

## Settlement of Medical Disputes in the Field of Social Security under Algerian Legislation.

(A comparative Study Between the Former Law No. 83/15 and the New Law No. 08/08).

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### Abstract:

Amid the ongoing evolution of Algeria's social security framework, medical disputes have emerged as one of the most complex legal issues affecting the relationship between insured persons and social security institutions. The replacement of Law No. 83-15 by Law No. 08-08 marked an important step toward modernizing the mechanisms governing medical expertise and disability appeals. Yet, the new law continues to face practical and procedural challenges, particularly in terms of clarity, independence, and efficiency.

This study examines the legal foundations and procedural mechanisms for resolving medical disputes within Algeria's social security system, with a comparative focus on the two legislative frameworks. Using a descriptive-analytical and comparative method, it explores both the theoretical and practical dimensions of dispute settlement. The research also evaluates whether the current mechanisms—such as medical expertise and the Provincial Disability Committee—ensure genuine neutrality, procedural transparency, and effective protection for the insured.

The findings reveal persistent weaknesses, including insufficient procedural safeguards, limited judicial oversight, and the absence of alternative dispute resolution (ADR) mechanisms. To enhance the balance between administrative authority and individual rights, the study recommends clearer procedural deadlines, improved independence of medical committees, and the institutionalization of conciliation and arbitration processes in medical dispute settlement.

### Keywords:

Social Security, Medical Disputes, Law No. 08/08, Law No. 83/15, Disability.

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### **Introduction:**

Social security represents a highly developed and dynamic legal system that evolves in close connection with economic, social, and political transformations. Consequently, any change in these surrounding conditions is quickly reflected in the legislation governing social protection, both in substance and in practice. Within this framework, medical disputes constitute one of the most sensitive and complex issues affecting the relationship between insured individuals and social security institutions in Algeria. These disputes typically arise when the opinions of treating physicians' conflict with those of the consulting physicians affiliated with the Social Security Fund, especially regarding work capacity, disability assessment, or eligibility for medical benefits.

Ensuring fair and transparent procedures for resolving such disputes is essential to maintaining public confidence in the social security system. Although Law No. 08/08, which replaced Law No. 83/15, introduced new structures such as the Provincial Disability Committee and refined certain procedural aspects, the effectiveness of these mechanisms remains questionable. The dual administrative and medical nature of these disputes continues to generate procedural ambiguity, inconsistent application, and limited judicial oversight.

#### **A) Importance of the Study:**

The topic is of significant legal and social importance because medical disputes directly affect the fundamental rights of insured persons-namely, their entitlement to compensation, benefits, and healthcare under the national social protection framework. Moreover, this study seeks to fill a gap in Algerian legal scholarship, as previous works have mainly examined general or administrative disputes, without providing an in-depth analysis of medical disputes as a distinct legal category. This research thus contributes to clarifying the conceptual and procedural framework of these disputes and evaluates whether existing mechanisms ensure equity, efficiency, and neutrality.

#### **B) Research Problem:**

The central question of this study can be formulated as follows:  
To what extent are the legal mechanisms governing the settlement of medical disputes under Algerian social security legislation-particularly Law No. 08/08-effective in ensuring fairness, procedural clarity, and protection of the insured's rights?

From this main question arise the following sub-questions:

1. What is the legal nature and conceptual framework of medical disputes in Algerian social security law?
2. How do the procedures of medical expertise and the Provincial Disability Committee operate in practice?
3. What are the main procedural and institutional challenges affecting the neutrality and efficiency of these mechanisms?
4. What reforms could enhance the transparency and effectiveness of dispute resolution in this field?

**C) Research Hypotheses:**

This study is based on the following hypotheses:

- The current legal framework for resolving medical disputes under Law No. 08/08 lacks procedural precision and uniform application.
- The dual medical–administrative character of the dispute resolution process reduces impartiality and procedural guarantees for insured persons.
- The absence of alternative dispute resolution mechanisms limits efficiency and increases judicial congestion.

**D) Research Methodology:**

The study adopts a descriptive–analytical and comparative approach. It first examines the theoretical foundations of medical disputes and their legal classification under Algerian law, before analyzing the procedural and institutional mechanisms introduced by Law No. 08/08 in comparison with Law No. 83/15. The analytical component aims to assess the effectiveness and limitations of these mechanisms through a critical examination of legal texts, judicial decisions, and relevant doctrinal opinions.

**E) Structure of the Study:**

To achieve these objectives, the research is divided into two main chapters:

**Chapter I:** Theoretical Framework-The Conceptual and Legal Foundations of Medical Disputes in the Field of Social Security.

**Chapter II:** Practical Framework-Mechanisms for the Settlement of Medical Disputes under Algerian Legislation and the Evaluation of Their Effectiveness.

## **Chapter I: Theoretical Framework – The Conceptual Foundation of Medical Disputes in the Field of Social Security.**

This chapter establishes the theoretical underpinnings that define the nature and scope of medical disputes within the realm of social security. It explores the conceptual links between healthcare provision, patients' rights, and institutional accountability. By analyzing the legal and ethical dimensions of medical disagreements, the chapter seeks to clarify the foundational principles guiding dispute resolution mechanisms. Ultimately, it provides the conceptual groundwork necessary to understand the complex interaction between social welfare systems and medical jurisprudence.

### **Section One: Concept and Legal Nature of Medical Disputes**

Medical disputes within the field of social security differ fundamentally from general or administrative disputes, both in their nature and in the mechanisms established for their resolution. They are characterized primarily by their technical and medical dimension, which often outweighs the administrative or judicial elements.<sup>1</sup> Understanding this conceptual distinction is essential to delineate the scope of these disputes and to identify the appropriate bodies for their adjudication.<sup>2</sup>

#### **1. Definition of Medical Disputes under Law No. 83-15**

Law No. 83-15 concerning social security did not provide an explicit definition of medical disputes.<sup>3</sup> It merely referred to them indirectly in Article 4,<sup>4</sup> which mentions conflicts relating to the health condition of the insured or their dependents. This legislative silence led to conceptual ambiguity, as the law did not specify the nature of such disputes, their forms, or the competent authority for resolving them.<sup>5</sup>

From a doctrinal standpoint, a medical dispute may be defined as any disagreement between an insured person and the social security institution regarding the individual's medical or health condition.<sup>6</sup> Such disputes usually arise from differing assessments between the treating physician-who monitors the patient's medical progress-and the consulting physician of the Social Security Fund-who evaluates eligibility for benefits and compensations.<sup>7</sup>

The lack of precision in the 1983 law led to significant interpretative uncertainty, blurring the boundaries between medical disputes and other types of social security conflicts.<sup>8</sup> According to Professor Ben Sari Yassine, this conceptual gap reflected both the limited judicial experience with such cases at the time and the socio-economic context that shaped the legislative

drafting. Consequently, medical disputes were treated as an ancillary aspect of general social disputes rather than as a distinct legal category requiring specialized procedural rules.<sup>9</sup>

## **2. Definition of Medical Disputes under Law No. 08-08**

Law No. 08-08<sup>10</sup> of 2008 sought to modernize the legal framework governing social security, including the regulation of medical disputes. Article 17 defines medical disputes as “conflicts related to the health condition of social security beneficiaries.” However, this definition, while seemingly clearer, presents two major shortcomings.

First, the legislator omitted the term “beneficiaries” that was explicitly included in the earlier law, thereby excluding family members or dependents who may legitimately contest decisions after the insured’s death. Second, the new law introduced vague terms such as “other medical prescriptions,” which lack interpretive clarity and create practical ambiguity in determining the scope of disputes.

Therefore, despite the terminological change from “medical condition” to “health condition,” the new provision did not resolve the definitional uncertainty.<sup>11</sup> The absence of a precise and comprehensive legal definition continues to complicate both procedural and judicial practice.<sup>12</sup>

In conclusion, Law No. 08-08 did not substantially improve the conceptual framework of medical disputes. Instead, it retained many of the ambiguities of the former law, necessitating further legislative clarification to ensure uniform interpretation and procedural coherence.<sup>13</sup>

### **Section Two: Scope and Characteristics of Medical Disputes**

The scope of medical disputes within the Algerian social security system is limited to issues directly connected to the medical or health condition of the insured or their dependents. These disputes typically emerge in several specific contexts, such as:

1. Medical examinations initiated by the social security institution to assess entitlement to benefits following the submission of medical certificates;
2. Appeals of disability assessments, particularly regarding the percentage of disability or the recognition of incapacity;
3. Determination of entitlement to compensation or healthcare related to occupational diseases or work-related accidents;
4. Verification of causation, i.e., whether an injury qualifies as a workplace accident;

5. Disagreements over compensation, whether daily or lump-sum, following work accidents or occupational illnesses.

These cases highlight the dual medical–administrative character of medical disputes.<sup>14</sup>

They require not only an understanding of legal principles but also medical expertise, making them inherently complex.<sup>15</sup>

The legislator’s primary goal in designing the procedures was to safeguard the insured’s right to defense while maintaining administrative efficiency.

However, from a critical perspective, the Algerian legislator’s approach remains largely descriptive and formalistic. The law defines procedures but offers limited guidance on substantive principles such as neutrality, due process, and equality of arms between the insured and the administration. As a result, procedural rights often depend on the interpretation of administrative bodies rather than on clear legislative mandates.

### **Section Three: Doctrinal and Comparative Insights**

In comparative terms, medical disputes in Algeria resemble those in other civil law jurisdictions-particularly France and Tunisia-where specialized medical committees play a decisive role in dispute resolution. However, unlike France, where the administrative and judicial functions are clearly separated and procedural safeguards are codified, Algerian law retains a hybrid structure that blurs the line between technical expertise and administrative adjudication.

Several scholars, including Ahmia (2013) and Abbas (2016), emphasize that this hybridity undermines the neutrality of medical assessments, as committees often operate under the supervision of social security institutions themselves. This structural dependency diminishes the appearance of impartiality and erodes public trust in the fairness of the system.

A more coherent legislative reform should therefore aim to:

- Clearly define the legal nature of medical disputes;
- Distinguish between administrative review and medical arbitration;
- Establish procedural safeguards ensuring the independence of medical experts;
- Introduce a specialized social-medical tribunal or alternative dispute resolution mechanisms to complement existing administrative procedures.

Summary of Chapter I Findings

- Both Law No. 83-15 and Law No. 08-08 fail to offer a precise and functional definition of medical disputes.
- The new law improved procedural organization but retained conceptual ambiguity.
- The dual administrative-medical nature of the system complicates impartial adjudication.
- Comparative analysis highlights the need for stronger procedural guarantees and clearer separation of functions.

## **Chapter II: Practical Framework -Mechanisms for the Settlement of Medical Disputes under Algerian Legislation.**

This chapter examines the practical mechanisms established by Algerian legislation to address and resolve medical disputes within the framework of social security law. It focuses on the legal instruments, procedural pathways, and institutional bodies responsible for handling conflicts between healthcare providers, patients, and social security institutions. The discussion highlights both judicial and alternative dispute resolution methods, emphasizing their efficiency, accessibility, and alignment with public health objectives. Through this analysis, the chapter aims to evaluate the effectiveness of Algeria's legal framework in ensuring fairness and protecting the rights of all parties involved.

### **Section One: Settlement through Medical Expertise**

Medical expertise constitutes the cornerstone of the Algerian legal framework for resolving medical disputes in the field of social security. It represents a technical and neutral procedure intended to assess the validity of contested medical decisions and to safeguard the rights of insured individuals. Under both Law No. 83-15 and Law No. 08-08, medical expertise serves as a key procedural instrument in resolving disputes concerning disability, occupational disease, or work-related accidents.

#### **1. Definition and Legal Basis**

According to Article 95 of Executive Decree No. 92-276, medical expertise is defined as an objective medical evaluation carried out by a qualified expert to determine the insured's health condition. It acts as a form of medical arbitration, ensuring that disputes are examined scientifically and impartially before they reach judicial channels.<sup>16</sup>

Under the earlier Law No. 83-15, recourse to medical expertise was mandatory in all disputes involving medical issues. The legislator sought to ensure that such conflicts would first be examined by specialists capable of

providing technical insight. However, the 2008 reform introduced by Law No. 08-08 relaxed this requirement, making medical expertise an optional or alternative procedure depending on the case.

While this change reflects a desire for flexibility, it also created interpretive uncertainty: the absence of a clear statement on whether expertise is obligatory or optional has led to inconsistency in application among local branches of the social security administration. This ambiguity undermines legal predictability and the insured's procedural guarantees.

## **2. Procedural Stages of Medical Expertise:**

The medical expertise process under Law No. 08-08 comprises several structured steps designed to ensure transparency and fairness:

### **A. Notification and Right to Appeal:**

The Social Security Institution is required to notify the insured of any medical decision affecting their rights, particularly those concerning disability or work capacity.<sup>17</sup> Upon notification, the insured has the right to request neutral medical expertise within one month.<sup>18</sup> The request must include a medical certificate from the treating physician outlining the reasons for contesting the decision.<sup>19</sup>

### **B. Initiation and Appointment of the Expert:**

Once the request is submitted, the institution must initiate expertise procedures within eight (8) days.<sup>20</sup> Importantly, the expert physician must be chosen by mutual agreement between the insured and the institution from a list approved by the Ministry of Health.<sup>21</sup> This rule, confirmed by the Supreme Court's decision of February 15, 2000, ensures neutrality and procedural balance.<sup>22</sup> Failure to respect this principle renders the expertise legally void.

### **C. Expert's Report and Notification:**

Following examination, the expert must submit a written report that becomes the basis for the final administrative decision. The institution is legally required to notify the insured within ten (10) days of receiving the expert's report-a reform introduced by Law No. 08-08 to enhance procedural transparency and prevent administrative delays.

### **D. Binding Nature of Expertise Results:**

The findings of medical expertise are binding on both parties-the insured and the social security institution-unless appealed within the legal time limits. However, Law No. 08-08 removed a critical safeguard present in the earlier law: previously, disability-related disputes could be appealed before the

Provincial Disability Committee even after expertise. This modification has accelerated procedures but also reduced the depth of technical review.

### 3. Critical Evaluation of the Expertise Mechanism:

While the medical expertise process appears robust in theory, its practical application reveals several weaknesses:

- ❖ **Lack of Independence:** Experts are often affiliated with the same institutions whose decisions they are asked to review, compromising neutrality.
- ❖ **Procedural Delays:** Despite legally defined deadlines, administrative bottlenecks frequently delay both notifications and expert appointments.
- ❖ **Limited Judicial Oversight:** Courts tend to defer to the technical conclusions of experts, even when procedural irregularities exist.
- ❖ **Insufficient Remedies:** The absence of intermediate review mechanisms leaves the insured with limited recourse between administrative and judicial levels.

To ensure genuine procedural justice, reforms should include the creation of an independent body of certified medical experts under judicial supervision and the codification of uniform procedures across provinces.

## **Section Two: Settlement through the Provincial Disability Committee.**

This section analyzes the role of the Provincial Disability Committee as a key mechanism for resolving medical disputes related to disability assessments. It outlines the committee's procedural framework, jurisdiction, and its contribution to ensuring fairness and transparency in social security decisions.

### 1. Legal Framework and Composition<sup>23</sup>

Law No. 08-08 established the Provincial Disability Committee as the primary body for adjudicating disputes related to disability assessments. Its creation reflects the legislator's intent to introduce a more specialized and decentralized mechanism capable of balancing medical expertise with administrative decision-making.

The committee's composition is mainly technical and administrative, including:

- A chairperson representing the local administrative authority;
- Several physicians appointed by provincial health services;
- Advisors from social security institutions;
- Additional experts consulted when necessary.

Notably, the judicial element that previously characterized the committee under Executive Decree No. 05-433 was removed.<sup>24</sup> This structural change, while emphasizing technical competence, diminished the committee's quasi-judicial character and weakened its perceived impartiality.<sup>25</sup>

#### 2. Procedural Mechanisms:

Appeals before the committee may be filed either by registered mail or by direct submission to its secretariat within thirty (30) days of receiving the contested decision.<sup>26</sup> A new procedural requirement introduced by Law No. 08-08 mandates that each appeal be accompanied by a report from the treating physician, ensuring that the committee has sufficient medical data to evaluate the case.<sup>27</sup>

The committee functions as both an initial and final administrative instance in disability matters. Its jurisdiction includes:

- Examining and validating medical expertise reports;
- Determining disability percentages;
- Approving or rejecting claims for incapacity benefits;
- Issuing final administrative decisions subject to judicial appeal before the social division of the court.

#### 3. Legal Nature and Effects of Committee Decisions:

The decisions of the Provincial Disability Committee are binding but not judicial. They are considered internal administrative acts of a technical nature. Consequently, they can be challenged before the Social Chamber of the Court, which serves as the final judicial safeguard for insured individuals. This dual-layer structure-administrative committee followed by judicial review-illustrates the legislator's attempt to balance efficiency with access to justice.

#### 4. Critical Analysis:

Despite its potential advantages, the committee system suffers from several limitations:

- ❖ **Dependence on Administrative Authority:** The committee operates under the supervision of the same social security body whose decisions it reviews, limiting true independence.
- ❖ **Lack of Transparency:** Procedures are not standardized, and record-keeping varies by province.
- ❖ **Weak Enforcement:** Decisions favorable to the insured are sometimes delayed or only partially implemented.

- ❖ **Absence of Alternative Procedures:** The law does not provide for conciliation or arbitration mechanisms, forcing most disputes into lengthy judicial proceedings.

From a comparative perspective, countries such as France and Morocco have adopted hybrid models combining administrative review with independent medical arbitration panels, offering both expertise and impartiality. Algeria could benefit from adopting a similar structure.

### **Section Three: Toward a More Effective System**

A review of both Law No. 83-15 and Law No. 08-08 reveals a gradual yet incomplete evolution in the handling of medical disputes. While procedural timeframes and institutional mechanisms have improved, the overall system still lacks coherence, transparency, and independence.

To strengthen the framework, this study recommends:

1. Reintroducing a Judicial Element within the Provincial Disability Committee to guarantee impartiality.
2. Establishing an Independent Medical Arbitration Council to handle appeals outside the administrative hierarchy.
3. Standardizing Procedural Deadlines and enforcing administrative accountability for non-compliance.
4. Developing ADR Mechanisms, including mediation and conciliation at the pre-litigation stage.
5. Training and Certification for medical experts and administrative officers involved in dispute resolution.
6. Improving Access to Justice through reduced fees and simplified appeal procedures for vulnerable insured persons.

These reforms would not only enhance legal certainty but also restore confidence in the neutrality and fairness of the Algerian social security system.

#### **Summary of Chapter II Findings**

- Law No. 08-08 introduced modernized procedural mechanisms but weakened technical depth and judicial oversight.
- The Provincial Disability Committee lacks structural independence and transparency.
- The system remains primarily administrative rather than participatory or rights-oriented.
- Institutional reform and the adoption of ADR mechanisms are essential for ensuring fair and efficient dispute resolution.

### **Conclusion:**

The analysis of medical disputes within Algeria's social security system demonstrates that this category of conflicts occupies a crucial position in safeguarding the rights of insured persons. It directly affects access to compensation, healthcare, and social protection-rights that form the cornerstone of human dignity in a welfare-based legal system.

While Law No. 08-08 introduced significant procedural reforms compared to Law No. 83-15, including clearer appeal procedures and the establishment of the Provincial Disability Committee, the study reveals that the system remains administratively dominated and procedurally fragmented. The intended balance between efficiency and fairness has not yet been achieved.

From both theoretical and practical perspectives, the current framework continues to suffer from ambiguity, institutional dependency, and limited judicial oversight. Medical expertise, though intended as a neutral mechanism, often lacks independence due to its integration within the administrative structure of social security institutions. Similarly, the Provincial Disability Committee, despite its technical orientation, operates under administrative supervision and lacks procedural transparency.

The absence of alternative dispute resolution (ADR) mechanisms further exacerbates delays, limits access to justice, and increases the burden on ordinary courts. Consequently, the insured person-who is supposed to be the primary beneficiary of protection-remains the weaker party in both the administrative and medical processes.

Despite these shortcomings, the Algerian experience provides a valuable foundation for future reform. The progressive codification of procedures under Law No. 08-08 demonstrates the legislator's willingness to adapt to evolving socio-legal needs. However, genuine procedural justice requires moving beyond formalistic reforms toward a more participatory, transparent, and balanced system.

### **Key Findings:**

1. The definition of medical disputes under Algerian law remains incomplete and lacks coherence, resulting in inconsistent interpretation and application.
2. Law No. 08-08 improved procedural structure but reduced the judicial component of dispute resolution, weakening impartiality.
3. Medical expertise serves as a fundamental procedural tool but suffers from limited independence and oversight.

4. The Provincial Disability Committee provides an administrative solution but not a judicial guarantee.
5. Procedural deadlines are defined in law yet frequently ignored in practice due to administrative inefficiency.
6. There is no legal framework for alternative mechanisms such as mediation or arbitration, leaving litigation as the only path.

**Recommendations:**

1. **Enhance Legal Clarity:** Introduce an explicit and comprehensive definition of medical disputes, distinguishing them from general and technical disputes.
2. **Reform Institutional Structures:** Reintroduce a judicial element within the Provincial Disability Committee to strengthen impartiality and procedural legitimacy.
3. **Guarantee Independence of Experts:** Create a national registry of certified medical experts operating under judicial supervision to ensure neutrality.
4. **Standardize and Enforce Time Limits:** Codify procedural deadlines for notifications and appeals, and impose administrative accountability for delays.
5. **Develop Alternative Dispute Resolution Mechanisms:** Establish conciliation or arbitration panels for medical disputes to reduce judicial backlog.
6. **Increase Transparency and Accessibility:** Simplify procedures, publish committee decisions, and ensure low-cost access to appeals for vulnerable groups.
7. **Continuous Training:** Provide targeted training for both medical and administrative personnel to improve the handling of medico-legal disputes.
8. **Comparative Legislative Benchmarking:** Draw from best practices in jurisdictions such as France and Morocco to build a balanced model combining medical expertise with judicial oversight.

**Final Reflection:**

The effectiveness of social security law is ultimately measured not only by the clarity of its provisions but also by its capacity to deliver justice to those it protects. Algeria's evolving legal framework for resolving medical disputes stands at a pivotal stage-caught between administrative efficiency and the imperative of procedural fairness. The path forward requires reinforcing the independence of institutions, embedding transparency in every procedural step, and prioritizing the rights and dignity of the insured as the ultimate goal of legal reform.

## **Bibliography List:**

### **Primary Sources:**

#### **Legal Documents**

1. Law No. 83/15: Ordinary Law No. 83/15 of 2 July 1983 concerning Social Security Disputes, amended by Law No. 95/10 of 1 November 1999, JO No 28, p1823.
2. Law No. 08/08: Ordinary Law No. 08/08 of 23 February 2008 repealing Law No. 83/15, Official Gazette, JO No. 11, 2 March 2008, p 8-9-10.
3. Executive Decree No. 92-276: Executive Decree of 6 July 1992 containing the Code of Medical Ethics, Official Gazette, No. 52, p148.
4. Executive Decree No. 05-433: Executive Decree of 8 November 2005 defining the rules for appointing members of the Provincial Disability Committee and its operational procedures, p6-8.
5. **Supreme Court of Algeria**, Decision of 15 February 2000 (Social Chamber), establishing the principle of mutual agreement in the appointment of medical experts.

### **Secondary Sources:**

#### **I. Books:**

##### **A. Specialized Books:**

1. **Ben Sari, Yassine**: Social Security Disputes in Algerian Legislation, Houma Printing & Publishing, Algeria, 4th Ed., 2013, p 41.
2. **Semati, Tayeb**: Social Insurance in the Field of Social Security According to the New Law, Houssa Publishing, Ain M'lila, Algeria, New Ed., 2018, pp94,295,296,297,298,299,300,304.
3. **Khalifi, Abdelrahman**: Concise Guide to Labor and Social Security Disputes, Dar Al- 'Ulum Publishing & Distribution, Algeria, Revised Ed., 2016, p118.
4. **Ahmia, Slimane**: Mechanisms for Settling Labor and Social Security Disputes in Algerian Law, National University Press (OPU), 2nd Ed., Algiers, 2013, p191.
5. **Abbas, Jamal**: Settlement of Medical Disputes in Algerian Social Security Law, Dar Al-Hamed Publishing & Distribution, Amman, Jordan, 1st Ed., 2016 / 1437 AH, p76.

##### **B. General Books:**

1. **Hamdi Basha, Omar**: Social Judiciary, Houma Publishing, Algeria, 2013, p20.

#### **II. Theses and Dissertations:**

1. **Jajjai, Abdelmalek**: Social Security Disputes and Their Resolution in Algerian Legislation, Final Thesis for Specialized Judicial Training in Labor and Social Security Law, National Institute of Labor, 1st Cohort, 2000–2001, p 43.
2. **Barakat, Sawsan Iman**: Social Security Disputes under Law 08/08 in Algerian Legislation, Master's Thesis in Public Disputes Law, 2017–2018, p 19.

3. **Badis, Kachida:** Guaranteed Risks and Dispute Mechanisms in Social Security, Master's Thesis, University of Batna, Faculty of Law and Political Sciences, 2010, p 84.

### References

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- <sup>1</sup>**Ben Sari, Yassine.** Social Security Disputes in Algerian Legislation. 4th ed. Algiers: Houma Publishing, 2013, p. 41.
- <sup>2</sup>**Semati, Tayeb.** Social Insurance in the Field of Social Security According to the New Law. New ed. Aïn M'lila: Dar El-Houda, 2018, p. 94.
- <sup>3</sup>Algeria, **Law No. 83/15** of 2 July 1983, amended and supplemented by Law No. 99/10 of 11 November 1999, **Article 4**, p 1823.
- <sup>4</sup>Algeria, **Law No. 08/08** of 23 February 2008, **Article 4**, concerning medical disputes in social security. Official Gazette, No. 11, issued on 2 March 2008, p8.
- <sup>5</sup>**Article 4**, Law No. **83/15** of **2 July 1983**, concerning disputes in the field of social security, **as amended and supplemented by Law No. 99/10 of 11 November 1999**, Official Gazette of the People's Democratic Republic of Algeria, p 1823.
- <sup>6</sup>**Semati, Tayeb.** Social Insurance in the Field of Social Security According to the New Law. New Edition. Aïn M'lila: Dar El-Houda, 2018, p. 295.
- <sup>7</sup>**Khalifi, Abdelrahman.** Concise Guide to Labor and Social Security Disputes. Revised and Expanded Edition. Algiers: Dar Al-'Ulum Publishing, 2014, p. 118.
- <sup>8</sup>**Jajjai, Abdelmalek.** Social Security Disputes and Their Settlement in Algerian Legislation. Final Specialized Judicial Training Thesis in Labor and Social Security Law, National Institute of Labor, Algeria, First Cohort, 2000–2001, p. 43.
- <sup>9</sup>**Semati, Tayeb.** Social Insurance in the Field of Social Security According to the New Law. Aïn M'lila: Dar El-Houda, 2018, p. 296.
- <sup>10</sup>**Barakat, Sawsan Iman.** Social Security Disputes in Algerian Legislation: Law 08/08. Master's Thesis in Public Disputes, University of Algiers, Academic Year 2017–2018, p. 19.
- <sup>11</sup>**Semati, Tayeb,** Previously cited source, p. 297.
- <sup>12</sup>**Semati, Tayeb,** Same source, p. 298.
- <sup>13</sup>**Hamdi Basha, Omar.** Social Judiciary. Algiers: Houma Publishing & Distribution, 2013, p. 20.
- <sup>14</sup>**Semati, Tayeb,** Previously cited source, p. 299.
- <sup>15</sup>**Kachida, Badis.** Guaranteed Risks and Dispute Resolution Mechanisms in the Field of Social Security. Master's Thesis, University of Batna, Faculty of Law and Political Science, Algeria, 2010, p. 84.
- <sup>16</sup>**Article 95**, Executive Decree No. 92-276 of **6 July 1992**, establishing the **Code of Medical Ethics**, Official Gazette, No. 56, p 148."Medical expertise is defined as an act carried out by a physician or dental surgeon appointed by a judge, an

authority, or another competent body to provide technical assistance in assessing the physical or mental condition of an individual, and generally to present the consequences of such assessment as they relate to criminal or civil implications."

<sup>17</sup>**Ahmia, Slimane.** Mechanisms for Settling Labor and Social Security Disputes in Algerian Law. 2nd Edition, University Press Office (DPU), Ben Aknoun, Algeria, 2003, p. 191.

<sup>18</sup>**Article 20**, Law No. 08/08 (Previously cited source), p9.

<sup>19</sup>**Semati, Tayeb**, Previously cited source, p. 300.

<sup>20</sup>See **Article 22** of Law No. 08/08 (previously cited source), p10.

<sup>21</sup>**Article 22**, Law No. 08/08 (previously cited source), p10.

<sup>22</sup>**Semati, Tayeb**, previously cited source, p. 304.

<sup>23</sup>**Article 30**, of **Law No. 08/08**, concerning disputes in the field of social security, p10.

<sup>24</sup>**Abbas, Jamal.** Settlement of Medical Disputes in Algerian Social Security Law. 1st Edition, Dar Al-Hamed for Publishing & Distribution, Amman, Jordan, 2016 / 1437 AH, p. 76.

<sup>25</sup>**Article 2**, Executive Decree No. 05-433 of 8 November 2005, establishing the rules for appointing members of the Provincial Disability Committee in the field of social security, and the procedures for its functioning.

<sup>26</sup>**Article 97** of the Code of Medical Ethics, p148.

<sup>27</sup> **Article 27** of **Law No. 08/08**, previously cited, p10.