005.

**Sickness and rehabilitation**

Sickness benefit replaces part of the loss of income in the event of illness.

Rehabilitation allowance is to facilitate working-life focused rehabilitation of ill and injured persons.

The health insurance scheme also includes sickness and activity compensation which have replaced disability pension and temporary disability pension since 2003. Persons whose work capacity is permanently reduced due to illness by at least a quarter are entitled to activity compensation if they are aged between 19 and 29, or sickness compensation if they are aged between 30 and 64.

Occupational injury allowance provides protection against loss of income due to a permanent occupational injury.

Health insurance also includes benefits for care of closely related persons. A person who is away from work to look after a closely related severely ill person can obtain this benefit.

**Support for the disabled**

Disability allowance can be granted to persons who have a disability that has arisen before the age of 65 and who need assistance from another person or have increased expenses due to their disability.

Assistance allowance entitles certain disabled persons to personal assistance for increased opportunities to participate in the community.

Car support is to facilitate for the disabled to get about independently. This support is a grant for purchase of a car or adaptation of their own vehicle.

**Pensions**

The pension scheme consists of income pension, supplementary pension, premium pension and guarantee pension. The pension is based on all income throughout life. The total charge is 18.5 per cent, of which 16 is for income pension and 2.5 for premium pension. Income pension grows apace with the development of income in society and premium pension with the return on the funds selected. Guarantee pension is financed via the state budget and is paid to those with a low or no income-based pension.

The pension age is flexible. Pension can be drawn from the age of 61. Pension can also be drawn as part pension: 25, 50, 75 or 100 per cent.
Reduced expenditure for social insurance

What was most gratifying in 2005 is that we have reached half way in reducing sick leave to a more reasonable level, says Stig Orustfjord, Insurance Director.

The increase in expenditure for health insurance has been reversed and expenditure is decreasing for the first time for a long time.

We have invested a lot in working together with employers, the health service and the employment office. This has produced results, says Stig Orustfjord.

Försäkringskassan has also attempted to influence attitudes to sick leave. More people have become aware of the risks attached to long and passing sick leave. The co-financing introduced last year where employers have an additional cost for staff on full-time sick leave has also contributed.

It pays financially for employers to work together with their staff on long-term sick leave and to have a good working environment, says Stig Orustfjord.

Although development has moved in the right direction, there are still problems. For instance, the availability of care inputs in psychiatry, which does not correspond to the apparent needs of those on sick leave.

Increased competition in dental care

For a number of years, Försäkringskassan has monitored price increases in dental care. The task has been to strengthen consumers. The increases can now be seen to be slackening off.

Stig Orustfjord welcomes the fact that more people are travelling abroad for dental treatment and that low-price companies are becoming established, which increases competition.

It is not only dental care abroad that has increased in the past year but also ordinary care.

The table provides an overview of the financing of social insurance in 2005. Central government grants are shown net after deduction of contributions received. Försäkringskassan’s administration costs are financed largely by social security contributions, central government grants and funds from the National Insurance (AP) fund.

1) The total amount for administration expenses does not include expenditure for FMC at SEK 96 million, the Institute for Stress Medicine at SEK 16 million, and exports of services and external services at RFV Data at SEK 3 million. Total administration expenses including these items amounted to SEK 856 million.

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Our aims

On 1 January 2008, Försäkringskassan is to be an organisation that:

- Is top class and has the full confidence of the public as regards service, reception and efficiency.
- Actively contributes to fewer persons on sick leave and more at work.
- Is one of the country’s most stimulating workplaces with very low sick leave.
Försäkringskassan administers the insurances and allowances included in social insurance in Sweden.

2005 was the first year for the new Försäkringskassan: An agency throughout Sweden with a common management instead of 22 different agencies as before. 2005 has therefore been a year marked by changes.

Försäkringskassan has around 16 000 staff and has a number of offices in every county to meet customers and process cases. There is a county office in every county. The head office is in Stockholm.

Försäkringskassan’s client is the government. The government appoints the board. The agency is led by Director-General Curt Malmborg.

Important goals for Försäkringskassan include the length of processing times, ensuring that the correct benefit is paid and that those on sick leave receive help in returning to work.

Försäkringskassan consists of a number of divisions, of which the Production Division is the largest and the one that includes the activities of the county organisations.

There is an insurance delegation with elected representatives in every county. Their task includes monitoring the activities of Försäkringskassan from the perspective of the general public.

Försäkringskassan’s activity is to be based on customer requirements. Good access through different channels is important. Every day almost 200,000 citizens are in contact with Försäkringskassan via telephone calls, personal visits at one of the offices or by visits to the website www.forsakringskassan.se.

Försäkringskassan investigates, decides on and pays benefits from social insurance. Decisions in various types of cases are made, after being prepared by officials at Försäkringskassan, by special social insurance boards. Appointed representatives sit on the social insurance boards.

Försäkringskassan is also responsible for co-ordinating the rehabilitation needed for persons on sick leave to return to work.

The insurance doctor and the insurance dentist are Försäkringskassan’s medical advisors. Their task is to examine the documentation submitted by the doctors or dentists providing treatment and provide officials with documentation on medical issues.

Försäkringskassan provides information about social insurance in a number of ways by, for instance, brochures and on the website www.forsakringskassan.se.

Försäkringskassan has an extensive IT system. It is used to register information and to pay compensation but also to facilitate processing cases. During the year, the application processing system has been upgraded and now includes some automatic processing of temporary parental benefit. There are self-service systems on the Internet for some benefits including parental benefit.

**Steering resources and planning production**

In Försäkringskassan’s management, production director Maivor Isaksson is responsible for production of Försäkringskassan’s various services.

She is satisfied when she looks back on the first year. It has been filled with work on implementing and planning changes at the same time as the ordinary work has continued. She considers that Försäkringskassan has taken a number of steps forward.

– The focus is all the time on making it simpler for the customer so as to improve our service, she says.

One of the reforms during the year has been co-financing for employers where Försäkringkassan has built up a special customer centre with good result.

Försäkringskassan’s new organisation has also made it possible to plan production and steer resources in another way than before. This has contributed to making it possible to shorten some processing times.

– The whole organisation has participated in the working of reducing processing times for a group of customers with occupational injury cases. This was not previously possible when cases were tied to a particular county.

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Maivor Isaksson, Production Director.
Försäkringskassan and social insurance in 2005

– Försäkringskassan has worked across county borders with cases in dental care insurances which has meant that dentists and patients have received decisions on entitlement to compensation more quickly.

The new method of steering resources and planning production, sometimes across county borders, was not possible in the previous organisation. The whole of the organisation’s resources can now be used in a concentrated way.

– This is one of the biggest benefits with the new organisation. The integrated production management also enables us to make our results visible in a much clearer way than before. This stimulates further progress, says Maivor Isaksson who points out that the organisation in 2005 has achieved more of the targets that Försäkringskassan has set for itself than in previous years.

During the first year, a number of decisions have also been taken to improve Försäkringskassan’s service in the course of time. Maivor Isaksson draws attention to plans for an improved customer telephone service, which will increase access to Försäkringskassan’s information and service. Another area is simplified forms which will make it easier to apply for compensation. The changes have not been implemented in this area yet but have been planned.

One of the reasons for creating an integrated agency was to make processing and assessments more uniform throughout the country. The work of creating uniform processing has taken place throughout the year.

– About 40 per cent of the cases are now dealt with in processes of this kind, including sickness benefit cases. This means that all offices now work in the same way with people who apply for sickness benefit.

For a number of years, Försäkringskassan has had an Internet service, in particular for parents although the numbers using it are relatively few. Maivor Isaksson wants to make further effort here to “market” these services to parents more clearly.

– There are many advantages, she says. The Internet services makes it easier for parents at the same time as making the work of the responsible officials easier as more applications can be dealt with automatically.

**IT central to other activity**

Försäkringskassan has very extensive IT operations. This involves operation and maintenance of IT systems and also development of new services for the public and improved support to officials in their work.

The regular operation includes calculations of payments of benefits and allowances, sending letters, updating databases etc.

Försäkringskassan’s IT activities are gathered together in the Development Division. This division is responsible for operation of the IT systems – among the largest in Sweden – and development projects. **Mikael Strömbäck**, Development Director, makes it clear that IT is linked with change-related work and business development and is to be at the centre of Försäkringskassan’s other activities.

Many of the changes during the year have had an internal focus and have been about linking together the IT operations and development of new systems at the insurance offices, in order to become better at providing the organisation and, ultimately its customers, with the IT support and services required.

– Previously, the development of IT operations was regarded as a separate activity, which was quite far removed from processing cases and Försäkringskassan’s other work. We are now engaged in a very long journey to change this, says Mikael Strömbäck.

The Development Division is now responsible for the whole chain: From idea to production and daily delivery. Furthermore, it is to ensure that the introduction of new tools works as intended out at the insurance offices. He hopes that the result will be a reduced number of “hand-overs” in the organisation and thus an increased value for the large investments Försäkringskassan has made to develop new processes and systems.

The problems in the previous organisation became clear when the part of the new case management system used in processing temporary parental benefit was to be commissioned. The problems that arose largely concerned system development. The change-related work required for introduction of the new support had not been developed...
as a whole and not as close to the activity as would have been desirable. Even if the technology works as intended, gaps can still arise in the interface with the officials responsible for dealing with cases. The consequences created problems: Delayed payments and irritation among customers and staff.

Responsibility is clear in the new organisation for making sure that this does not happen again in the future. The new working methods are to make it easier to produce new systems and, above all, the new IT support will perform better when actually taken into use.

The fact that IT-related matters have been given a more central place in Försäkringskassan is related to production of processing, decisions and payment being given a central place. Functioning IT production is crucial for the whole of production. If the computers are not working, the whole processing activity comes to a halt. And then Försäkringskassan’s customers won’t receive any money.

The great challenges that Mikael Strömbäck sees for the future are about securing IT production, that is reducing breakdowns and reinforcing the new method of work by the development of new systems.

– Earlier many development projects were carried out without there being a clear idea of what requirements and expectations there were. It has not either been possible to measure whether the investments have been profitable. We now want to be certain of achieving good results by ensuring that IT and business development go hand in hand. When we plan changes, we must know what we want to achieve so that we can then measure if we have reached our goal, says Mikael Strömbäck.

**Common working processes**

In the county of Norrbotten, the incapacity rate has fallen most in Sweden from a high level. The recipe for success has consisted of a number of ingredients: a quick initial assessment, better dialogue with the doctors giving sick leave, new common working methods and case processes and a greater responsibility on the part of employers in rehabilitation work.

**Pekka Kairento**, who is head of the county organisation, has been involved in introducing what has been known as the Primo group in Norrbotten. Since then, the speed of processing has increased.

The Primo group receives all new cases of illness from the whole county and makes a quick assessment of entitlement to sickness benefit. The goal is for 90 per cent of the cases to result in payments within 30 days.

– Furthermore, those whom Försäkringskassan considers, are not entitled to sickness benefit or cases where supplementary information is required, which will delay payment, should be contacted within three days, explains Pekka Kairento.

– The most difficult aspect of the changes we are working with in the county of Norrbotten has been to have enough time to make staff feel that they are participating in changes in a good way at the same time as they have been fully occupied in meeting all production targets.

– However, we are starting more and more to see the benefits of being a large national agency with all the resources that it has at its disposal. One example is the assistance we have received from the county of Stockholm with processing some of the occupational injury cases that we would otherwise have had problems in processing in time ourselves, says Pekka Kairento.

There is considerable optimism about the future. Better methods of work with common working processes and a new case management system will definitely save resources. This will mean that processing will become more uniform throughout the country at the same time as it becomes more effective.

– Good system support in the future is an important question for us. We have a comparatively high incapacity rate in the county with many sick leaves, continues Pekka Kairento.

Norrbotten is satisfied with its performance in 2005, and even very satisfied in some respects.
– The incapacity rate is decreasing most in Sweden as well as the number of cases of illness. Furthermore, our own rates of sickness among staff has decreased, says Pekka Kai-rento.

Reorganisation has been important

During 2005, Kristin Ritter was county director in the county of Örebro. The county succeeded in achieving many of the goals set as well as having contended staff. Kristin Ritter is now head of the county organisation for Östergötland and Södermanland.

The most important question in the past year has been the work of equipping ourselves for the future where reorganisation has been at the centre of the changes.

– This has largely contributed to our coming closer to achieving our goals with better management, lower incapacity rates and shorter processing times for sickness benefit and parental benefit, says Kristin Ritter.

One of the most important results for 2005 in the county of Örebro which Kristin Ritter wants to draw attention to is the staff survey. For the second year running, staff are among the most contented in the whole organisation. The county of Örebro has also been very good at paying temporary parental benefit within 30 days which is the target. The county has worked hard to reduce processing times for occupational injuries. As regards the target for the work against ill health, this is not Örebro’s strongest side although work is progressing there too.

– This is about good team performance. However, we also have a good results culture which means a lot, says Kristin Ritter who considers that this also involves being able to give staff an idea of where they are going.

Management is of crucial importance for achieving results, she points out. Kristin Ritter would even say that management IS change. Accordingly, the work of bringing management closer to the staff, with at most 25 staff per manager has been of key importance.

The largest common issue to tackle now, according to Kristin Ritter, is Försäkringskassan’s image. She also has great expectations on the customer and channel strategy that is to be ready during 2006.

Kerstin Ritter, head of the county organisations in Östergötland and in Södermanland.
Five issues in focus

Sick leave decreased in 2005

Sick leave – the number of persons with sickness benefit, sickness and activity compensation, is one of our most serious problems in society. The government has set a target for reduced sick leave. At the same time, the number of persons with sickness or activity compensation is to be limited. Försäkringskassan has furthermore the target of reducing the incapacity rate to 37 days by the end of 2008.

The incapacity rate provides an overall picture of the number of days with sickness benefit and sickness and activity compensation which is paid per adult person.

The number of days with sickness benefit has decreased from 78.3 million days to 67.1 million in 2005. The incapacity rate has decreased by just over one day from 42.5 to 41.3. Försäkringskassan’s assessment is that the long-term goal with regard to sickness benefit days and the incapacity rate is clearly within sight.

During 2005, a breakthrough has also taken place as regards the reduced expenditure for sick leave.

During the year, the number of long-term cases of sick leave have decreased. Women’s share has been almost constant since 2000.

There are many causes underlying the positive changes: Försäkringskassan has developed a more professional and active assessment of entitlement to sickness benefit already at an early stage in a case of sickness. Among other things, this means that more people have been refused an application for sickness benefit – either from the beginning or by sickness benefit being withdrawn (this concerns about 1 per cent). However, this also involves a more active approach to the task of co-ordinating rehabilitation. Liaison meetings – where the individual, Försäkringskassan, the employer and health care personnel meet – are a tool for initiating rehabilitation efforts.

2005 was also the first year with co-financing from the employers. Co-financing means that the employers pay 15 per cent of the sickness benefit cost for the duration of full-time sick leave. The idea is for the employer to avoid the cost by taking more active measures to prevent sick leave and to facilitate return to work for those who are on sick leave.

In addition to the above causes, the discussion on sick leave which has been in process for a long time, has increased knowledge about health insurance. It has probably also contributed to a reduction of the inflow of new cases of illness. More people are aware that sick leave entails risks for passivity and exclusion and this has affected both doctors and individuals.

The decrease in long-term cases of illness has affected the inflow to sickness and activity compensation. In the short term, the reduction of cases of long-term sick leave has led to an increase in the number of persons with sickness and activity compensation, although in the long-term this number will also decrease. There are still few people who leave sickness and activity compensation in another way than through old age pension or death. However, the number who leave for work seems to be increasing. In all, 60,300 persons were granted sickness or activity compensation during the year. At the end of the year 556,800 persons had sickness or activity compensation.
The pension system is stable

In total, Försäkringskassa pays old age pension to around 1,650,000 pensioners. In addition to these, there are persons who have survivor’s pensions of various kinds. Another important benefit is housing supplement for pensioners.

The new pension system introduced at the beginning of the 21st century enables the individual to acquire a good picture of how large pension will be. Every year, Försäkringskassa and PPM send a forecast of the national pension in the orange envelope.

Most people, in addition to the national pension, also have some kind of agreement-based pension from their employer. To provide a possibility of overviewing the whole of the pension, Försäkringskassa and the Premium Pension Authority together with a number of pension companies, have started a pension portal on the web, minpension.se, which makes it possible for the individual to obtain an overview. In 2005, the pension portal had around 250,000 registered users.

The pension system is to be financially stable. This means, among other things, that the system’s assets must be larger than the system’s liabilities. The balance between assets and liabilities are expressed in a balance figure. The assets are the value of the flow of contributions, and the capital of the National Swedish Pension (AP) funds. The liabilities consist of the total of the pension credits (pension balances and the value of supplementary pension (ATP) points) and the value of pension undertakings which are being paid.

When the balance figure is greater than 1, assets are greater than liabilities. If the balance figure is less than 1, liabilities are greater than assets. The automatic balancing function is activated in these situations. This means that the “interest rate” in the pension system is adjusted downwards to the rate at which the pension liability is not less than the assets. In this way, the system is restored to balance.

More people applying for treatment abroad

The number of person applying for planned treatment in another EU/EEA country or Switzerland has increased greatly in 2005. In 2005, 954 applications were granted for payment for planned treatment abroad, which can be compared with 2004 when 147 applications were granted. Dental treatment is the most common form of care.

Being able to purchase treatment in the international market is a new situation for most people. However, with increased European integration where patient mobility can be a natural component of everyday life, patients also require increased information about their rights.

Family policy is very important for households with children

The goals of family policy are, among other things, to even out the financial conditions between families with and without children. Most insurances and allowances in this area even out these differences but households with children still have poorer financial conditions than households without children. Disposable income has not either increased as much for households with children as for other households in the period 2000 to 2005.

Family policy is most important for single person households although the part of their disposable income that has come from family policy has decreased between 2000 and 2005. Households consisting of cohabitating partners or married persons have received an increased share of their disposable income from family policy. Transfers to cohabiting households consist mainly of insurances and general allowances while the needs-tested allowances are most important for single-person households.

Parental benefit, totalling 480 days, is shared with half each to parents with joint custody. Women use more parental benefit days than men. For children born in the last few years, the average difference in the days taken between the child’s parents has decreased, however. With regard to all days taken with parental benefit, men took almost 19.5 per cent of the days in 2005, which is a weak increase compared with 2004 when the proportion was 18.7 per cent. Försäkringskassa is working for a more even distribution of parental benefit days between men and women by information meetings, advertising campaigns, and through targetted information to parents who still have unused parental benefit days for their children.
Increased measures against cheating and errors

In 2005, Försäkringskassan has made deliberate efforts to avoid cheating in the social insurance system. Both preventive measures and a number of targeted checks have been carried out.

During the year, targeted checks have been made on activity support, child support, maintenance support, child allowance and temporary parental benefit.

Försäkringskassan is following up the number of police reports that have been made due to suspected cheating in all areas of insurance and allowances. In 2005, there has been a considerable increase in the number of police reports. This is primarily a result of the new strategy that cheating is always to be reported to the police.

The number of police reports, 2001 – 2005

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<th>Area</th>
<th>2001</th>
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<td>Child allowance/Maintenance support</td>
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<td>Total</td>
<td>212</td>
<td>398</td>
<td>410</td>
<td>930</td>
<td>1 558</td>
</tr>
</tbody>
</table>

Statistics on police reports show that prosecution has been initiated in 150 cases, i.e. 22 per cent of the reported cases. This is the same share as for 2004.

Prosecutions and judgements, 2001 – 2005

<table>
<thead>
<tr>
<th>No. of prosecuted cases</th>
<th>2001</th>
<th>2002</th>
<th>2003</th>
<th>2004</th>
<th>2005</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>37</td>
<td>28</td>
<td>35</td>
<td>70</td>
<td>150</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>No. of cases leading to a verdict of guilty</th>
<th>2001</th>
<th>2002</th>
<th>2003</th>
<th>2004</th>
<th>2005</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>33</td>
<td>28</td>
<td>31</td>
<td>60</td>
<td>136</td>
</tr>
</tbody>
</table>

The number of cases with a verdict of guilty has more than doubled since 2004.
Försäkringskassan in Sweden

County | Telephone
--- | ---
Norrbotten | 0771-524 025
Västerbotten | 0771-600 700
Jämtland | 0771-524 230
Västernorrland | 0771-524 022
Dalarna | 0771-524 020
Gävleborg | 0771-10 20 30
Kronoberg | 0771-524 700
Värmland | 0771-170 170
Uppsala | 0771-524 300
Östergötland | 0771-524 500
Stockholm | 0771-524 080
Södermanland | 0771-524 004
Västmanland | 0771-524 019
Örebro | 0771-524 018
Västra Götaland | 0771-114 114
Halland | 0771-524 200
Jönköping | 0771-524 600
Kalmar | 0771-524 800
Gotland | 0498-200 600
Blekinge | 0771-524 100
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