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Evaluation of administrative settlement mechanisms for medical disputes in light of Law No. 08-08

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Abstract:

The Algerian legislator, through Law No. 08-08 related to disputes in the field of social security, has established legal mechanisms to settle medical disputes, relying on administrative settlement represented in conducting nonjudicial medical expertise as a necessary arbitration procedure for internal settlement of medical disputes in order to provide amicable opportunity to the Social Security Authority The insured or those with his rights to settle the dispute, as well as the state qualified disability committees in front of which objections and disputes related to disability cases are settled, whether disability resulting from a work accident or occupational disease, or acceptance of disability as well as the degree and review of the state of disability in the framework of social insurance, where the legislator made for each of them rules And special procedures to be considered, but it may happen that the two mechanisms of medical expertise and the State Disability Committee are not successful in resolving medical disputes, and here we are facing the issue of the possibility of judicial appeal, and the appropriateness of the legal texts for settling disputes from a procedural point of view, especially what is related By decisions of medical expertise that are binding on the insured and the Social Security Authority, even if they involve a defect, which results in creating legal problems and loopholes that require solving them.

Keywords: Administrative Settlement Mechanisms, Evaluation, Medical Disputes, Law No. 08-08

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Introduction:

Social security is a means by which the state provides social protection for its citizens against social risks. The right to social security is one of the rights enshrined in the constitutions of various countries. This enshrinement stems from various international covenants and declarations, particularly Article 22 of the Universal Declaration of Human Rights. Countries differ in the way they implement this right, in terms of their mechanisms and bodies. Like other countries, Algeria has prioritized its social security system and dispute resolution mechanisms. This is evident in the issuance of a set of laws regulating it. The first law after independence was Order 65-183, which distinguished between general and medical disputes. This order did not last long, as it was repealed in 1983, when Law No. 83-15 was issued. It was amended for the first time by Law No. 86-15 in 1986, and for the second time by Law No. 99-10 in 1999. Twenty-five years later, it was repealed by Law No. 08-08 of 2008 regarding disputes in the field of social security. We limit social security disputes to three main categories: general disputes, medical disputes, and technical disputes of a medical nature. The legislature has established a special system for these disputes, aiming to provide special social protection for social security beneficiaries or their beneficiaries by fully covering the social and occupational risks to which they are exposed. Our study will be limited to the second type of dispute, namely medical disputes, for which the legislature has established special rules, procedures, and mechanisms to resolve all protests and objections that may arise regarding decisions made by social security bodies within the framework of medical disputes. This is in an effort to provide greater speed and flexibility in the settlement of medical disputes arising between the insured and the social security body.

The importance of the study: It lies in the role of administrative settlement mechanisms for social security medical disputes, represented by medical expertise and the state disability committee, especially what the new law includes in terms of special procedures and provisions regulating them, which established the legal framework for disputes in general, and medical disputes in particular, as the latter represent a significant part of the disagreements and conflicts that occur between social security bodies and

funds on the one hand, and between insured patients who benefit from the provisions and benefits of social security on the other hand, and the ambiguity of the general provisions of these disputes in their theoretical aspect due to their connection to complex technical matters that cannot be grasped from a scientific and practical perspective except through contact with the human resources working in the social security sector.

Study objectives: To shed light on the mechanisms for administrative settlement of medical disputes, examine them, and assess their effectiveness through medical expertise and the State Disability Committee. To identify the legal issues raised, particularly in light of Law No. 08-08 regarding disputes in the field of social security. To demonstrate the possibility of judicial appeals against the decisions of the expertise and the State Disability Committee. To examine the practical suitability of the provisions of this law. To attempt to identify the fundamental shortcomings and gaps, particularly in the field of medical expertise, compared to the repealed Law No. 83-15. To address the procedures followed by both the medical expertise and the State Disability Committee.

Study problem: The problem is: How effective are the mechanisms for administrative settlement of medical disputes in light of Law 08-08?

Study methodology: To answer this problem, we adopted an analytical approach when analyzing relevant legal texts, as well as a descriptive approach to gain a comprehensive understanding of the subject of the study and provide details on its most important aspects.

Study plan: In order to achieve the stated objectives, we adopted a dual plan that included two topics. The first topic is the concept of medical disputes, which we divided into two requirements. The first requirement is the definition of medical disputes, and the second requirement is the field of application of medical disputes. The second topic is the effectiveness of administrative settlement mechanisms for medical disputes, which included two requirements. The first requirement is medical expertise, and the second requirement is the state disability committee.

The first topic: the concept of medical disputes

To determine the concept of medical disputes, we will address the definition of medical disputes (the first requirement), then determine the field of implementing these disputes (the second requirement).

The first requirement: the definition of medical disputes

The legislation has attempted to provide the definition of medical disputes, as we will show the definition of both Algerian legislation and French legislation.

The first branch: Algerian legislation

The Algerian legislator did not provide an accurate definition of medical disputes, considering that the definitions are always within the jurisdiction of jurisprudence, but he tried to define them in Law No. 08-08 of 23-02-2008 related to disputes in the field of social security, by stipulating the following: "Medical disputes in the concept of this law are intended, the differences related to the health condition of the beneficiaries of social security, especially illness, the ability to work, and the health condition of the patient, diagnosis and treatment As well as all other prescriptions "

Old Law No. 15-83 also defined the medical dispute as: "Medical disputes are concerned with all disputes related to the medical status of the beneficiaries of social security as well as those with their rights", as the legislator is satisfied here by limiting the medical dispute to disputes related to the health status of the beneficiaries of social security and their rights.

The new law 08-08 realized the deficiencies in which Law 83-15, which did not know the medical dispute and did not specify its cases, was therefore not clear, but it was not spared from criticism despite its expansion of the concept of the medical dispute in terms of his lack of success in providing a comprehensive definition and not giving it any addition, so he was satisfied with changing the phrase "medical condition" with the phrase "health condition" and neglecting the provision of "those with rights" as a presumed party in the conflict, Although it is extremely important, because in most cases the beneficiary is not a social security that begins the procedures for objection to social security decisions, but rather those with his rights instead of him, in the event that he is unable to carry out the procedures for objecting to health conditions or in the event of the death of

the beneficiary, and the term diagnosis is considered in its place because it is only a stage before any treatment, but the lesson is in what results from the diagnosis of treatment, disability or others, as well as mentioning the phrase all other prescriptions is not They are the recipes that were not incubated with the consulting doctor's approval because of his right to monitoring it based⁴

The second branch: French legislation

The French legislator called on medical disputes the designation of technical disputes, devoted by Article 402 of the French Social Security Law, while the French jurisprudence called it special disputes, in order to distinguish between them and public disputes, while the French judiciary tried to define this type of dispute by the French Court It has the French legislator, and a definition of medical disputes can be provided as "disputes or objections that are not related to the application of legislative and regulatory texts, related to the social security provided by the insured against the competent social security authority"

The second requirement: the field of application of medical disputes

The field of application of medical disputes can be determined in that they involve all the differences and objections contained in the opinions of diagnosis, prevention and treatment in pathological conditions, in addition to adapting and estimating the damage caused by work accidents and occupational diseases carried out by the attending physician, and the believer has no social or those with his rights to benefit from the performances due to the Social Security Fund in all cases, but at every violation in the procedures or contradicts the results of medical control With what was approved by the attending physician, it makes the Performance Authority of the Social Security Authority to issue a decision to refuse to sponsor compensation and thus entails depriving the insured socially of the fulfillment of his right to compensation, which contributes to the establishment and creation of the medical dispute through which it is decided either the right to benefit or not, so medical disputes emanate from disagreements on the occasion of the performances due in the field The legislator is in two types of in -kind and cash performance⁶

The first branch: the condition of illness and occupational disease

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As for the condition of the disease, the performance of the disease insurance includes in -kind performances, which are the sponsorship of medical and preventive care expenses for the benefit of the insured socially and those with his rights⁷. Through a prescription that justifies the interruption of work ⁸, it is edited by the attending physician according to the legal conditions required

In -kind performances also cover professional risks or diseases caused by the professional medium, which are distinguished from normal diseases despite their participation in the need for the person to treat and re -balance its social, but they differ in the cause and the work represented and its circumstances in relation to occupational disease as well A special professional qualification, as there must be a causal relationship between the disease and the nature of the work⁹.

The second branch: the case of work accidents

It is attached to the worker's body as a result of a sudden accident that does not return to the slow -evolving reasons related to work so that it does not enter into occupational diseases, and the accident is required to occur during the work of the work and it is surprising such as fall, collision or explosion, as it is every accident that resulted in a physical injury resulting from a sudden and external cause in the framework of work ¹⁰

The second topic: The effectiveness of the administrative settlement mechanisms for medical disputes

The Algerian legislator, through Law 08-08, relied on mechanisms to settle medical disputes or a friendly non-judicial administrative settlement of medical disputes, represented in medical expertise and the state committee of disability, and the extent of their effectiveness in briefing and addressing the problems of settlement or implementation, given the amendments that this law brought, completely different from what was stipulated in the canceled law No. 83-15 in several aspects.

The first requirement: medical expertise

The differences that arise between social believers and social security bodies, over the results of the medical previews or adapt the damage caused by work accidents and occupational diseases by the attending physician and

that ability by the Social Security Authority through its consultant doctor, and therefore we are in front of two appreciation of the health status of the insured, the first for the treating doctor and the second for the advisor doctor, and here the medical conflict that calls for medical expertise arises as a kind of The specialized medical arbitration for evaluation and accurate identification of damage¹¹

Medical experience and resorting to it is a medical arbitration and as a preliminary and juice to settle the medical dispute internally, in the event of protest against the medical decisions issued by the Social Security Authority, which takes construction on the opinion of the consultant doctor except for the state of disability resulting from a work accident or a professional disease and reviewing the deficit rate where in this case the objection is before the state deficit committee that qualifies directly without resorting to procedures for medical expertise, in accordance with the text of Article 31 of the law 08-08, after the amendment of Article 17 of Law 83-15, which considered all differences of a medical nature subject to the procedures for medical expertise. 12

The first branch: medical expertise procedures

The request for medical expertise by the insured is submitted socially with in 15 days starting from the date of receiving the notification of the decision of the Social Security Authority, with the necessity of the medical expertise request written and attached to the report of the attending physician, as the request is sent by a message recommended with a notice of receipt or deposited with the interests of the Social Security Authority in exchange for a deposit link¹³, and the expert doctor appoints a joint agreement between the insured social The expert is among the list of expert doctors prepared by the ministry in charge of health and the ministry in charge of social security after the binding advice of the Medical Ethics Council.¹⁴

The Social Security Authority must initiate the procedures of medical expertise within eight days starting from the date of depositing the application and suggesting that the insured is a socially insured, at least three expert doctors¹⁵, and the insured must socially accept or refuse the expert doctors proposed within eight days. But it is necessary to accept the expert¹⁶,

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the doctor appointed automatically by the Social Security Authority in the event of non -response.¹⁷

The Social Security Authority also appoints and immediately the expert doctor from the list of medical experts, provided that he is not proposed from among those previously proposed, in a period of thirty days starting from the date of depositing the request for medical expertise¹⁸

The Social Security Authority is obligated to submit a file to the expert doctor ¹⁹that includes the opinion of the attending physician and the opinion of the consultant doctor and a summary of the issues subject to the dispute, and the task of the expert doctor in return.²⁰

The Social Security Authority is obligated to inform the results of the medical expertise report to the concerned within ten days loyal to it²¹, and for the injury resulting from work accidents and occupational diseases, the Social Security Authority is guaranteed by the expenses required by treatment, transportation and residence expenses and the percentage of disability, and it is also necessary to indicate the fall of the insured right socially in medical experience in the event of refusing to respond without justification, for the summons of the expert doctor, and that the costs of the feed Expert doctors appointed to conduct experience will be at the expense of the Social Security Authority, and it can be the responsibility of the insured socially if the expert doctor clearly proves that his request is not founded²².

Law 08-08 defined the procedures for assigning social security bodies by challenging their medical decisions before medical expertise, in front of the expert doctor as a first and final degree to settle the administrative of conflicts of a medical nature and is discovered from the text of Article 19 of the same law that states: "The differences stipulated in Article 17 above are subject to medical expertise, with the exception of those stipulated in Article 31 of this law, the results of medical expertise are required for the parties in the end, except that The competent court in the social field can be notified to conduct a judicial experience in the event that it is impossible to conduct medical experience on the concerned person, "to resort to this and a crop, except in the event that it is impossible to conduct medical experience on the

concerned person. In this case, the competent court in the social field can be notified to conduct judicial experience.²³

It is also excluded explicitly, according to the text of Article 31 of the same law, that the cases in which the state deficit committee is broadcast, which is the state of permanent, total deficit or partial resulting from a work accident or a professional disease that results in granting proceeds and accepting the deficit, as well as the degree and review of the state of deficit within the framework of social insurance, where the committee broadcasts the objections presented to it within sixty days starting from the date of its receipt of the petition²⁴

The second branch: The Palaces of Law 08-08 in the settlement of problems of medical expertise

The Algerian legislator has seized, through Law 08-08, the procedures for experience and identified the validity of its work precisely and linked its deadlines with controlled dates in order to achieve the largest amount of speed, but it can not succeed in this friendly internal mechanism in achieving the purpose desired, that is, a final status, a final binding for the insured and the Social Security Authority as a principle and the exception is only in one case, which is the case of the impossibility of conducting medical expertise²⁵

Given the Natural Law 83-15 related to social security disputes, where the legislator mentioned a number of exceptions that require the judicial appeal regarding medical experience, including those related to the safety of procedures, and some of them related to matching the decision of the Social Security Authority for the results of medical expertise, as well as the exact and complete nature and not tainted with clothing for the results of medical experience and the necessity of causing or completing the experience in addition to the medical expertise in the case of the impossibility of conducting experience The friendly medical person concerned with the matter²⁶

By referring to the new law 08-08, which considered the results of experience in the event of its conducted binding and final even if it is a young man, a defect of defects, such as if the Social Security Authority chooses the expert doctor unilaterally without returning to the social insured or as if the deadlines of the procedures of experience do not respect, or even

if the results of the completed experience are inaccurate and incomplete and the ambiguity and lack of clarity and more of that are not permissible. Social Security and its incompatibility with the results of experience, all of these are considered aspects of challenges that are overlooked by Law 08-08, which indicates that the Algerian legislator is aspect of righteousness and legal logic, which requires the necessity of remedying this deficiency.

With regard to the impossibility of a friendly medical experience, the dispute becomes judicial, as a ruling may be issued before the issue is decided before the room specialized in social materials by appointing an expert to consider the file of the dispute that includes the medical and supervisory medical reports by re -examining the insured socially in accordance with the forms and procedures stipulated in the Civil and Administrative Procedures Law in order to leave the friendly settlement of the medical experience of the judicial solution, i.e. judicial experience, and it is required to accept the invitation that They fulfill all the legal conditions established to accept the invitation in addition to the necessity of attaching the opening petition with a copy of a decision of the Social Security Authority and socially insured by the results of the judicial expertise empty in the heart of the judicial ruling.²⁷

The issue that raises most of what is stipulated in the legislator in paragraph 2 of Article 19 of Law 08-08 related to the mandatory results of medical expertise permanently to the parties to the dispute, and this without stipulating cases whereby it is possible to appeal before the judiciary, as it was stipulated in the canceled law.²⁸

We discover through Law 08-08 that the mandatory issue of the results of experience is an amendment that needs to be modified, as it constitutes a major problem where it can not be addressed in practice except by stipulating the judicial appeal like what is stipulated An area for manipulation and lack of respect for procedures related to medical expertise, so our legislator should not occur in this legislative error, given that the previous law dealt with this problem, leaving issues without supervision and without restriction, allowing the field to penetrate the law in practice, which results in a legal problem and obstacle, but it cannot be settled in the absence of the legal text, so our legislator is tired of not allocating it to the legal protection represented in the judicial challenge that It was compared to the

mandatory results of the judicial experience, so it was better, according to our opinion, the distinction between two cases regarding the mandatory results of medical expertise, the first case if these results are not involved in any procedural defect and procedurally, then there is no need for the judicial appeal and these results are binding on the power of law, but for the second case if the results of the experience involve a procedural defect, then it requires the necessity of the judicial appeal, then this is according to an angle Our perspective.

The second requirement: the state committee for deficit

This committee is the second party in charge of broadcasting in medical disputes, where it is broadcast on the disputes resulting from the decisions issued by the social security bodies related to the state of permanent, total or partial deficit resulting from a work accident or a professional disease that results in granting proceeds, accepting the deficit as well²⁹

The first branch: the procedures of the state committee for deficit

This committee can accept the deficit or review it within the framework of social insurance, within a period of two months, starting from the date of its receipt of the petition, as this committee as it consists of specialized doctors, appoint an expert doctor and examine the patient and request supplementary examinations, and this committee is chosen by the insured socially within thirty days starting from the date of notification A directive of a message recommended with a notice of receipt or depositing it directly with the committee secretariat in exchange for a deposit link³⁰, if the canceled law is not 83-15, the request is required to be attached to the report of the attending physician, then the requirement of that new law to give the seriousness to the objection or appeal before it and to facilitate its work as well, as long as the report of the attending physician includes medical, medical, technical, technical reasons, such as whoever provides a comprehensive accurate presentation on the health status of the insured while The reality was proven in the shadow of the previous law that most grievances were based on family social reasons, and therefore submitting an objection before this committee is mandatory to the insured before presenting his dispute over the judiciary, which was confirmed by the Algerian social judiciary in its rulings and

decisions where it was considered that the failure to submit the insured is what proves his dispute over it leads to the rejection of his claim in form.³¹

The decisions of the State Honor Committee are in twenty days, starting from the date of the decision, with a message recommended with a receipt or by approved observation aid for social security in the receipt report³²

The decisions of this committee are subject to appeal before the competent judicial authorities within thirty days, starting from the date of receiving the decision to notify the decision³³

The Social Security Authority bears expenses for the insured, socially or those with his rights or his companions, if necessary, outside the residency municipality, in response to the summons of the expert doctor or the state of the state tap.³⁴

The expenses resulting from the procedures stipulated in the materials shall be from 31 to 36 related to the field of deficit, at the expense of the Social Security Authority unless the expert doctor clearly proves that the request for a socially insured is not founded, and in this case according to Article 37 of the same law the costs of fees due at the account of the insured socially 35

It should also be noted that, in light of the abolished law 83-15, all the differences and decisions issued by social security bodies and funds on the occasion of medical disputes were compulsory through a preliminary stage of medical expertise and then resuming its decisions before the state deficit committee that it considers as a second and final degree, but if the cases of disability resulting from social insurance, work accidents or occupational diseases were raised directly to the state disability committee that It is considered primarily and final, while Law 08-08 has reduced the field of applying medical expertise, and the state committee for deficit is no longer a second degree or an appeal. Rather, it became directly notified as a first and final degree in cases³⁶

The second branch: the judicial appeal in the decisions of the state committee for deficit

The internal settlement is the basic principle in this dispute because it is the best way to resolve it, as these bodies in charge of dismissal have a specialty in this field. The lack of presentation of this dispute as a preliminary stage of

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this committee and before resorting to the judiciary leads to a rejection of the call to the court of first instance to corrupt the procedures, which was confirmed by the jurisprudence of the Supreme Court.³⁷

The decisions of the qualified state deficit committee are subject to appeal before the competent judicial authorities within thirty days, starting from the date of receiving the decision³⁸

Referring to the text of Articles 30 and 35 of Law 08-08, we find changes in the formation of the qualifying state deficit committee, where the chairman of the committee who was a adviser to the Judicial Council has been changed, and by referring to the judicial practice, we note that the courts after the issuance of the new law, the executive decree 09-73, which reshaped the qualifying state deficit committee became separated in the objections against the decisions of these committees and Homa confirmed by the Setif court ruling issued on 3/5/2010, Also, the old law obliged the deficit committee to cause its decisions, which makes it subject to the supervision of the Supreme Court. It was canceled by Law No. 08-08, which does not stipulate the mandatory of the reasoning.³⁹

We also discover through Article 35 of Law 08-08 that the legislator remained on the phrase "before the competent judicial authorities", and did not add anything new except for the appeal period that was identified for thirty days and is calculated starting from the date of receiving the decision to notify the decision, and accordingly, the insured must, after notifying it by the decision of the state deficit, must appeal before the Supreme Court within thirty days from the date of receiving the notification 40

conclusion:

The Algerian legislator canceled the previous Law No. 83-15 in 2008 and its issuance of law 08-08 related to disputes in the field of social security, through which the legislator has consistently made changes in the procedures related to the methods of settlement of medical disputes, including medical expertise and the state deficit, but this law was not spared from criticism, as it led to the creation of legal problems, especially the lack of stipulation of solutions to address them, as it did not resolve the issue of

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gaps Legal, which affects its legal texts and rules and decreases from its effectiveness, given that the legislator compels the parties to the results of medical expertise on the one hand and not to perpetuate the means of protection or stabbing in the event of confusion and manipulation of these results, which contributed to the creation of a violation of balance in terms of legal protection, and the appointment of it is permissible except in the case of the actual impossibility of experience contrary to what was stipulated in the canceled law that authorized the judicial appeal in the results of the medical experience, in addition To the judicial appeal in the decisions of the state committee for deficit.

The results reached:

- Medical experience is an arbitration and a courtesy of the administrative settlement of the medical dispute, and the mandatory results of the insured and the Social Security Authority.
- -The possibility of judicial appeal in the results of medical experience is an exception to the general rule in the event that it is impossible to conduct medical expertise.
- The Algerian legislator's neglect of defects that can be included in the results of experience when making them binding, and non -stabbing.
- The permissibility of the judicial appeal in the decisions issued by the state committee for the deficit, provided that it is attached to the report of the attending physician.

Suggestions:

- The necessity of the legislator to re-control and draft law 08-08, especially with regard to the possibility of judicial appeal in the results of medical expertise.
- The procedural balance of the medical expertise mechanism must be restored in order to achieve the goal for which it was set.

Actual devotion to judicial control over the decisions of medical expertise or the state committee for disability, which contributes to activating its role in resolving medical disputes.

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