

THE NATIONAL INSURANCE ACT

REGULATIONS

(under sections 2, 3, 5, 8, and 50)

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REGULATIONS

(under sections 2, 8, and 50)

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Vide 279/70

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THE NATIONAL INSURANCE ACT

REGULATIONS

(under sections 2, 3, 5, 8 and 50)

THE NATIONAL INSURANCE (SELF-EMPLOYED PERSONS' WAGE-RELATED CONTRIBUTIONS) REGULATIONS, 1973

(Made by the Minister on the 20th day of December, 1973)

L.N. 475/73
349/75
84/79

[1st January, 1974.]

1. These Regulations may be cited as the National Insurance (Self-Employed Persons' Wage-Related Contributions) Regulations, 1973. Citation.

2. In these Regulations, unless the context otherwise requires— Inter-pretation.

“classified employment” means employment in respect of which, by virtue of regulations made under paragraph (c) of subsection (3) of section 3 of the Act, an insured person is treated as a self-employed person;

“Collector” means a Collector of Taxes;

“contribution year” for the purposes of these Regulations means the income tax year;

“income tax year” means an income tax year commencing on the first day of January in any year;

“statutory income”, in relation to any income tax year, means the statutory income computed pursuant to the Income Tax Act, as being the statutory income for that year, whether or not such computation is by reference to income received in that year or in any other year,

and other expressions have the same meaning as in the Act.

3. For the purposes of subsection (2) of section 5 of the Act, but subject to the provisions of regulation 4, the earnings of an insured person as a self-employed person in respect of any income tax year shall be the amount ascertained by deducting from the insured person's statutory income for that year the following—

Calculation of earnings of self-employed persons.

(a) such amount (if any) as represents emoluments; and

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- (b) such amount (if any) as represents any annuity, pension, superannuation or other allowance in respect of past services in any office or employment of profit; and
- (c) such other amount (if any) as represents income other than income that is attributable to the insured person's employment as a self-employed person.

Special provisions regarding classified employment.

4.—(1) For the purposes of subsection (2) of section 5 of the Act, but subject to the provisions of paragraph (2) of this regulation, the earnings of an insured person as a self-employed person in respect of any income tax year shall, as respects classified employment, be the emoluments received by that person in respect of classified employment during that year.

(2) Paragraph (1) shall have effect only insofar as an insured person is during such year as aforesaid employed solely in classified employment, and if during such year the insured person was also employed as a self-employed person (by virtue of employment which is not classified employment) then, for the purpose of subsection (2) of section 5 of the Act, his earnings as a self-employed person in respect of such income tax year as aforesaid shall be the amount ascertained by aggregating the amount of such emoluments as aforesaid and the amount of his earnings in respect of such income tax year as ascertained under regulation 3.

Amount of earnings to be taken into account where insured person is both an employed and a self-employed person.

5. Where, during any income tax year an insured person was employed both in employment as a self-employed person and in employment (not being classified employment) as an employed person then, in respect of such income tax year, paragraph (b) of subsection (2) of section 5 of the Act shall have effect as if it provided that account shall be taken only of so much of his earnings in respect of such income tax year (as ascertained under regulation 3, or as the case may be, under regulation 4) as, when added to the emoluments received in that income tax year from such employment as an employed person, does not exceed a total of \$7,800.

Notice to insured persons of amount of wage-related contributions payable by them.

6. The Minister shall cause to be served, either personally or by registered post, on every insured person liable to pay a wage-related contribution as a self-employed person a notice addressed to him at his usual place of abode or business stating—

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- (a) the amount ascertained under these regulations as being the amount to be taken into account as that person's earnings as a self-employed person in respect of the income tax year in question; and
- (b) the amount payable by that person by way of his wage-related contribution in respect thereof.

7. Every wage-related contribution payable by an insured person in respect of his earnings as a self-employed person shall—

Manner of payment of wage-related contributions.

- (a) be payable to the Collector; and
- (b) be paid before the expiration of thirty days after the service of the relevant notice under regulation 6.

8.—(1) The enactments relating to the recovery of income tax shall apply to the recovery of any amount of contribution that an insured person is liable to pay to the Collector under regulation 7 as if that amount had been income tax that the insured person was liable to pay to the Collector.

Recovery of contributions.

(2) Proceedings may be brought for the recovery of the total amount of contributions that an insured person is liable to pay to the Collector under regulation 7 and of income tax that the insured person is liable to pay, without specifying the respective amounts of contributions and of tax and for the purpose of summary proceedings the said total amount shall be one matter of complaint; but nothing in this paragraph shall prevent the bringing of separate proceedings for the recovery of each of the several amounts of contributions and of tax that the insured person is liable to pay.

(3) A certificate of the Collector that any amount of contributions such as is mentioned in paragraph (1) has not been paid to him, or, to the best of his knowledge and belief, to any other person to whom it might lawfully be paid shall be sufficient evidence that the sum mentioned in the certificate is unpaid and is due; and any document purporting to be such a certificate shall be deemed to be such a certificate until the contrary is proved.

(4) Summary proceedings commenced in the name of any Collector may be continued in the name of that or any other Collector.

9. As soon as is practicable after wage-related contribution has been paid to the Collector under these Regulations the Collector shall

Crediting of contributions.

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issue to the insured person a receipt therefor (which shall be sufficient evidence of payment) in a form approved by the Minister and shall notify the Minister of the payment of the contribution, and the Minister shall cause the amount of the payment to be entered in the National Insurance record of the insured person in question.

Period prescribed for purposes of section 5 of Act.

10. For the purposes of subsection (5) of section 5 of the Act, the period of a contribution year is prescribed in relation to wage-related contributions payable by self-employed persons.

Calculation of earnings in special cases.

11. Notwithstanding anything in these Regulations, the Minister may, if he thinks fit, and subject to such terms and conditions as he may impose, in any particular case or class of case, authorize any arrangements, whereby the earnings of an insured person as a self-employed person in respect of any income tax year are calculated for the purpose of subsection (2) of section 5 of the Act at times or in a manner other than those heretofore prescribed in these Regulations and he may also from time to time issue instructions in relation to any particular case or class of case where the Minister is satisfied that, by reason of the special circumstances appertaining thereto, the relevant provisions of the preceding regulations do not make adequate provision or that, by reason of such special circumstances, difficulties arise in connection with the application of any provision of the preceding regulations.

Alternative arrangements for collection and recovery of wage-related contributions.

12. Notwithstanding the preceding regulations, the Minister may, if he thinks fit, and subject to such terms and conditions as he may impose, authorize any arrangements whereby wage-related contributions are paid at times or in a manner other than those heretofore prescribed and the preceding provisions of these Regulations shall be without prejudice to any remedy otherwise available for the recovery of any such contributions.

Consequential provisions in respect of regulations 11 and 12.

13. The provisions of these Regulations shall, subject to any arrangements authorized under regulation 11 or 12 or any instructions issued under regulation 11, apply to any person affected by the arrangements or instructions and any contravention of, or failure to comply with, any requirement of the arrangements or the instructions shall be deemed to be a contravention of or a failure to comply with these Regulations.

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14. In their application to wage-related contributions payable by self-employed persons the National Insurance (Contributions) Regulations, 1966, shall have effect as if there were substituted for the definition of "contribution year" contained in regulation 2 thereof the definition of "contribution year" contained in regulation 2 of these Regulations.

Application
of Contri-
butions
Regulations.

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REGULATIONS

(under sections 2, 8 and 50)

THE NATIONAL INSURANCE (MISCELLANEOUS PROVISIONS)
REGULATIONS, 1966

[4th April, 1966.]

(Made by the Minister on the 17th day of March, 1966)

L.N. 97/66

1. These Regulations may be cited as the National Insurance Citation.
(Miscellaneous Provisions) Regulations, 1966.

2. All or any of the following capacities are hereby prescribed for Prescription
the purposes of the definition "domestic worker" in section 2 of the of capacities
Act, that is to say, housekeeper, cook, maid (including children's maid), for purposes
laundress, butler, general help, gardener, chauffeur, and any other of definition
capacity similar to any of the foregoing. in Act of
"domestic
worker".

3. In relation to employment of a casual nature for the purposes Club
of any game or recreation, of an employed person who is engaged treated as
or paid for that employment through a club, the club shall be treated employer
for the purposes of the Act as the employer of that person.

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REGULATIONS
(under sections 3 and 50)

THE NATIONAL INSURANCE (CLASSIFICATION) REGULATIONS, 1966

[4th April, 1966.]

(Made by the Minister on the 7th day of February, 1966)

L.N. 88/66

1. These Regulations may be cited as the National Insurance (Classification) Regulations, 1966. Citation

2. In these Regulations, unless the context otherwise requires— Interpre-
tation.
“head of mission” has the same meaning as in section 2 of the Diplomatic Immunities and Privileges Act;

“hospital” means any institution for the reception and treatment of persons suffering from illness or mental defectiveness, any maternity home, and any institution for the reception and treatment of persons during convalescence or persons requiring medical rehabilitation, and includes clinics, dispensaries and outpatient departments maintained in connection with any such institution or home as aforesaid;

“member of mission” in relation to a head of mission has the same meaning as in subsection (2) of section 4 of the Diplomatic Immunities and Privileges Act, save that it does not include a domestic worker,

and other expressions have the same meanings as in the Act.

3.—(1) Subject to the provisions of paragraph (2) and of regulations 4 and 5, every insured person shall, in respect of any employment specified in Part I of the First Schedule, be treated for the purposes of the Act as an employed person in so far as he is gainfully occupied in such employment. Classifica-
tion of
insured
persons.
First
Schedule.

(2) Subject to the provisions of regulations 4 and 5, every insured person shall, in respect of any employment specified in any paragraph of Part II of the First Schedule, be treated for the purposes of the Act as a self-employed person in so far as he is gainfully occupied in such employment.

Exclusion
of certain
employ-
ments.
Second
Schedule.

4. Any employment specified in any paragraph of the Second Schedule shall be treated for the purposes of the Act as not being employment either as an employed person or as a self-employed person.

Employment
involving
part-time
service
only.

5.—(1) If in any one contribution week an employed person is employed in employment involving part-time service only, and the pecuniary remuneration paid to him in respect thereof by any one employer amounts to less than four dollars then, subject to paragraph (2) he shall, with respect to such employment by such employer in such week, be treated as a self-employed person.

(2) If in any one contribution week an employed person is employed in employment involving part-time service only, and the pecuniary remuneration (or, if he is so employed by different employers, the aggregate of the pecuniary remuneration) paid to him in respect thereof amounts to less than two dollars he shall, with respect to such employment (or each such employment) in such week, be treated as not being employed either as an employed person or as a self-employed person.

(3) For the purposes of this regulation, if, in relation to any contribution week—

- (a) a person is employed by any one employer on any day or days on which that person renders service in that employment on terms whereby his remuneration is calculated otherwise than on a task or piece-work basis; and
- (b) such services are not rendered by that person for that employer in that week for more than twenty hours; and
- (c) the employment is not in continuation of employment by that employer in which services are ordinarily rendered by the employed person for more than twenty hours in a week, that employment shall for that week be deemed to be employment involving part-time service only.

(4) For the purposes of this regulation, if, in relation to any contribution week—

- (a) a person is employed by any one employer on any day or days on which that person renders service in that employment on terms whereby his remuneration is calculated either wholly or partly on a task or piece-work basis; and

- (b) the pecuniary remuneration paid to that person by that employer in respect of such employment amounts to less than four dollars for that week; and
- (c) the employment is not in continuation of employment by that employer in respect of which the pecuniary remuneration paid to the employed person by the employer ordinarily amounts to four dollars or more in a week (or the equivalent for periods longer than a week),

that employment shall for that week be deemed to be employment involving part-time service only.

(5) In paragraphs (1) and (2), the expression "employment involving part-time service only" means any employment deemed to be such by virtue of paragraph (3) or paragraph (4).

6. Where an insured person is employed as a self-employed person and is ordinarily so employed, that employment shall be regarded as continuing, notwithstanding that in any particular week he does no work as a self-employed person, unless and until he is no longer ordinarily employed as a self-employed person.

Employment treated as continuing.

7.—(1) Where under the provisions of the Act and regulations thereunder relating to references and appeals to the Court of Appeal, the Court of Appeal decides any question as to the class of insured persons in which a person is to be included, and that decision is inconsistent with some previous determination of a question by the Minister, then, if the Minister is satisfied that contributions of a prior class have been paid by or in respect of any person by reason of that determination or in the reasonable belief that that determination was applicable, he may, if it appears to him that it would be in the interests of the person by or in respect of whom such contributions have been paid, or of any claimant by virtue of that person's insurance, so to do, direct that that person shall be treated as though he had been included in the class of insured persons corresponding to the contributions paid during any contribution week for which contributions of a prior class were so paid before the date on which the decision of the Court of Appeal was given, and, if such a direction is given, that person shall be deemed to have been included in that class accordingly for any such weeks.

Special provisions regarding persons declared to be included in a particular class of insured persons.

(2) In any case where the Minister, on new facts being brought to his notice, has revised a determination of a question previously given by him, the provisions of this regulation shall apply with the

necessary modifications in the same manner as they apply where the Court of Appeal has given a decision inconsistent with a determination previously given by the Minister.

(3) In this regulation the expression "contributions of a prior class" means—

- (a) in relation to a person who is not employed either as an employed person or as a self-employed person, contributions as an employed or self-employed person and employer's contributions; and
- (b) in relation to a self-employed person contributions as an employed person and employer's contributions.

FIRST SCHEDULE

(Regulation 3)

PART I

Employments in respect of which, subject to the provisions of regulations 3(2), 4 and 5, persons are treated as employed persons

1. Employment of a medical practitioner or a dental practitioner—
 - (a) involving whole-time service in any hospital; or
 - (b) in which he is wholly or mainly engaged and is remunerated by salary.

PART II

Employments in respect of which, subject to the provisions of regulations 4 and 5, persons are treated as self-employed persons

2. Employment of a person in any of the offices mentioned in subsection (6) of section 1 of the Constitution of Jamaica, other than employment on the personal staff of the Governor-General.
3. Employment of a person in any employment by virtue of which he would but for the provisions of this paragraph be an employed person, if his employer is not ordinarily resident in Jamaica and has no place of business in Jamaica.
4. Employment as an agent paid by commission or fees or a share in the profits, or partly in one and partly in another of such ways, where the person so employed is mainly dependent for his livelihood on his earnings from some occupation other than employment as such an agent, or where he is ordinarily employed as such an agent, by more than one employer, and his employment under no one of such employers is that on which he is mainly dependent for his livelihood.
5. Employment under a contract of service by the insured person's wife.
6. Employment of a person who is a citizen of Jamaica in any employment mentioned in paragraph 3, 4, 5 or 6 of the Second Schedule.

SECOND SCHEDULE

(Regulation 4)

Employment which is treated as not being employment either as an employed person or as a self-employed person

1. Employment of a married woman (whether or not under contract of service) by, or as partner of, or in any similar association with, her husband.
2. Employment without pecuniary remuneration by the employed person's father, mother, grand-father, grand-mother, step-father, step-mother, son, daughter, grand-son, grand-daughter, step-son, step-daughter, brother, sister, half-brother or half-sister.
3. Employment of any person who is not a citizen of Jamaica as a head of mission or member of mission of a head of mission.
4. Employment of any person who is not a citizen of Jamaica—
 - (a) as a consular officer or consular employee as defined in the Diplomatic Immunities and Privileges Act; or
 - (b) by virtue of which there have been conferred upon such person the like immunity from suit and legal process and the like inviolability of official archives as are accorded to consular officers of a foreign Sovereign Power under that Act.
5. Employment or service of any person who is not a citizen of Jamaica as a member of the armed forces of any country other than Jamaica.
6. Employment otherwise than as a domestic worker of any person who is not a citizen of Jamaica by any international organization of which Jamaica or the Government of Jamaica is a member.

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REGULATIONS
(under sections 4, 5, 6, 8 and 50)THE NATIONAL INSURANCE (COLLECTION OF CONTRIBUTIONS)
REGULATIONS, 1966*(Made by the Minister on the 17th day of March, 1966)*L.N. 90/66
Amdt.
L.N. 42B/97

[4th April, 1966.]

PART I—Preliminary

1. These Regulations may be cited as the National Insurance Citation.
(Collection of Contributions) Regulations, 1966.

2.—(1) In these Regulations unless the context otherwise requires— Interpre-
tation.

“Collector” has the same meaning as in Part I of the Second
Schedule to the Income Tax Act;

“contribution year” has the same meaning as in the National
Insurance (Assessment of Wage Related Contributions)
(Employed Persons) Regulations, 1966;

“deduction card” means a deduction card in a form authorized
by the Minister and includes a duplicate deduction card and
a temporary deduction card;

“franking meter device” means a franking meter device for
denoting payment of flat rate contributions;

“insurance card” means a stamp card or a deduction card;

“local office” means an office appointed by the Minister as a local
office for the purpose of the Act or of these Regulations;

“stamp card” includes a duplicate stamp card;

“termination of employment” means the day on which the employ-
ment actually comes to an end, whether such termination
is in accordance with the terms of the contract or not and
whether or not the employment is to be resumed at a later
date,

and other expressions have the same meanings as in the Act.

(2) Any notice, insurance card or certificate that is authorized or required to be given, served, issued or delivered under these Regulations may be sent by post.

PART II—*Insurance Cards*

Issue and
custody, etc.,
of insurance
cards.

3.—(1) Every person shall furnish to the Minister, on such occasions and in such manner as the Minister shall direct, such information as the Minister may require being information relevant to the question of the issue in relation to such person of the appropriate insurance card.

(2) Subject to the provisions of regulation 7, every application for an insurance card shall be made, in accordance with directions issued by the Minister, by the insured person.

(3) An appropriate insurance card shall be issued without charge to or in respect of a person properly applying therefor.

(4) A stamp card issued in respect of an insured person shall be issued either to the insured person or to his employer but a deduction card issued in respect of an employed person shall be issued only to his employer.

(5) An insured person on his obtaining or on the return to him of a stamp card in accordance with these Regulations shall be responsible for its custody unless and until it is delivered or re-delivered to an employer or a local office or retained by an inspector in accordance with these Regulations or any other regulations made under the Act.

(6) Every employer shall, immediately after he becomes liable to pay contributions in respect of an insured person obtain from the insured person a current stamp card, or from a local office a current deduction card, as the case may require, and it shall be the duty of an employed person in relation to whom flat rate contributions are payable under Part III to deliver or cause to be delivered a current stamp card to the employer:

Provided that where at the time of his entry into the employment an insured person's stamp card is lodged at a local office, the employer shall be held to have complied with the provisions of this regulation relating to stamp cards as soon as he has obtained from the insured person the receipt for such stamp card duly issued by the local office

and has despatched it to that local office with a view to obtaining the stamp card.

(7) Where a stamp card has been issued direct to the employer the requirements of paragraph (6) relating to stamp cards shall be deemed to have been satisfied as respects that card.

(8) The employer on obtaining the insurance card shall become responsible for its custody—

(a) in the case of a stamp card, so long as the employment continues or until the stamp card is returned to the insured person or delivered to a local office or retained by an inspector in accordance with these Regulations or any other regulations made under the Act;

(b) in the case of a deduction card, until the end of its currency or until it is delivered to a local office or an inspector or the Collector.

(9) The person for the time being responsible for the custody of an insurance card in accordance with these Regulations, or any person having in his possession or under his control any insurance card issued in respect of an insured person, shall produce it for inspection at any reasonable time when required to do so by an inspector, and if so required shall deliver up the insurance card to the inspector, who may, if he thinks fit, retain it. The inspector shall issue a duplicate insurance card to replace any insurance card retained by him.

(10) Every insured person shall, within four weeks before the surrender of his insurance card in pursuance of paragraph (2) or (4) of regulation 7, sign the card and insert thereon his then present address in the respective places indicated for those purposes on the card.

(11) Every employer having the custody in accordance with these Regulations of the insurance card of an insured person shall permit that person to have access to such card for the purpose of signing the card and inserting his then present address, in accordance with paragraph (10), and, in addition and without prejudice to this right, if an insured person desires to inspect his insurance card while it is in the custody of the employer, the employer shall give him a reasonable opportunity of so doing either within or immediately before or after working hours:

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REGULATIONS, 1966*

Provided that no insured person shall be entitled by virtue of this provision to inspect his insurance card more than once in any one month nor except at such time as may be fixed by the employer for the purpose.

(12) Where an insurance card of any insured person is destroyed or lost, or is defaced in any material particular, the insured person (or, if it is a deduction card, the employer) shall apply to the Minister for a duplicate insurance card to replace the card which has been destroyed, lost or defaced, and shall obtain such card, in such manner as the Minister shall direct:

Provided that where a stamp card is in the custody of an employer at the time it is destroyed, lost or so defaced it shall be the duty of the employer forthwith to report the destruction, loss or defacement of the card to a local office and to the insured person so that he may comply with the provisions of this paragraph.

(13) A local office may, on the application of an insured person, issue a duplicate insurance card—

- (a) for the purposes of paragraph (2) of regulation 4; or
- (b) in such other circumstances as the Minister may direct.

4.—(1) Subject as hereafter provided in these Regulations, the employer shall, on the termination of the employment, forthwith return to the insured person his stamp card:

Provided that where the employment is terminated by the insured person without any notice or intimation to the employer, the stamp card shall be returned to the insured person or, where this is impracticable, to a local office, within fourteen days of the termination of the employment.

(2) Subject as aforesaid, where contributions cease to be payable by the employer in respect of the insured person for any period during which the employment still continues, but contributions are payable by the insured person or by some other person in respect of him, the employer shall, if so requested by the insured person and unless a duplicate card is obtained from a local office by the insured person for the payment of such contributions, return the card to him, and in this event it shall be the duty of the employer, immediately on his again becoming liable to pay contributions in respect of the insured

Disposal of stamp card on termination of employment, etc.

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person, to obtain the stamp card from the insured person, and the insured person shall re-deliver the stamp card to the employer accordingly.

(3) The insured person on the termination of his employment shall apply to the employer for the return of his stamp card and, on the stamp card being returned to him, shall give to the employer, if he demands it, a receipt for the card.

(4) If for any reason, other than the loss or destruction of the card, the stamp card is not returned to the insured person in accordance with paragraph (1) or (2) on the termination of his employment or on contributions ceasing for any other reason to be payable in respect of him, the employer shall, as soon as may be, deliver the card to a local office:

Provided that nothing in this paragraph shall relieve the employer of his obligations to comply with the said paragraph (1).

(5) If for any reason flat rate contributions cease to be payable whether by or in respect of him, an insured person shall deliver his stamp card to a local office or such other place as the Minister shall direct not later than six days after the date on which its period of currency ends.

(6) An insured person or an employer shall comply with any directions which may be given by the Minister as to the sending to a local office of an insurance card, or, in the case of an employer, as to the return to an insured person, of a stamp card.

(7) In paragraphs (2) and (4) "contribution" has the meaning assigned to it by regulation 8.

5.—(1) If an employer ceases to employ an insured person in respect of whom he holds a current deduction card issued to him by a local office, he shall forthwith give to him a leaving certificate:

Change of
employment
of person
in respect
of whom
deduction
card issued.

Provided that where the employment is terminated by the insured person without any notice or intimation to the employer, the employer shall complete the whole of the leaving certificate and send it to a local office within fourteen days of the termination of the employment.

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(2) The leaving certificate shall—

- (a) be in a form approved by the Minister and shall be divided into three easily separate Parts; and
- (b) shall contain such particulars as the Minister may require.

(3) Immediately on commencing his next employment an insured person to whom a leaving certificate was given in pursuance of paragraph (1) shall deliver Parts 2 and 3 of the certificate to his new employer who on the commencement of the employment shall, subject to paragraph (5), complete Parts 2 and 3 and shall forthwith send them to a local office.

(4) On receipt of Parts 2 and 3 of the leaving certificate the local office shall issue the appropriate insurance card (unless, where the appropriate insurance card is a stamp card, the insured person already has a current stamp card).

(5) Where the certificate shows that the last payment of wages was in the contribution year preceding that in which the new employment commences the new employer shall forthwith send both Part 2 and Part 3 of the leaving certificate to a local office, without completing any such Part.

Death of insured person.

6. On the death of an insured person the employer, if an insurance card is then in his custody, or any other person having possession or thereafter obtaining possession of the insured person's insurance card, shall forthwith deliver it to a local office.

Currency and exchange of insurance cards.

7.—(1) An insurance card, when issued, shall remain the property of the Minister.

(2) A stamp card shall be in such form as the Minister may direct and shall be current for such period as the Minister may provide and shall within six days, or such longer time as the Minister may in any special case allow, after the date on which it ceases to be current, be surrendered by the person for the time being responsible in accordance with these Regulations for the custody of the card, to a local office, and a fresh insurance card may thereupon be issued (without charge) to the person so returning the stamp card:

Provided that if an employed person whose current insurance card is a stamp card becomes liable to pay a wage-related contribution, the employer shall forthwith apply to a local office for a deduction card in respect of the employed person.

(3) Where the employer has applied for a deduction card in pursuance of the proviso to the preceding paragraph he shall, without delay, inform the employed person accordingly, and on the receipt by the employer of the deduction card he shall show it to the employed person and return to him his stamp card.

(4) A deduction card shall be in such form as the Minister may direct, shall be current for such period as the Minister may provide and shall not later than fourteen days after the date of expiry be surrendered by the employer to the Collector.

(5) Within fourteen days before the date of expiry of current deduction cards every employer shall apply to a local office for a fresh insurance card in respect of every employed person then in his employment and in relation to whom he holds a deduction card, and fresh insurance cards may thereupon be issued (without charge) to the employer.

(6) Where the Minister so directs, a stamp card or a deduction card may be exchanged for a fresh insurance card at any time or in a manner other than that prescribed in this regulation.

PART III—Payment of flat rate contributions in relation to persons in respect of whom current deduction cards are not held

8. In this Part "contribution" means a flat rate contribution that is, by virtue of regulation 9, payable by affixing or impressing an insurance stamp to a stamp card.

Definition of "contribution" in PART III.

9.—(1) Every flat rate contribution payable in relation to an insured person shall, subject to paragraph (2) of regulation 12 and except as herein otherwise provided, be paid by affixing an adhesive insurance stamp to, or, subject to regulation 34, by impressing, by means of a franking meter device, an insurance stamp on, his stamp card in the space indicated for that purpose upon the card.

Stamping of stamp cards, etc.

(2) An employer who is liable to pay contributions in respect, or on behalf, of an insured person shall, except as hereinafter provided, pay those contributions at the following times, that is to say—

- (a) where he pays to the insured person pecuniary remuneration in respect of the employment of such person, before paying to the insured person the remuneration in respect of the period for which a contribution is payable;

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(b) where he does not pay to the insured person pecuniary remuneration in respect of the employment, on the first day of employment in each contribution week.

(3) Where an insured person's wages for any period are paid in advance by an employer, the employer shall pay contributions in advance for that period before the payment of the wages.

(4) In addition to his obligation to comply with any other requirement of the Act or of these Regulations, it shall be the duty of the employer to pay all contributions due from him but still outstanding in respect of any insured person—

(a) within fourteen days of the termination of the employment where the employment is terminated by the insured person without any notice or intimation to the employer, and forthwith on the termination of the employment where the employment is terminated in any other manner; and

(b) within five days after the expiration of the period of currency of the stamp card; and

(c) within forty-eight hours after being requested to do so by the insured person.

(5) (a) The Minister may, if he thinks fit, and subject to such terms and conditions as he may impose, approve any arrangements whereby contributions are paid at times, or in a manner, other than those prescribed in this regulation, and any such arrangement may include a provision for the payment to the Minister of such fees as may be determined by the Minister, with the concurrence of the Minister responsible for finance, to represent the estimated additional expense in administration to the Government departments concerned.

(b) The provisions of these Regulations shall, subject to the provisions of the arrangements, apply to any person affected by the arrangements, and any contravention of, or failure to comply with, any requirements of the arrangements shall be deemed to be a contravention of or failure to comply with these Regulations.

(6) An insured person who is liable to pay contributions as a self-employed person shall pay those contributions not later than the last day in the contribution week in respect of which the contribution is due.

(7) (a) A person shall, immediately after affixing an adhesive insurance stamp to any stamp card, cancel the stamp by writing in ink, or stamping with a metallic die with black indelible ink or composition across the face of the stamp, the date upon which it is affixed and not otherwise, but, save as expressly provided in these or any other regulations made under the Act or as specially authorized by the Minister, no other writing or mark and no perforation shall at any time be made on or in, affixed to or impressed on a stamp card or stamp.

(b) An employer may, if he thinks fit, inscribe upon the stamp card of any insured person employed by him, or any part of the card not designated for any specific purpose, the number of that insured person upon the pay list or in the books of the employer.

10.—(1) An employer shall be entitled to recover from an insured person, subject to and in accordance with the provisions of this regulation, the amount of any contribution paid or to be paid by him on behalf of that person:

Recovery by employer of contributions paid on behalf of insured persons.

Provided that the amount of any contribution not yet paid shall not be recoverable except under and in accordance with the next following paragraphs.

(2) Where the insured person receives any pecuniary remuneration from the employer, the amount of any contribution paid or to be paid by the employer on behalf of the insured person, notwithstanding the provisions of any contract to the contrary, shall be recoverable by means of deductions from such remuneration and not otherwise:

Provided that—

- (a) no such deduction may be made from any remuneration other than such as is paid wholly or partly in respect of the contribution week or part of the contribution week for which the contribution is payable or may become payable, as the case may be; and
- (b) no such deduction may be made of any contribution not yet paid except where it is not payable until after the date when the said remuneration is paid.

(3) Where an employed person does not receive any pecuniary remuneration, the employer shall be liable to pay the contributions payable both by himself and the insured person and shall not be entitled to recover any part thereof from the insured person.

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PART IV—Payment of wage-related contributions and flat rate contributions that are, by virtue of regulation 12, payable in the same manner

Definitions
in Part IV.

11. In this Part, unless the context otherwise requires—

“aggregated” means aggregated and treated as a single payment under subsection (4) of section 5 of the Act;

“contribution” means a wage-related contribution and includes a flat rate contribution (as defined in this regulation);

“employer” means any person paying wages whether on his own account or on behalf of another person;

“flat rate contribution” means a flat rate contribution that is, by virtue of regulation 12, payable in the same manner as a wage-related contribution; and

“month” means a calendar month.

Contribu-
tions pay-
able under
this Part.

12.—(1) Wage-related contributions payable by an employed person and his employer shall be paid in the manner provided in this Part.

(2) Where a current deduction card in respect of an employed person is held by an employer then, during the currency of the deduction card, all flat rate contributions payable by that employer on behalf of and in respect of that employed person shall, unless and until the Minister in any case or class of case otherwise directs, also be payable in the manner provided in this Part.

Deduction
of contri-
butions.

13.—(1) Every employer on making any payment of pecuniary remuneration to any employed person in respect of whom he holds a current deduction card may, in accordance with this Part, deduct therefrom the amount of any wage-related and flat rate contributions paid or to be paid by him on behalf of that person.

(2) An employer shall not be entitled to recover any wage-related or flat rate contributions paid or to be paid by him on behalf of any employed person otherwise than by deduction in accordance with this Part.

Calcula-
tion of
deduction.

14.—(1) On the occasion of any payment of pecuniary remuneration to such employed person, the employer may deduct therefrom the amount of wage-related and flat rate contributions that the employed person is liable to pay:

Provided that where two or more payments fall to be aggregated the employer may deduct the amount of the wage-related contributions based thereon that are payable by the employed person either wholly from one such payment or partly from one and partly from the other or any one or more of the others.

(2) If by reason of an error the employer on making any payment of pecuniary remuneration to an employed person fails to deduct therefrom the full amount of contributions which by virtue of this Part he is entitled to deduct, he may recover the amount so under-deducted by deduction from any subsequent payment of pecuniary remuneration to that employed person during the same year:

Provided that—

- (a) the amount that may be deducted by virtue of this paragraph from any payment, or from any payments which fall to be aggregated, shall be in addition to, but shall not exceed, the amount deductible therefrom under the other provisions of this Part; and
- (b) for the purposes of regulations 17 to 21 (both inclusive) an additional amount that may be deducted by virtue of this paragraph shall be treated as an amount deductible under this Part only in so far as the amount of the corresponding under-deduction has not been so treated.

(3) The employer shall, at such times as the Minister may require, record on the deduction card such particulars regarding the payment of wages to the employed person as the Minister may require, and on or before the last day of the week that contains the last day of the month the employer shall record on the deduction card the total contributions payable in relation to the employed person in that month:

Provided that the Minister may, subject to such terms and conditions as he may impose, authorize an employer to record any such information otherwise than on a deduction card.

15. If the employer makes any payment of pecuniary remuneration to an employed person in respect of whom he does not hold a deduction card and that payment is a payment in respect of which wage-related contributions are payable, he may deduct therefrom the amount of the wage-related and flat rate contributions that are payable by the employed person and shall keep records on a temporary

Employed
person for
whom deduc-
tion card
not held.

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deduction card the form of which has been authorized by the Minister as if the payment was one to which regulation 13 applied and shall do likewise on making any subsequent payment of pecuniary remuneration to the employed person until a regular deduction card in respect of the employed person is issued to him.

Certificate
of contribu-
tions deduc-
ted.

16. After the end of the contribution year the employer shall give to an employed person by whom one or more wage-related contributions were payable during that year and who is in the employer's employment on the last day of the year a deduction certificate in a form approved by the Minister, showing the total amount of wages paid by the employer to the employed person during the year and the total amount of contributions deducted therefrom.

Payment of
contribu-
tions by
employer.

17.—(1) Within fourteen days after the end of every month the employer shall pay to the Collector—

- (a) all amounts of wage-related contributions deductible from wages paid by him during that month (other than amounts deductible by virtue of the proviso to paragraph (1) of regulation 14 which he did not deduct) together with an equal amount by way of employer's wage-related contributions; and
- (b) all amounts of flat rate contributions deductible from wages paid by him during that month, together with all amounts of employer's flat rate contributions payable by him during that month.

(2) For the purposes of sub-paragraph (a) of paragraph (1), the employer shall be deemed to have deducted from the last of any number of payments that fall to be aggregated the amount of wage-related contributions deductible from those payments which he did not deduct from the earlier payments.

(3) The Collector shall give the employer a receipt in a form approved by the Minister for the total amount of contributions so paid.

(4) If the employer by reason of an error has paid to the Collector on account of contributions under this regulation an amount which he was not liable so to pay, the amounts which he is liable so to pay subsequently during the same contribution year, shall be reduced by the amount so overpaid:

Provided that if there was a corresponding over-deduction from any payment of wages to an employed person the provisions of this paragraph shall apply only in so far as the employer has accounted to him therefor.

18.—(1) If at the expiration of fourteen days after the end of any month the employer has paid no amount either of wage-related contributions or of flat rate contributions to the Collector under regulation 17 in relation to that month and the Collector is unaware of the amount, if any, which the employer is liable so to pay, the Collector may give notice to the employer requiring him to render, within the time limited in the notice, a return showing the name of every employed person to whom he made any payment of wages in the period from the preceding relevant Monday to the day (being the last day of a month) limited by the notice, together with such particulars with regard to each such employed person as the notice may require, being particulars of—

Employer failing to pay contributions.

- (a) the payments of wages made to him during that period;
- (b) the total amount of wage-related and flat rate contributions that the employer was entitled to deduct during that period, and any matter affecting the calculation of such amount.

(2) The Collector shall ascertain and certify the amount of contributions which the employer is liable to pay to him in respect of the month in question.

(3) The production of the return made by the employer under paragraph (1) and of the certificate of the Collector under paragraph (2) shall be sufficient evidence that the amount shown in the said certificate is the amount of contributions that the employer is liable to pay to the Collector in respect of the month in question, and any document purporting to be such a certificate as aforesaid shall be deemed to be such a certificate until the contrary is proved.

(4) Where a notice given by the Collector under paragraph (1) extends to two or more consecutive months, the provisions of these Regulations shall have effect as if those months were one month.

(5) A notice may be given by the Collector under paragraph (1) notwithstanding that an amount of contributions has been paid to him by the employer under regulation 17 for any month, if the Collector is not satisfied that the amount so paid is the full amount that the

employer is liable to pay to him for that month, and the provisions of this regulation shall have effect accordingly.

(6) In paragraph (1), the expression "relevant Monday" means the first Monday of January.

Recovery of
contribu-
tions.

19.—(1) The enactments relating to the recovery of income tax shall apply to the recovery of any amount of contributions that an employer is liable to pay to the Collector for any month under regulation 17 as if that amount had been income tax that the employer was liable to pay to the Collector for that month.

(2) Proceedings may be brought for the recovery of the total amount of contributions that an employer is liable to pay to the Collector for any month under regulation 17 and of income tax that the employer is liable to pay for that month, without specifying the respective amounts of contributions and of tax or distinguishing the amounts that he is liable to pay in respect of each employed person and without specifying the employed persons in question and for the purpose of summary proceedings the said total amount shall be one matter of complaint; but nothing in this paragraph shall prevent the bringing of separate proceedings for the recovery of each of the several amounts of contributions and of tax that the employer is liable to pay as aforesaid for any month in respect of his several employees.

(3) A certificate of the Collector that any amount of contributions such as is mentioned in paragraph (1) has not been paid to him, or, to the best of his knowledge and belief, to any other person to whom it might lawfully be paid shall be sufficient evidence that the sum mentioned in the certificate is unpaid and is due; and any document purporting to be such a certificate shall be deemed to be such a certificate until the contrary is proved.

(4) Summary proceedings commenced in the name of any Collector may be continued in the name of that or any other Collector.

Return by
employer
at end of
year.

20.—(1) Not later than fourteen days after the end of the contribution year the employer shall render to a local office in such form as the Minister may approve a return in respect of each employed person containing such particulars as the Minister may require for the identification of the employed person and showing the total amount of wage-related contributions and flat rate contributions deductible from the wages paid by him to the employed person during the year.

(2) The said returns shall be accompanied by a declaration and certificate in the form approved by the Minister and by all deduction cards issued to the employer by a local office during the contribution year.

(3) Where the employer is a body corporate, the declaration and certificate referred to in paragraph (2) shall be signed either by the secretary or by a director of the body corporate.

(4) A return shall be made under this regulation in respect of every employed person in respect of whom a deduction card has been issued to the employer during the contribution year or to whom the employer has at any time during the year made a payment of wages in respect of which wage-related contributions were payable.

(5) If at the expiration of twenty-one days after the end of any contribution year an employer has failed to pay to the Collector the total amount of contributions that he is liable so to pay, the Collector may prepare a demand certificate showing the amount of contributions remaining unpaid for that year; and to the amount shown in the said certificate paragraphs (1) and (2) of regulation 19 shall apply (with the modification that proceedings for the recovery of the amount, or such portion of it as remains unpaid, may be brought at any time before the expiry of twelve months after the date limited for delivery of the declaration and certificate required by paragraph (2) of this regulation or, if that statement is not delivered by that date, before the expiry of twelve months after its delivery), and to the said certificate paragraph (3) of regulation 19 shall (with any necessary modifications) apply.

21.—(1) Every employer, whenever called upon to do so by an inspector or by any officer authorized by the Collector shall produce to the inspector (or such officer, as the case may be) for inspection at the employer's premises—

Inspection
of employer's
records.

- (a) all wage sheets, deduction cards, and other documents and records whatsoever relating to the calculation or payment of the wages of his employees in respect of the years or months specified by such inspector or officer or to the deduction of wage-related or flat rate contributions or the calculation of the wage-related or flat rate contributions deductible from such wages; or
- (b) such of those wage sheets, deduction cards or other documents and records as may be specified by such inspector or officer.

(2) The Collector, by reference to the information obtained from an inspection of the documents and records produced under paragraph (1) may on the occasion of each inspection prepare a certificate showing—

- (a) the amount of wage-related and flat rate contributions which it appears from the documents and record so produced that the employer is liable to pay to the Collector for the years or months covered by the inspection; and
- (b) any amount of such contributions which has not been paid to him or, to the best of his knowledge and belief, to any other person to whom it might lawfully be paid.

(3) The production of such a certificate shall be sufficient evidence that the employer is liable to pay to the Collector in respect of the years or months mentioned in the certificate the amount shown therein pursuant to sub-paragraph (b) of paragraph (2); and any document purporting to be such a certificate shall be deemed to be such a certificate until the contrary is proved.

(4) The provisions of paragraphs (1) and (2) of regulation 19 shall apply to the amount shown in such a certificate, subject to the modification mentioned in paragraph (5) of regulation 20.

Powers of officers

22. Anything that is authorized or required by this Part to be done by the Collector may be done by the Collector or by any public officer authorized by him in that behalf.

Alternative arrangements for collection and recovery of contributions.

23. Notwithstanding the preceding regulations of this Part, the Minister may, if he thinks fit, and subject to such terms and conditions as he may impose, authorize any arrangements whereby wage-related contributions or flat rate contributions or both are paid at times or in a manner other than those heretofore prescribed in this Part and the preceding provisions of this Part shall be without prejudice to any remedy otherwise available for the recovery of any such contributions.

Death of employer.

24. If an employer dies, anything that he would have been liable to do under this Part shall be done by his personal representatives or, in the case of an employer who paid wages on behalf of another person, by the person succeeding him or, if no person succeeds him, the person on whose behalf he paid wages.

25.—(1) This regulation applies where there has been a change in the employer from whom an employed person receives wages in respect of his employment in any trade, business, concern or undertaking or in connection with any property.

Succession to a business, etc.

(2) Where this regulation applies, in relation to any matter arising after the change, the employer after the change shall be liable to do anything that the employer before the change would have been liable to do under this Part if the change had not taken place:

Provided that the employer after the change shall not be liable for the payment of any contributions that were deductible from wages paid to the employed person before, unless they are also deductible from wages paid to the employed person after, the change took place, or of any corresponding employer's contributions.

PART V—*General and Miscellaneous*

26.—(1) Where an employed person is employed by two or more employers in any contribution week, the first employer employing him in that week shall, subject to the provisions of these Regulations, be treated as his employer for the purposes of the provisions of the Act relating to flat rate contributions.

Employment by two or more employers.

(2) Where an insured person is employed by two or more employers in any contribution week and no one of those employers is the first person employing him in that week, then, unless the case is one for which other provision is expressly made by these Regulations, that one of the employers who first makes a money payment to the person employed in respect of his employment in that week shall be deemed to be the employer of that person for the purposes of the provisions of the Act relating to flat rate contributions.

(3) In the case of an insured person employed as an agent by two or more employers and paid by commission or fees or a share in the profits, or partly in one and partly in another of those ways, the employer in the employment on which the person employed as an agent is mainly dependent for his livelihood shall be deemed to be the employer of that person for the purposes of the provisions of the Act relating to flat rate contributions.

27.—(1) Where an employed person works under the general control and management of a person who is not his immediate employer, that person (referred to hereafter in this regulation as "the principal

Intermediate employers.

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employer", shall be deemed to be the employer for the purpose of these Regulations, and the immediate employer shall furnish the principal employer with such particulars of the employed person's wages as may be necessary to enable the principal employer to comply with the provisions of these Regulations.

(2) If the employed person's pecuniary remuneration is actually paid to him by the immediate employer—

- (a) the immediate employer shall be notified by the principal employer of the amount of contributions which may be deducted when such remuneration is paid to the employed person, and may deduct the amount so notified to him; and
- (b) the principal employer may make a corresponding deduction on making to the immediate employer the payment out of which the said remuneration will be paid.

Insurance cards not to be assigned or defaced.

28.—(1) No person shall assign or charge or agree to assign or charge any insurance card, and any sale, transfer or assignment of, or any charge on, any insurance card shall be void and of no effect.

(2) No person shall deface or destroy any insurance card, or, save as authorized by the Minister, alter, amend or erase any of the figures or particulars (other than to amend the address of the insured person) therein contained.

(3) For the purposes of this regulation, a person who removes or erases from any stamp card a stamp which has been affixed thereto or impressed thereon shall be deemed to have defaced that stamp card.

Payment of employer's contributions.

29. If under these Regulations a person is required to pay any contribution that under paragraph (b) of subsection (2) of section 4 or paragraph (b) of subsection (1) of section 5 of the Act another person is liable to pay, his payment thereof shall be made as agent for that other person.

Provision of adhesive insurance stamps.

30. It shall be lawful for the Minister to provide, from time to time as they shall be needed, proper and sufficient adhesive insurance stamps, of such denominations according to the value of the same as may from time to time be required, and of such size, pattern and colour as he may determine, for the purpose of expressing and denoting payment of flat rate contributions that are, under the provisions of these Regulations, payable by means of insurance stamps.

31.—(1) Where the Minister has arranged with the Minister responsible for the Post Office for the sale of insurance stamps through the post offices, the Minister shall from time to time, as they shall be needed, issue sufficient quantities of insurance stamps to the Postmaster-General.

Issue of adhesive insurance stamps.

(2) It shall be lawful for the following persons to sell adhesive insurance stamps—

(a) a person in the service or employment of the Ministry of Pensions and Social Security; and

(b) during the continuance of any such arrangement as is mentioned in paragraph (1), any person in the service or employment of the Post Office.

(3) If any person—

(a) not being authorized so to do by paragraph (2), sells any adhesive insurance stamp; or

(b) sells any adhesive insurance stamp for a price that differs from the value stated thereon,

he shall for each offence be liable on summary conviction in a Resident Magistrate's Court to pay a fine not exceeding twenty dollars or to imprisonment with or without hard labour for a period not exceeding two months.

32.—(1) Where any adhesive insurance stamp has been inadvertently rendered unfit for use and an application is made to the Minister within two years after the stamp was rendered unfit for use, he may, on the surrender of the stamp, give in lieu thereof a clean and proper adhesive stamp of the same value or (if practicable) such number of clean and proper adhesive stamps of a less value as will secure that the aggregate of those values corresponds to the value of the surrendered stamp.

Allowance for spoiled adhesive stamps.

(2) All stamps surrendered under paragraph (1) shall be destroyed in the presence of an officer designated by the Minister.

33. When any person has any unused adhesive insurance stamp which has not been spoiled or rendered unfit or useless for the purpose intended, but for which he has no immediate use, the Minister may, if he thinks fit, repay to him the value of the stamp in money upon his delivering up the stamp and proving to the Minister's satisfaction

Purchase by Minister of unused adhesive stamps.

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that it was purchased by him from a person authorized to sell adhesive insurance stamps under these Regulations within two years before the application and with a *bona fide* intention to use it.

Insurance stamps impressed by franking meter devices.

34.—(1) Subject to the provisions of regulations 35 and 36, an employer in relation to whom a permit granted under paragraph (2) is in force may—

- (a) for the purpose of denoting payment of flat rate contributions that are payable under Part III; and
- (b) in lieu of affixing to the stamp cards of employed persons an adhesive stamp (or stamps) to the value of forty cents, in accordance with any directions as to manner of use given under regulation 35, impress on such cards, by means of a franking meter device approved by the Minister, a stamp (to the value of forty cents) of such size, pattern and colour as the Minister may authorize.

(2) The Minister may, in his discretion, grant a permit to an employer for the purposes of this regulation in such form as the Minister may approve.

(3) A permit granted under paragraph (2) shall be subject to such conditions, and shall be valid for such period, as the Minister may see fit to insert therein, and shall not be transferable.

(4) A permit granted under paragraph (2) may at any time be revoked or suspended by the Minister or surrendered by the employer to whom it was granted.

(5) An application for a permit under paragraph (2) shall be in the form approved by the Minister and shall contain such information as he may require.

Approval of franking meter devices, etc.

35.—(1) Applications to the Minister for the approval of a franking meter device shall be made by such person and in such manner as the Minister may require.

(2) The Minister may at any time withdraw his approval of any such device as aforesaid.

(3) The Minister may from time to time give directions to employers holding permits granted under regulation 34 as to the manner of use of such devices as aforesaid.

36.—(1) An approved franking meter device shall not be used for the purposes of regulation 34 unless the meter has been set and sealed by the Postmaster-General or any person in the service or employment of the Post Office authorized by him.

Setting of
meters in
franking
meter
devices.

(2) Meters shall be set and sealed at such place and time and at such intervals as the Postmaster-General may from time to time notify.

(3) No meter in a franking meter device shall be set for denoting payment of flat rate contributions unless payment of the appropriate amount has previously been made.

(4) Where—

(a) the permit issued to an employer under regulation 34 has expired and has not been renewed, or has been revoked or surrendered; or

(b) the Minister's approval of a franking meter device has been withdrawn; or

(c) a franking meter device has become unfit for use, the Minister may, subject to such conditions as he may see fit to impose, repay to the employer, either in cash or in adhesive insurance stamps, the value of any unimpressed stamps (for which payment has been made) which any franking meter device that has been used by the employer is capable of impressing at the time when such device is delivered for inspection to the Minister, together with an application for such payment.

37. If any person contravenes or fails to comply with any requirement of these Regulations in respect of which no special penalty is provided he shall be liable on summary conviction in a Resident Magistrate's Court to a fine not exceeding one hundred dollars.

Breach of
regulations.

THE NATIONAL INSURANCE ACT

REGULATIONS

(under sections 4, 5, 8, 45 and 50)

THE NATIONAL INSURANCE (CONTRIBUTIONS) REGULATIONS, 1966

(Made by the Minister on the 17th day of March, 1966)

[4th April, 1966.]

L.N. 93/66
Amds.:
L.N. 83/77
180/77

1. These Regulations may be cited as the National Insurance (Contributions) Regulations, 1966. Citation.

2. In these Regulations, unless the context otherwise requires— Interpre-
tation.

“contribution year” in relation to flat rate contributions payable under Part III of the Collection Regulations, has the meaning assigned to it in section 2 of the Act, but, in relation to wage-related contributions or flat rate contributions payable under Part IV of those Regulations, it has the meaning assigned to it in regulation 2 of the National Insurance (Assessment of Wage-Related Contributions) (Employed Persons) Regulations, 1966;

“due date” means, in relation to any contribution, the date on which that contribution was due to be paid;

“the Collection Regulations” means the National Insurance (Collection of Contributions) Regulations, 1966;

“week” means contribution week,

and other expressions have the same meanings as in the Act.

3. An employed person and his employer shall be exempted from liability to pay flat rate contributions for any week of employment in which no work is done by the employed person and no pecuniary remuneration, or pecuniary remuneration amounting to less than two dollars, in respect of that week is paid to him by that employer. Exemption
from
liability
to con-
tribute.

4. For the purposes of the provisions of the Act and the regulations relating to the amount of the yearly average of contributions for old age benefit, invalidity benefit, widow's or widower's benefit, orphan's benefit and special child's benefit, a flat rate contribution shall be Crediting
of con-
tributions to
meet yearly
average
require-
ments.

credited to an insured person for every week in respect of the whole of which invalidity pension or employment injury benefit is payable to him.

Disposal of contributions improperly paid.

5. Where contributions are paid which are of the wrong class or at the wrong rate, the Minister may treat them as paid on account of the contributions properly payable.

Return of contributions paid in error.

6.—(1) Subject to the provisions of regulation 5 and of this regulation, any contributions paid by a person or his employer (if any) under the erroneous belief that the contributions were payable by, or in respect or on behalf of, that person shall be returned by the Minister to that person or his employer, as the case may require, if application to that effect is made in writing to the Minister within the appropriate time specified in paragraph (4).

(2) In calculating the amount of any repayment to be made under this regulation to such a person or an employer, there shall be deducted—

- (a) in the case of employers' contributions and contributions as an insured person, the amount of any contributions paid under the said erroneous belief which have, under the provisions of regulation 5, been treated as paid on account of other contributions; and
- (b) in the case of contributions as an insured person, the amount, if any, paid to that person (and to any other person on the basis of that erroneous belief) by way of benefit which would not have been paid had the contributions (in respect of which an application for their return is duly made in accordance with paragraph (4)) not been paid in the first instance.

(3) Contributions erroneously paid by an employer on behalf of any person and not recovered from him may be repaid to the employer instead of to that person, but if so recovered may be repaid to that person, or, with his consent in writing, to his employer.

(4) A person desiring to apply for the return of any contribution paid under the said erroneous belief shall make the application in such form and in such manner as the Minister may from time to time determine, and—

- (a) if the contribution was paid at the due date, within two years from the date on which that contribution was paid; or

- (b) if the contribution was paid at a later date than the due date, within two years from the due date or within twelve months from the date of actual payment of the contribution, whichever period ends later.

(5) In this regulation the expression "due date" means the date on which the contribution, if it had been payable, would have been due to be paid.

(6) In its application to wage-related contributions and flat rate contributions payable under Part IV of the Collection Regulations, this regulation shall have effect subject to the following provisions, namely—

- (a) the time within which a person desiring to apply for the return of any such contribution paid under the said erroneous belief shall make the application is six years from the end of the contribution year during which the contribution was paid, or such longer time as the Minister may allow if he is satisfied that that person had good cause for not applying within those six years;
- (b) the provisions of this paragraph shall apply to any part of a contribution as they apply to that contribution;
- (c) for the purposes of this regulation, where a person in any period prescribed for the purposes of subsection (5) of section 5 of the Act is paid emoluments or receives earnings from two or more employments or occupations (or is paid emoluments in respect of one or more employments and receives earnings from one or more occupations) and the wage-related contributions paid by him in respect of those emoluments or earnings (or both) exceed the amount prescribed for the purposes of the said subsection (5), the excess shall be treated as representing contributions paid under the erroneous belief that they were payable by that person under the Act.

7.—(1) Where a contribution payable by an employer on behalf of an employed person is paid after the due date or is not paid, and the delay or failure in making payment thereof is shown to the satisfaction of the Minister not to have been with the consent or connivance of, or attributable to any negligence on the part of the employed person, the contribution shall, for the purpose of any right to benefit, be treated as paid on the due date.

Treatment, for purpose of any benefit, of late paid or unpaid contributions without consent, connivance or negligence of employed person.

(2) Where, by virtue of paragraph (1), any wage-related contribution falls to be treated as paid on the due date, the amount to be so treated shall not exceed such amount as is shown to the satisfaction of the Minister to have been payable.

(3) The provisions of regulations 8, 9 and 10 shall, in their application to a contribution payable by an employer on behalf of an employed person, have effect subject to the provisions of this regulation.

Treatment,
for purpose
of any
benefit, of
contribu-
tions paid
late through
ignorance
or error.

8. In the case of a contribution paid after the due date, where—

- (a) the contribution is paid after the time when it would, under the following provisions of these Regulations, have been treated as paid for the purposes of the right to a benefit; and
- (b) the failure to pay the contribution before that time is shown to the satisfaction of the Minister to be attributable to ignorance or error on the part of the insured person which was not due to any failure on his part to exercise due care and diligence,

the Minister may direct that for the purposes of the provisions of regulation 9 or 10 the contributions shall be treated as having been paid on such earlier day as he may consider appropriate in the circumstances and those provisions shall have effect subject to any such direction.

Treatment,
for purpose
of old age,
invalidity
widow's,
widower's,
orphan's
and special
child's
benefit of
late paid
contribu-
tions.

9. For the purpose of any right to old age benefit, invalidity benefit, widow's or widower's benefit, orphan's benefit or special child's benefit, contribution paid after the due date shall be treated—

- (a) if paid before the expiration of twelve months next following the end of the contribution year in which it became payable— as paid on the due date;
- (b) if paid at any other time—as not paid.

Treatment,
for purpose
of funeral
grant, of
late paid
flat rate
contribu-
tions.

10.—(1) For the purpose of any right to a funeral grant, a flat rate contribution paid after the due date shall be treated as not paid if—

- (a) the grant is claimed in respect of the death of the relevant person and the contribution is paid after the date of that death;
- (b) the grant is claimed in respect of the death of a person dying during the lifetime of the relevant person and the contribution is paid after the date of such death;

(c) the relevant person has predeceased the person in respect of whose death the grant is claimed and the contribution is paid after the date of the death of the relevant person, and in any other case shall be treated as paid on the due date.

(2) In this regulation the expression "relevant person" has the same meaning as in paragraph 5 of the Fourth Schedule to the Act.

11.—(1) The prescribed date for the purposes of subsection (1) of section 45 of the Act shall be—

Prescribed date for purposes of section 45 of Act.

(a) in the case of—

- (i) employed persons paying contributions on deduction cards;
- (ii) employers or employed persons who are required to pay contributions to the Collector of Taxes; and
- (iii) self-employed persons paying special contributions who are required to pay such contributions to the Collector of Taxes,

the day next after the last day of the period within which contributions were due to be paid;

(b) in the case of self-employed persons paying wage-related contributions, the first day of the month next after the month in which the due date falls;

(c) in the case of persons paying contributions by means of insurance stamps, the day next after the date of expiry of the period of three months next after the end of the contribution year during which the contributions were to be paid.

(2) For the purposes of paragraph (1) (b), where payment of contributions is to be made before the expiry of a period, the "due date" refers to the last day of that period.

12. For the purposes of section 45 of the Act, all sums due to the Fund by way of contributions shall bear interest at the rate of twenty per cent per annum.

Rate of interest on arrears of contributions.

THE NATIONAL INSURANCE ACT

REGULATIONS
(under sections 4, 50 and 53)

THE NATIONAL INSURANCE (WORKERS ON SMALL FARMS)
REGULATIONS, 1966

(Made by the Minister on the 17th day of March, 1966)

L.N. 92/66

[4th April, 1966.]

1. These Regulations may be cited as the National Insurance (Workers on Small Farms) Regulations, 1966. Citation.

2.—(1) In these Regulations—

Interpre-
tation.

“agricultural unit” means land used, or intended to be used, for the purposes of agriculture, and which is occupied or farmed or managed as a single unit, but does not include the sugar cane cultivation of a registered cane farmer;

“agriculture” includes horticulture and the use of land for any purpose of husbandry, inclusive of the keeping or breeding of livestock, poultry or bees and the growing of fruit, vegetables and the like;

“insured person” means a person who is an insured person under the Act by virtue of some employment other than prescribed employment or by virtue of his being an existing sugar worker;

“period of postponement” means the period during which the provisions of the Act relating to the payment of contributions are, by virtue of section 53 of the Act, deemed not to have come into operation in relation to persons in respect of prescribed employment;

“prescribed employment” means the employment of a person as an employed person to work (in any capacity whatsoever and whether indoors or outdoors) on an agricultural unit comprising less than 300 acres;

“registered cane farmer” means a cane farmer registered as such under the Sugar Industry Control Act,

and other expressions have the same meanings as in the Act.

*THE NATIONAL INSURANCE (WORKERS ON SMALL FARMS)
REGULATIONS, 1966*

(2) In the case of an agricultural unit comprising two or more distinct parcels of land that are not contiguous, each to the other or others, each parcel shall, for the purposes of these Regulations, be regarded as being a separate agricultural unit unless it forms part of a group of contiguous parcels, in which case each such group shall, for such purposes as aforesaid, be regarded as being a separate agricultural unit.

(3) For the purposes of paragraph (2)—

- (a) a group of parcels shall be deemed to be a group of contiguous parcels if each parcel forming part thereof is contiguous to at least one other parcel forming part thereof; and
- (b) a parcel of land shall not be regarded as not being contiguous to any other parcel of land by reason only that a road or railway runs between such parcels or any parts thereof.

Postpone-
ment of
entry into
insurance
of workers
on small
farms.

3. The following persons are prescribed for the purposes of section 53 of the Act, that is to say, any person, other than an insured person, in so far as he is employed in prescribed employment.

Employment
on small
farms of
persons who
have already
become
insured
under the
Act.

4. Where an insured person is, during the period of postponement, employed in prescribed employment that person and his employer in such employment shall, until the expiration of the period of postponement, be exempted from liability to pay flat rate contributions and wage-related contributions in respect of such employment.

THE NATIONAL INSURANCE ACT

REGULATIONS
(under sections 5 and 50)

THE NATIONAL INSURANCE (ASSESSMENT OF WAGE-RELATED CONTRIBUTIONS) (EMPLOYED PERSONS) REGULATIONS, 1966

(Made by the Minister on the 17th day of March, 1966)

L.N. 91/66
352/75
85/79

[4th April, 1966.]

1. These Regulations may be cited as the National Insurance (Assessment of Wage-Related Contributions) (Employed Persons) Regulations, 1966. Citation.

2.—(1) In these Regulations, unless the context otherwise requires— Interpretation.

“aggregation” means the aggregating and treating as a single payment, under subsection (4) of section 5 of the Act, of two or more payments and “aggregated” shall be construed accordingly;

“apportionment” means the apportioning and treating as two or more separate payments, under subsection (4) of section 5 of the Act, of any single payment;

“contribution year” means the period of 52 or 53 weeks beginning with the first Monday of January in any calendar year and ending on the Sunday immediately before the first Monday of the succeeding calendar year, but, in relation to the year 1966, it means the period beginning with the first Monday of April, 1966 and ending on the Sunday immediately before the first Monday of January, 1967;

“cumulative emoluments” has the same meaning as in the Income Tax (Employment) Regulations contained in Part I of the Second Schedule to the Income Tax Act;

“the employer” means, in relation to any payment, the employer in the employment in which that payment is made or is payable;

THE NATIONAL INSURANCE (ASSESSMENT OF WAGE-RELATED CONTRIBUTIONS) (EMPLOYED PERSONS) REGULATIONS, 1966

“payment” means a payment on account of a person’s emoluments in any employment and includes any part of a payment that is calculated separately from the remainder thereof;

“regular payment” means any payment made, or falling under these Regulations to be treated for the purpose of wage-related contributions as made, at regular intervals;

“wage-related contribution period” has the meaning assigned to it in paragraph (2), and other expressions have the same meanings as in the Act.

(2) In these Regulations “wage-related contribution period” means a period—

(a) the length of which is—

(i) in the case of a person any part of whose emoluments is paid in regular payments at intervals of a week or more, the length of the shortest interval at which any such part is paid or treated as paid; and

(ii) in the case of any other person, one week; and

(b) which is one of a succession of periods of the same length beginning in the case of the first such period in any contribution year on the commencement of that year, and in the case of each subsequent period immediately upon the ending of the period which last precedes it.

3. For the purposes of subsection (5) of section 5 of the Act the period of a contribution year is prescribed.

Period prescribed for purposes of section 5 of Act.

4.—(1) The equivalent amounts for the purposes of subsection (1) of section 5 of the Act shall be determined in accordance with the provisions of this regulation.

Equivalent amounts.

(2) The respective equivalent amounts shall be—

(a) where the wage-related contribution period is a week, ten dollars and the amount, up to one hundred and forty dollars, by which the payment exceeds ten dollars;

(b) where the wage-related contribution period is a multiple of a week, the corresponding multiple of the amounts prescribed in sub-paragraph (a) of this paragraph;

- (c) where the wage-related contribution period is a month, forty-four dollars and the amount, up to six hundred and six dollars, by which the payment exceeds forty-four dollars;
- (d) where the wage-related contribution period is a multiple of a month, the corresponding multiple of the amounts prescribed in sub-paragraph (c) of this paragraph; and
- (e) in any other case, one-seventh of the amounts calculated by multiplying the amounts prescribed in sub-paragraph (a) of this paragraph by the number of days in the wage-related contribution period in question.

5.—(1) Where the wage-related contribution period is a week or a month the wage-related contributions payable by the employer and the employed person, respectively, in respect of any payment of an amount shown in the first column of Part I or, as the case may be, Part II of the Schedule, shall be the amount opposite thereto in the second column and, in respect of any payment of an amount not so shown, shall be the amount in the second column opposite to the next smaller amount, if any, which is so shown.

Calculation of wage-related contributions. Schedule.

(2) Where the wage-related contribution period is a multiple of a week or of a month, paragraph (1) of this regulation shall apply subject to the substitution for the references to the amounts in the respective columns of the said Schedule of references to the corresponding multiples of those amounts.

6.—(1) If on any occasion a payment which would normally fall to be made at a regular interval is made otherwise than at that regular interval, it shall for the purpose of wage-related contributions be treated as if it were a payment made at that regular interval.

Payments treated as made at regular intervals.

(2) Where payments are made at irregular intervals of the amounts due for regular intervals, the payments shall for the purpose of wage-related contributions be treated as if they were payments made at those regular intervals.

(3) Where payments are normally made at intervals which secure that one and only one payment is made in each of a succession of periods consisting of the same number of days, weeks or months, those payments shall for the purpose of wage-related contributions be treated as if they were payments made at the regular interval of one of those periods; and where the intervals for which payments are

THE NATIONAL INSURANCE (ASSESSMENT OF WAGE-RELATED CONTRIBUTIONS) (EMPLOYED PERSONS) REGULATIONS, 1966

normally due are such as to secure that one and only one such interval ends in each of a succession of like periods, those intervals shall be treated as regular intervals of the length of those periods for the purpose of paragraph (2) of this regulation.

General provisions as to aggregation and apportionment.

7.—(1) Where on one or more occasions the whole or any part of a person's emoluments are not paid weekly (whether or not they are treated for the purpose of wage-related contributions as paid weekly), subsection (4) of section 5 of the Act shall apply subject to the modifications prescribed in this regulation.

(2) In every case to which this regulation applies the said subsection (4) of section 5 shall have effect as if for the references therein to "contribution week" and "week" there were substituted references to "wage-related contribution period".

(3) Where a regular payment is made in a wage-related contribution period other than that in which it would normally have fallen to be made, the said subsection (4) of section 5 shall have effect as if that payment (together with any other payment which is made on that occasion and which normally falls to be made in the same wage-related contribution period as that regular payment would normally have fallen to be made) had been made in the wage-related contribution period in which it would normally have fallen to be made:

Provided that where the wage-related contribution period in which it is made and the wage-related contribution period in which it would normally have fallen to be made are in different contribution years, the preceding provisions of this paragraph shall not apply and that regular payment shall not be aggregated with any payment other than one which on that occasion is, and which normally falls to be, made on the same day as that regular payment.

Aggregation of payments in separate employments under same employer.

8. Payments in any employment shall not be aggregated with payments in any other employment under the same employer if—

- (a) such aggregation is not reasonably practicable because the emoluments in the respective employments are calculated at different places; or
- (b) having regard to the arrangements which are or might reasonably be made for the calculation and payment of the emoluments in the respective employments, it is not reasonably practicable at or before the time of payment for any of the

persons calculating or making the payments in any one such employment to have such information about the other employment or employments and the payments made or to be made therein as would be required for the calculation of the wage-related contributions payable if the payments made in the respective employments fell to be aggregated.

9. For the purposes of subsection (5) of section 5 of the Act, where an employed person in any contribution year is paid emoluments from two or more employments— Annual maximum.

- (a) if that year is one in which only 52 contribution weeks commence and if the wage-related contributions paid by him in that year amount to \$183 or more, the prescribed amount shall be \$182;
- (b) in any other case the prescribed amount shall, if the wage-related contributions paid by him in that year amount to \$186 or more, be \$185.50:

Provided that, in relation to the contribution year ending on 1st January, 1967, the prescribed amount shall, if the wage-related contributions paid by him in that year amount to \$30.25 or more, be \$29.25:

Provided further that, in relation to the contribution year ending on 4th January, 1976, the prescribed amount shall, if the wage-related contributions paid by him in that year amount to \$49 or more, be \$48:

Provided further that, in relation to the contribution year ending on 6th January, 1980, the prescribed amount shall, if the wage-related contributions paid by him in that year amount to \$132 or more, be \$131.25.

10.—(1) A sum deducted from any payment on account of a person's emoluments which is or would but for the deduction be made shall not be treated for the purpose of wage-related contributions as paid on account of that person's emoluments unless it is included in that person's cumulative emoluments. Emoluments to be disregarded.

(2) In so far as any payment on account of a person's emoluments comprises or represents, and does not exceed in amount, sums deducted from any previous payments on account of his emoluments

THE NATIONAL INSURANCE (ASSESSMENT OF WAGE-RELATED CONTRIBUTIONS) (EMPLOYED PERSONS) REGULATIONS, 1966

that payment shall be treated for the purposes of subsection (6) of section 5 of the Act as coming from sums comprised in a previous payment:

Provided that the provisions of this paragraph shall apply only in so far as—

- (a) the payment comprising or representing the sums deducted is not included in that person's cumulative emoluments; and
- (b) those sums have not been comprised in or represented by any previous payment to or to the order or for the benefit of that person.

(3) There shall be excluded from the computation of a person's emoluments any payment in so far as it is a payment made before it is due, where the sum paid is to be deducted from a subsequent regular payment made or treated as made at an interval not exceeding one week (including such a regular payment which but for any deduction would be made) and for the purpose of wage-related contributions the sum so deducted shall be treated as having been paid to the employed person.

**Abnormal
pay
practices.**

11.—(1) The provisions of this regulation shall not apply for the purpose of any decision of the Minister in so far as that decision relates to contributions based on payments made more than one year before the beginning of the contribution year in which that decision is given.

(2) With a view to securing that liability for the payment of wage-related contributions is not avoided or reduced by an employer's following in the payment of persons employed any practice which is abnormal for their employments (hereinafter referred to as an "abnormal pay practice"), the Minister may, if he thinks fit, determine any question relating to a person's wage-related contributions where any such practice has been or is being followed, as if the employer concerned had not followed any abnormal pay practice but had followed a practice or practices normal for the employment or employments in question.

(3) With the view aforesaid the Minister, in any case in which he has reason to believe that any abnormal pay practice has been or is being followed, may determine any such question, if he is satisfied that it ought properly to be so determined, as if application had been duly made to him for the determination thereof.

12.—(1) Notwithstanding anything in these Regulations, the Minister may, if he thinks fit, and subject to such terms and conditions as he may impose, in any particular case or class of case, authorize any arrangements whereby wage-related contributions are assessed at times or in a manner other than those heretofore prescribed in these Regulations and he may also from time to time issue instructions—

Provisions relating to special cases.

- (a) for the purpose of determining the wage-related contribution period in which any payment would normally have fallen to be made, where such period cannot, or cannot without undue difficulty or inconvenience, be identified;
- (b) in relation to the application of these Regulations to cases where, by reason of a change in the shortest regular interval at which any part of a person's emoluments are paid or treated as paid, that person's wage-related contribution period in any employment, or employments under the same employer is, or is in process of being, changed; and
- (c) in relation to any particular case or class of case where the Minister is satisfied that, by reason of the special circumstances appertaining thereto, the preceding regulations do not make adequate provision or that, by reason of such special circumstances, difficulties arise in connection with the application of any provision of the preceding regulations.

(2) The provisions of the preceding regulations, shall, subject to the provisions of any such arrangements or instructions as aforesaid apply to any person affected by the arrangements or the instructions, and any contravention of, or failure to comply with, any requirement of the arrangements or the instructions shall be deemed to be a contravention of or failure to comply with these Regulations.

**THE NATIONAL INSURANCE (ASSESSMENT OF WAGE-RELATED
CONTRIBUTIONS) (EMPLOYED PERSONS) REGULATIONS, 1966**

SCHEDULE

(Regulation 5)

PART I

Weekly Scale

Amount of Payment			Amount of Contribution
\$			\$ c
12	...	...	.05
14	...	...	.10
16	...	...	.15
18	...	...	.20
20	...	...	.25
22	...	...	.30
24	...	...	.35
26	...	...	.40
28	...	...	.45
30	...	...	.50
32	...	...	.55
34	...	...	.60
36	...	...	.65
38	...	...	.70
40	...	...	.75
42	...	...	.80
44	...	...	.85
46	...	...	.90
48	...	...	.95
50	...	...	1.00
52	...	...	1.05
54	...	...	1.10
56	...	...	1.15
58	...	...	1.20
60	...	...	1.25
62	...	...	1.30
64	...	...	1.35
66	...	...	1.40
68	...	...	1.45
70	...	...	1.50
72	...	...	1.55
74	...	...	1.60
76	...	...	1.65
78	...	...	1.70
80	...	...	1.75
82	...	...	1.80
84	...	...	1.85
86	...	...	1.90
88	...	...	1.95
90	...	...	2.00
92	...	...	2.05
94	...	...	2.10
96	...	...	2.15
98	...	...	2.20
100	...	...	2.25
102	...	...	2.30
104	...	...	2.35
106	...	...	2.40
108	...	...	2.45
110	...	...	2.50
112	...	...	2.55
114	...	...	2.60
116	...	...	2.65

THE NATIONAL INSURANCE (ASSESSMENT OF WAGE-RELATED CONTRIBUTIONS) (EMPLOYED PERSONS) REGULATIONS, 1966

Monthly Scale, contd.

Amount of Payment		Amount of Contribution	
\$		\$	c
118	2.70
120	2.75
122	2.80
124	2.85
126	2.90
128	2.95
130	3.00
132	3.05
134	3.10
136	3.15
138	3.20
140	3.25
142	3.30
144	3.35
146	3.40
148	3.45
150 and over	3.50

PART II

Monthly Scale

46	...	...	...	.05
48	...	...	...	.10
50	...	...	...	.15
52	...	...	...	.20
54	...	...	...	.25
56	...	...	...	.30
58	...	...	...	.35
60	...	...	...	.40
62	...	...	...	.45
64	...	...	...	.50
66	...	...	...	.55
68	...	...	...	.60
70	...	...	...	.65
72	...	...	...	.70
74	...	...	...	.75
76	...	...	...	.80
78	...	...	...	.85
80	...	...	...	.90
82	...	...	...	.95
84	...	...	...	1.00
86	...	...	...	1.05
88	...	...	...	1.10
90	...	...	...	1.15
92	...	...	...	1.20
94	...	...	...	1.25
96	...	...	...	1.30
98	...	...	...	1.35
100	...	...	...	1.40
102	...	...	...	1.45
104	...	...	...	1.50
106	...	...	...	1.55
108	...	...	...	1.60
110	...	...	...	1.65

**THE NATIONAL INSURANCE (ASSESSMENT OF WAGE-RELATED
CONTRIBUTIONS) (EMPLOYED PERSONS) REGULATIONS, 1966**

Monthly Scale, contd.

Amount of Payment			Amount of Contribution	
\$			\$	c
112	1.70
114	1.75
116	1.80
118	1.85
120	1.90
122	1.95
124	2.00
126	2.05
128	2.10
130	2.15
132	2.20
134	2.25
136	2.30
138	2.35
140	2.40
142	2.45
144	2.50
146	2.55
148	2.60
150	2.65
152	2.70
154	2.75
156	2.80
158	2.85
160	2.90
162	2.95
164	3.00
166	3.05
168	3.10
170	3.15
172	3.20
174	3.25
176	3.30
178	3.35
180	3.40
182	3.45
184	3.50
186	3.55
188	3.60
190	3.65
192	3.70
194	3.75
196	3.80
198	3.85
200	3.90
202	3.95
204	4.00
206	4.05
208	4.10
210	4.15
212	4.20
214	4.25
216	4.30
218	4.35
220	4.40
222	4.45
224	4.50

THE NATIONAL INSURANCE (ASSESSMENT OF WAGE-RELATED CONTRIBUTIONS) (EMPLOYED PERSONS) REGULATIONS, 1966

58.01

Monthly Scale, contd.

Amount of Payment		Amount of Contribution	
\$		\$	c
226	4.55
228	4.60
230	4.65
232	4.70
234	4.75
236	4.80
238	4.85
240	4.90
242	4.95
244	5.00
246	5.05
248	5.10
250	5.15
252	5.20
254	5.25
256	5.30
258	5.35
260	5.40
262	5.45
264	5.50
266	5.55
268	5.60
270	5.65
272	5.70
274	5.75
276	5.80
278	5.85
280	5.90
282	5.95
284	6.00
286	6.05
288	6.10
290	6.15
292	6.20
294	6.25
296	6.30
298	6.35
300	6.40
302	6.45
304	6.50
306	6.55
308	6.60
310	6.65
312	6.70
314	6.75
316	6.80
318	6.85
320	6.90
322	6.95
324	7.00
326	7.05
328	7.10
330	7.15
332	7.20
334	7.25
336	7.30
338	7.35

**THE NATIONAL INSURANCE (ASSESSMENT OF WAGE-RELATED
CONTRIBUTIONS) (EMPLOYED PERSONS) REGULATIONS, 1966**

Monthly Scale, contd.

Amount of Payment		Amount of Contribution	
\$		\$	c
340	7.40
342	7.45
344	7.50
346	7.55
348	7.60
350	7.65
352	7.70
354	7.75
356	7.80
358	7.85
360	7.90
362	7.95
364	8.00
366	8.05
368	8.10
370	8.15
372	8.20
374	8.25
376	8.30
378	8.35
380	8.40
382	8.45
384	8.50
386	8.55
388	8.60
390	8.65
392	8.70
394	8.75
396	8.80
398	8.85
400	8.90
402	8.95
404	9.00
406	9.05
408	9.10
410	9.15
412	9.20
414	9.25
416	9.30
418	9.35
420	9.40
422	9.45
424	9.50
426	9.55
428	9.60
430	9.65
432	9.70
434	9.75
436	9.80
438	9.85
440	9.90
442	9.95
444	10.00
446	10.05
448	10.10
450	10.15

THE NATIONAL INSURANCE (ASSESSMENT OF WAGE-RELATED CONTRIBUTIONS) (EMPLOYED PERSONS) REGULATIONS, 1966

58.03

Monthly Scale, contd.

Amount of Payment			Amount of Contribution	
\$			\$	c
452	10.20
454	10.25
456	10.30
458	10.35
460	10.40
462	10.45
464	10.50
466	10.55
468	10.60
470	10.65
472	10.70
474	10.75
476	10.80
478	10.85
480	10.90
482	10.95
484	11.00
486	11.05
488	11.10
490	11.15
492	11.20
494	11.25
496	11.30
498	11.35
500	11.40
502	11.45
504	11.50
506	11.55
508	11.60
510	11.65
512	11.70
514	11.75
516	11.80
518	11.85
520	11.90
522	11.95
524	12.00
526	12.05
528	12.10
530	12.15
532	12.20
534	12.25
536	12.30
538	12.35
540	12.40
542	12.45
544	12.50
546	12.55
548	12.60
550	12.65
552	12.70
554	12.75
556	12.80
558	12.85
560	12.90
562	12.95

**THE NATIONAL INSURANCE (ASSESSMENT OF WAGE-RELATED
CONTRIBUTIONS) (EMPLOYED PERSONS) REGULATIONS, 1966**

Monthly Scale, contd.

Amount of Payment	Amount of Contribution
564	13.00
566	13.05
568	13.10
570	13.15
572	13.20
574	13.25
576	13.30
578	13.35
580	13.40
582	13.45
584	13.50
586	13.55
588	13.60
590	13.65
592	13.70
594	13.75
596	13.80
598	13.85
600	13.90
602	13.95
604	14.00
606	14.05
608	14.10
610	14.15
612	14.20
614	14.25
616	14.30
618	14.35
620	14.40
622	14.45
624	14.50
626	14.55
628	14.60
630	14.65
632	14.70
634	14.75
636	14.80
638	14.85
640	14.90
642	14.95
644	15.00
646	15.05
648	15.10
650 and over	15.15

THE NATIONAL INSURANCE ACT

REGULATIONS
(under sections 7 and 50)

THE NATIONAL INSURANCE (VOLUNTARY CONTRIBUTIONS) REGULATIONS,
1968

(Made by the Minister on the 11th day of January, 1968) L.N. 22/68

1. These Regulations may be cited as the National Insurance (Voluntary Contributions) Regulations, 1968. Citation.

2. In these Regulations, unless the context otherwise requires— Interpretation.

“certificate” means a certificate of voluntary insurance granted under section 7 of the Act;

“Ministry” means the Ministry of the Minister;

“voluntary contribution” means a flat rate contribution which may be paid under section 7 of the Act of a voluntary contributor;

“voluntary contributor” has the meaning assigned thereto in subsection (2) of section 7 of the Act;

“voluntary contributions stamp card” means a stamp card for denoting payment of voluntary contributions, and other expressions have the same meanings as in the Act.

3. Every application for a certificate shall be made on a form approved by the Minister and in accordance with such instructions as the Minister may, from time to time, issue and every applicant for a certificate shall also furnish to the Minister, in such manner as the Minister may, from time to time direct, such further information as the Minister may require, being information relevant to the question of the issue in relation to the applicant of a certificate. Manner of application for certificate of voluntary insurance.

4. Every such application shall be made before the expiration of the period of twenty-six weeks next following the date when the applicant last ceased to be liable pursuant to section 4 of the Act to pay a flat rate contribution as an employed or self-employed person, or before Time for making application.

*THE NATIONAL INSURANCE (VOLUNTARY CONTRIBUTIONS)
REGULATIONS, 1968*

the expiration of such longer period as the Minister may in any particular case accept.

Provisions relating to certificates.

5.—(1) Certificates shall be in a form approved by the Minister.

(2) A certificate, when issued, shall remain the property of the Minister but the voluntary contributor shall be liable for its custody until it is surrendered to the Minister.

Issue of stamp cards and payment of voluntary contributions.

6.—(1) Subject to the provisions of paragraph (1) of regulation 7, upon the issue to a voluntary contributor of a certificate there shall also be issued to him a voluntary contributor's voluntary contribution stamp card.

(2) Subject to the provisions of paragraph (3) of regulation 7, every voluntary contribution by or on behalf of a voluntary contributor shall be paid by the affixation of a forty cents adhesive stamp to his voluntary contributions stamp card.

Special provisions for voluntary contributors resident abroad.

7.—(1) The voluntary contributions stamp card of a voluntary contributor who is resident outside Jamaica shall not be issued to, or be held by, such voluntary contributor, but shall instead either—

(a) be issued to and held by some person resident in Jamaica for the time being nominated by the voluntary contributor to have the custody of, and to affix stamps to, such stamp card as his agent, and who consents to be such an agent; or

(b) be held in the Ministry in accordance with an arrangement in that behalf approved by the Minister,
as the voluntary contributor shall elect.

(2) Any such election as aforesaid may be changed by the voluntary contributor in accordance with any instructions in that behalf issued by the Minister.

(3) Voluntary contributions by a voluntary contributor whose voluntary contributions stamp card is held in the Ministry under such an arrangement as is referred to in sub-paragraph (b) shall, while such stamp card is so held, be paid in accordance with such arrangements, and each payment shall be recorded in such manner as the Minister may direct.

(4) The Minister may, from time to time, issue instructions in relation to voluntary contributions stamp cards of voluntary contributors who are, or have been resident outside Jamaica, regarding

*THE NATIONAL INSURANCE (VOLUNTARY CONTRIBUTIONS)
REGULATIONS, 1968*

the custody or transfer of custody of such stamp cards or otherwise, and whether or not such stamp cards are in the custody of the voluntary contributor or his nominated agent or the Ministry, and any person affected by any such instructions shall comply therewith.

8. Unless the Minister in any particular case or class of case otherwise directs, a voluntary contribution shall be paid not later than the end of the contribution year in which the contribution week in respect of which payment is being made falls.

Time for
payment
of volun-
tary con-
tributions.

9.—(1) A certificate may be cancelled by the Minister if, for a continuous period of two years or more, neither a voluntary contribution nor a contribution payable under section 4 of the Act, has been paid by or on behalf of the voluntary contributor.

Cancellat-
ion of
certificate.

(2) Where a certificate has been cancelled the voluntary contributor shall, without delay, surrender it to the Minister.

10. Subject to the foregoing provisions of these Regulations and to any instructions issued thereunder, the National Insurance (Collection of Contributions) Regulations, 1966, shall (with the necessary modifications) apply in relation to voluntary contributions stamp cards as they would apply in relation to self-employed persons' stamp cards, if the provisions of the Act relating to self-employed persons were in operation at the commencement of these Regulations.

Applica-
tion of
Collections
Regulations.

THE NATIONAL INSURANCE ACT

Regulations
(under sections 9, 10, 23 and 50)

THE NATIONAL INSURANCE (GENERAL BENEFIT) REGULATIONS, 1966
(Made by the Minister on the 17th day of March, 1966)

[4th April, 1966.]

L.N. 96/66
Vide
L.N.295/68
Amdts.:
L.N.275/69
254/73
435/74
350/75
119A/78
66C/80
124A/81
42C/97
106/99
52/2006
95¹A/2007
w.e.f.
1.4.2007

Citation.

1. These Regulations may be cited as the National Insurance (General Benefit) Regulations, 1966.

Interpretation.

2. In these Regulations, unless the context otherwise requires—
“contribution” means flat rate contribution;
“pension” means pension under the Act,
and other expressions have the same meanings as in the Act.

3. For the purposes of paragraph (d) of subsection (4) of section 9 of the Act, the yearly average of contribution paid by or credited to any person shall be calculated by dividing, by the number of years comprised in the period over which the average is to be calculated, the sum total of the contributions as an insured person paid by or credited to that person in respect of that period, other than contributions which are not paid on their due dates and are not treated in accordance with regulations under the Act as so paid for the purposes of pension.

Calculation of yearly average of contributions.

4.—(1) Where a person would be entitled to old age pension, invalidity pension, widow’s pension or widower’s pension but for the fact that the relevant contribution conditions are not satisfied as respects the yearly average of contributions paid or credited, that person shall nevertheless be entitled to benefit in accordance with the succeeding paragraphs, if—

Partial satisfaction of contribution conditions and reduced rate of benefit.

- (a) in the case of contributions made on or before the 31st day of March, 2007, the yearly average of contributions paid or credited is not less than thirteen; or
- (b) in the case of contributions made on or after the 1st day of April, 2007, the yearly average of contributions paid or credited is not

less than ten.

(2) Where the yearly average is less than thirty-nine but not less than twenty-six, benefit shall be payable at the rate of \$1,125.00 per week.

(3) Where the yearly average is less than twenty-six, benefit shall be payable at the rate of \$750.00 per week.

Persons treated as having retired from regular employment.

5. For the purposes of the Act a person may be treated as having retired from regular employment at any time after that person has attained, in the case of a man, the age of sixty-five or, in the case of a woman, the age of sixty, notwithstanding that he or she is engaged or intends to engage in a gainful occupation, if he or she is engaged or intends to engage therein only occasionally or to an inconsiderable extent or otherwise in circumstances not inconsistent with retirement.

Suspension of payment of benefit during periods of absence from Jamaica.

6.—(1) Subject to the provisions of these Regulations, payment of benefit to or in respect of a person who is absent from Jamaica shall, whether or not such payment is in respect of a period of such absence, be suspended while he is so absent.

(2) Where payment of benefit to or in respect of any person has been suspended in pursuance of paragraph (1) for a continuous period of twelve months, the suspension shall cease, notwithstanding that such person continues thereafter to be absent from Jamaica.

(3) Where the Minister is satisfied in respect of any period that a person who is absent from Jamaica is receiving medical treatment, the provisions of paragraph (1) shall not apply in relation to that person's absence from Jamaica during that period.

Vide L.N. 295/68

(4) The provisions of this regulation shall not apply to citizens of the United States of America.

Suspension of payment of benefit during imprisonment, etc.

7. Subject to the provisions of these Regulations, payment of benefit to or in respect of a person who is undergoing imprisonment or detention in legal custody shall, whether or not such payment is in respect of a period during which he is undergoing imprisonment or such detention, be suspended while that person is undergoing imprisonment or detention as aforesaid.

Payment of benefit to others in lieu of suspension.

8.—(1) Where payment of any benefit payable to a person is, by virtue of regulation 6 or regulation 7, liable to be suspended during any period (hereinafter in this paragraph called "the period of suspension") and that person by notice in writing addressed to the Minister requests that, in relation to the whole or any specified portion of the benefit, payment shall, during the whole or any specified part

of the period of suspension, be made to some other person, being a person over the age of 18 and named and clearly identified in such notice, payment of the benefit (or the specified portion thereof, as the case may be) during the period of suspension (or the specified part thereof, as the case may be) shall not be suspended but shall be paid to the person named, and his receipt for any such payment shall be a good discharge to the Minister and the National Insurance Fund.

(2) A notice under paragraph (1) may be cancelled or varied by a further notice in writing but a cancellation or variation shall not have effect until the expiration of one month after the receipt by the Minister of such further notice.

(3) Subject to the provisions of paragraphs (1) and (2), the Minister may in his discretion direct that in relation to any portion, not exceeding one-half, of any benefit payable to a person who is undergoing imprisonment or such detention as aforesaid payment shall not be suspended but shall be made during the whole or any part of the period of imprisonment or detention to or for the maintenance of any person or persons appearing to the Minister to be wholly or mainly dependent for their livelihood upon the person undergoing imprisonment or detention and the receipt of any person receiving any such payment shall be a good discharge to the Minister and the National Insurance Fund.

(4) The Minister may in his discretion from time to time revoke or vary any direction given by him under paragraph (3).

9. Where by virtue of regulation 6 or 7 payment of benefit is suspended for any period, the period of suspension shall not be taken into account in calculating any period under regulation 11 of the National Insurance (Claims and Payments) Regulations, 1966.

Right to suspended payments not extinguished.

10.—(1) Payments of benefit which have been suspended under regulation 6 or 7 shall be made after the end of the period of suspension at such times and in such manner (whether in a lump sum or in instalments) as the Minister may direct.

Arrangements for payment of benefit after cessation of period of suspension, etc.

(2) Payments of benefit to or in respect of any person who is absent from Jamaica, being payments that remain or become payable by virtue of paragraph (2) or paragraph (3) of regulation 6 or that become payable consequent on the provisions of regulation 11, shall

*THE NATIONAL INSURANCE (GENERAL BENEFIT)
REGULATIONS, 1966*

be made in accordance with arrangements from time to time approved by the Minister.

(3) Payments of benefit (or of any portion of a benefit) to persons under regulation 8 shall be made in accordance with directions given by the Minister.

(4) Before making any payment referred to in paragraph (1), (2) or (3) the Minister may require the furnishing of such information and evidence as he may deem to be relevant.

11. Nothing in subsection (3) of section 20 of the Act shall prevent the payment of a funeral grant in respect of a death occurring outside Jamaica on or after the 3rd day of July, 1969.

Payment of
funeral grant
in respect of
deaths occur-
ring outside
Jamaica.

THE NATIONAL INSURANCE ACT

REGULATIONS

(under sections 9, 15, 16, 23 and 50)

THE NATIONAL INSURANCE (EMPLOYMENT INJURIES) (BENEFIT)
REGULATIONS, 1970

(Made by the Minister on the 29th day of September, 1970)

[1st October, 1970.]

L.N. 285/70
Amd:
L.N. 340/73
72/75
Vide
L.N. 279/70

PART I—Preliminary

1. These Regulations may be cited as the National Insurance (Employment Injuries) (Benefit) Regulations, 1970. Citation.

2. In these Regulations, unless the context otherwise requires— Interpre-
tation.

“approved clinic” means any clinic approved by the Minister by memorandum in writing for the purposes of these Regulations;

“benefit” means any benefit referred to in subsection (2) of section 9;

“medical practitioner” means a medical practitioner registered under the Medical Law, and includes a person outside Jamaica who is not so registered but has qualifications corresponding, in the opinion of the Minister, to those of a medical practitioner who is so registered; Cap. 241.
1953 Edn.

“Minister of Health” means the Minister for the time being responsible for the subject of health;

“prescribed medical institution” means—

(a) any public hospital as defined in section 2 of the Hospitals (Public) Act; and

(b) the University Hospital;

“prescribed medical treatment” means medical treatment of one or more of the descriptions specified in paragraph (1) of regulation 3,

and other expressions have the same meanings as in the Act.

PART II—Medical Treatment

Prescribed
medical
treatment.

3.—(1) The following medical treatment is prescribed for the purposes of paragraph (a) of subsection (1) of section 15 of the Act, that is to say, medical treatment of one or more of the following descriptions, namely—

- (a) general practitioner treatment, including medical examination and diagnosis, and, where necessary, domiciliary visiting;
- (b) treatment (including specialist treatment) as an out-patient at a prescribed medical institution or other medical institution;
- (c) treatment (including specialist treatment) as an in-patient in a prescribed medical institution or other medical institution (including board, lodging and nursing) where, owing to the nature of the condition, treatment cannot suitably be provided otherwise than as such an in-patient;
- (d) the supply of essential pharmaceutical products;
- (e) the provision, repair and renewal, within limits laid down by the Minister after consultation with the Minister of Health, of medical and surgical appliances necessary for the rehabilitation, or the reduction of the incapacity for work, of the insured person,

that is, subject to the provisions of paragraph (2), provided in Jamaica in accordance with the requirements for economy set out in paragraph (3).

(2) The requirement of paragraph (1) relating to the provision of medical treatment in Jamaica shall not apply—

- (a) in relation to any treatment that is, with the approval of the Minister of Health, received outside Jamaica; or
- (b) in relation to any treatment in respect of an accident occurring outside Jamaica to a person who is outside Jamaica and who, at the time of the accident, was in insurable employment by virtue of paragraph (2) or sub-paragraph (a) of paragraph (4) of the First Schedule to the Act.

(3) For the purposes of paragraph (1) the requirements for economy are—

- (a) the treatment shall be so provided as to secure maximum effectiveness at the minimum reasonable cost; and

- (b) unless the Minister, after consultation with the Minister of Health, otherwise directs, pharmaceutical products shall be prescribed, supplied and obtained in accordance with the rules contained in Part 1 of the First Schedule, and if any question arises whether anything, is or is not, for the purposes of Part I of the First Schedule, a pharmaceutical product, the question shall be decided by the Minister after consultation with the Minister of Health.

First
Schedule.

(4) Where prescribed medical treatment—

- (a) is furnished at a prescribed medical institution, the treatment shall be free of charge to the insured person;
- (b) is furnished otherwise than at a prescribed medical institution, any charge for the treatment shall, as respects payment from the Fund, be subject to the limits set out in Part II of the First Schedule.

PART III—Employment Injury Disablement Pension

4.—(1) Subsection (2) of section 16 of the Act shall have effect subject to the provisions of this regulation.

Assess-
ment of
disable-
ment and
prescribed
degrees of
disable-
ment.
Second
Schedule.

(2) Where, as a result of the relevant accident, the claimant has suffered an injury specified in column 1 of the Second Schedule then, unless the case is one in which paragraph (3) applies, the loss of faculty suffered by the claimant as a result of that injury shall be treated, for the purposes of section 16 of the Act, as resulting in the degree of disablement set against such injury in column 2 of the Second Schedule:

Provided that where a person has suffered such injury specified in the Second Schedule which includes any other injury so specified, this paragraph shall apply only to the firstmentioned injury.

(3) Where, as a result of the relevant accident the claimant has suffered an injury specified in the Second Schedule but—

- (a) as a result of that injury the claimant may be expected, having regard to his physical and mental condition at the date of the assessment in respect thereof, to be subject to greater disabilities than would normally be incurred as a result of such an injury; or

- (b) the part of the body by which the injury was sustained would not, apart from that injury, have been normal at the date of the assessment,

the loss of faculty suffered by the claimant as a result of such injury shall be assessed by reference to the degree of disablement set against such injury in column 2 of the Second Schedule subject to such adjustment as may be reasonable in the circumstances of the case.

(4) For the purpose of assessing the extent of the disablement resulting from an injury which is not specified in the Second Schedule, the Medical Board or the Medical Appeal Tribunal, as the case may be, may have such regard as may be appropriate to the provisions of paragraph (2) or paragraph (3).

PART IV—Miscellaneous Provisions

Provisions relating to continuous medical treatment as an in-patient.

5. For the purpose of subsection (8) of section 16 of the Act, a person entitled to a disablement pension who receives medical treatment as an in-patient for two or more distinct periods separated by an interval of less than a week in each case shall be treated as receiving such treatment continuously from the beginning of the first period until the end of the last.

Provisions as to incapacity for work.

6.—(1) Subject to the provisions of paragraph (ii) of the proviso to paragraph (b) of subsection (1) of section 15 of the Act, a day shall not be treated for the purposes of benefit as a day of incapacity for work—

- (a) if it is a day in respect of which the claimant has, in the opinion of an independent authority, failed to prove, in such manner as the minister may require, that he is incapable of work as a result of the relevant injury; or
- (b) if on that day the claimant does any work other than work which is undertaken under medical supervision as part of his treatment while he is a patient in or of a hospital or other medical institution and from which his earnings, if any, are ordinarily less than two dollars a week.

(2) A person who is not incapable of work shall, if an independent authority so determines, be deemed for the purposes of benefit, to be incapable of work as a result of the relevant injury for any day on which he satisfies all the following conditions, namely—

- (a) that he is under medical care in respect of the relevant injury; and
- (b) that it is certified by a medical practitioner in accordance with the National Insurance (Employment Injuries) (Medical Certification) Regulations, 1970, that by reason of the relevant injury he should abstain from work; and
- (c) that he does not work.

(3) A person who, at the commencement of any day is, or thereafter on that day becomes, incapable of work by reason of the relevant injury and does no work on that day, shall, for the purposes of benefit, be deemed to be so incapable of work throughout that day.

(4) A day shall not be treated for the purposes of benefit as a day of incapacity for work if it is a day in respect of which a person has not claimed, is disqualified for receiving, or forfeits employment injury benefit:

Provided that the fact that day has not been so treated as a day of incapacity for work shall be disregarded for the purposes of determining the commencement of and duration of the employment injury benefit period.

7.—(1) For the purposes of the provisions of the Act relating to benefit, gross weekly wages shall be calculated as follows—

Assessment of gross weekly wages.

- (a) where the insured person has, during a continuous period of not less than thirteen weeks immediately preceding the accident, been in the service of the employer in whose service he was at the time of the accident, the insured person's gross weekly wages shall be one-thirteenth of the total gross wages which have fallen due for payment to him by the employer in the last thirteen weeks of that period;
- (b) in other cases, the gross weekly wages shall be seven times the total gross wages earned in respect of the last continuous period of service immediately preceding the accident from the employer in whose service the accident was suffered, divided by the number of days comprising such period;
- (c) where the nature of the employment is casual, or where, by reason of the shortness of time during which the person has been in the employment of his employer, or the absence of proper records of the person's earnings, or the terms of

*THE NATIONAL INSURANCE (EMPLOYMENT INJURIES) (BENEFIT)
REGULATIONS, 1970*

employment, it is impracticable at the time of the accident to apply the method of computation set out in paragraph (b), the insured person's gross weekly wages shall be deemed to be the average weekly amount which, during the thirteen weeks preceding the accident, was being earned by a person in the same grade employed at the same work by the same employer, or, if there is no such person, by a person in the same grade employed in the same class of employment in the same district.

(2) For the purposes of this regulation, a period of service shall be deemed to be continuous which has not been interrupted by a period of absence from work, for which no payment of wages has fallen due, exceeding seven days.

8.—(1) An insurance officer may authorize payment out of the Fund in respect of prescribed medical treatment furnished to an insured person under these Regulations, notwithstanding that adjudication on any claim for benefit by that person is pending or is, or may become, subject to any appeal.

(2) If, upon final adjudication, a claim in respect of which payment has been authorized under paragraph (1) is not accepted the insurance officer shall thereupon refer the matter to the Minister for determination pursuant to paragraph (3).

(3) Upon a reference pursuant to paragraph (2) the Minister shall decide—

- (a) whether the total cost of the medical treatment authorized under paragraph (1) shall be borne by the Fund or, if not, what proportion (if any) thereof shall be borne by the Fund;
- (b) if a proportion only of such cost as aforesaid is to be borne by the Fund, what that proportion shall be and whether the remainder (or, if no part of the cost is being borne by the Fund, the full amount of such cost) shall be recovered from—
 - (i) the employer of the insured person;
 - (ii) the insured person; or
 - (iii) both the employer aforesaid and the insured person jointly and, if so, in what proportions between them respectively.

Payment for prescribed medical treatment in anticipation of adjudication on claims.

(4) Any amount recoverable from an employer or from an insured person pursuant to this regulation may, without prejudice to any other form of recovery, be recovered as if it were an amount of contribution due and owing by such employer or insured person as the case may be.

FIRST SCHEDULE

(Regulation 3)

PART I—*Rules relating to pharmaceutical products*

1. Only pharmaceutical products—
 - (a) mentioned in the British National Formulary; or
 - (b) otherwise approved by the Minister responsible for the subject of health as being prescribable, shall be prescribed.
2. Such products shall be prescribed as economically as possible and only insofar as they are necessary for the proper treatment of the person for whom they are prescribed.
3. If equally good results can be obtained by the use of one of several similar preparations with the same non-proprietary designation, preference shall be given to the least expensive preparation.
4. The quantity of pharmaceutical products prescribed for each person shall be determined in accordance with the presumptive period during which treatment will be needed, and further quantities shall be given only if considered necessary.
5. (1) A person for whom any pharmaceutical product is prescribed shall obtain such product from any public hospital or from any pharmacy.
(2) In paragraph (1)—
“pharmacy” means any pharmacy for the time being registered under the provisions of the Pharmacy Act; and
“public hospital” has the meaning assigned to it by section 2 of the Hospitals (Public) Act.
6. Prescriptions shall be made out only by medical practitioners, and shall be in such form as the Minister, after consultation with the Minister responsible for the subject of health, shall from time to time approve.

PART II—*Limits on payment for prescribed medical treatment not obtained from prescribed medical institutions.*

1. Save as permitted by this Part of this Schedule, no payment for medical treatment not obtained from or through a prescribed medical institution shall be made from the Fund.
2. Where any prescribed medical treatment of any description set out in the first column of the Table hereunder is furnished otherwise than by or through a prescribed medical institution to an insured person under these Regulations, any payment from the Fund in respect thereof shall be subject to the limits specified in relation thereto in the second column of the Table hereunder.

**THE NATIONAL INSURANCE (EMPLOYMENT INJURIES) (BENEFIT)
REGULATIONS, 1970**

FIRST SCHEDULE, contd.

TABLE

Type of Treatment	Maximum Payment therefor from the Fund
1. General Practitioner treatment other than at an approved clinic (including examinations, diagnosis and certification)—	
(a) on patient's visits to the Practitioner's office	\$20.00 for first visit \$15.00 for second visit (see note below)
(b) on domiciliary visits by the Practitioner	\$35.00 for first visit \$30.00 for second visit (see note below)
(c) any minor surgery or prophylaxis or both	\$15.00 per occasion
(d) cleaning, suturing, and dressing of minor lacerations not greater than 2½" long	\$25.00
(e) treating major injuries, i.e., major lacerations, undisplaced fractures needing strapping or splinting of fingers, hands, toes, etc., and removal of finger or toe nails; or treatment of major burns or abrasions	\$40.00
(f) reduction and plastering of fractures and ultimate removal of plaster	\$50.00
2. General Practitioner treatment at approved clinics (including examinations, diagnosis, certification, minor surgery, supply of drugs, and prophylaxis); payments being made to the clinics—	
in respect of each visit by the patient to the clinic	\$10.00 per visit
3. Treatment as an out-patient at a medical institution other than a prescribed medical institution—	
(a) operations (including anaesthesia)—	
Minor	\$100.00 each
Major	\$200.00 each
(b) laboratory tests	\$ 30.00 per series*
(c) X-Ray examinations	\$ 50.00 per series**
(d) X-Ray therapy (including Cobalt, etc)—	
Superficial	\$15.75 per course**
Deep	\$31.50 per course**
(e) Physiotherapy	\$25.00 per course**
(f) Electrocardiograph Encephalograph, etc	\$ 30.00

**THE NATIONAL INSURANCE (EMPLOYMENT INJURIES) (BENEFIT)
REGULATIONS, 1970**

74.01

FIRST SCHEDULE, contd.

TABLE, contd.

<u>Type of Treatment</u>	<u>Maximum Payment therefor from the Fund</u>
4. Treatment as an in-patient at a medical institution other than a prescribed medical institution—	
(a) for all forms of treatment specified in item 3 for out-patients	The same limits on payments as are applicable to out-patients under item 3
(b) for accommodation (including board, lodging and nursing)	\$ 60.00 per day
5. Dental treatment other than at a prescribed medical institution—	
(a) extractions	\$ 10.00 each
(b) prophylaxis and fillings ...	\$ 20.00 each
(c) supply of dentures—	
Partial	\$ 50.00 each
Complete	
6. Supply of pharmaceutical products furnished by a general practitioner or by a medical institution other than a prescribed medical institution or an approved clinic	The price of that product approved by the Minister of Health
7. Medical and surgical appliances obtained other than through a prescribed medical institution	The price of such an appliance approved by the Minister of Health as being the price at which it could have been obtained from or through a prescribed medical institution.

NOTE:

- (1) Not more than two visits (whether at office or domiciliary or pursuant to a reference under paragraph (2) hereof) may be paid for under this item. However, payment for visits in excess of two may be approved after consultation between the doctor and the Medical Adviser to the Ministry of Social Security.
- (2) If, at the first visit, it appears to the Practitioner that the patient requires specialist treatment the patient may be referred to a Consultant (named in the reference) at a prescribed medical institution and, in relation to such a reference, the Consultant may be paid from the Fund a fee of \$40.00.
- (3) Specialist treatment furnished otherwise than in accordance with paragraph (2) hereof may be obtained free of charge by direct reference to the appropriate department of a prescribed medical institution.

For the purposes of this item—

- * "series" means one or more tests or exposures for an approved procedure designed to lead to diagnostic confirmation;
- ** "course" means a course of treatment of up to six treatments recommended by a medical practitioner.

THE NATIONAL INSURANCE (EMPLOYMENT INJURIES) (BENEFIT)
REGULATIONS, 1970

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SECOND SCHEDULE

(Regulation 4)

Prescribed Degrees of Disablement

Description of Injury	Degree of Disablement Per cent.
1. Loss of both hands or amputation at higher sites ...	100
2. Loss of a hand and a foot	100
3. Double amputation through a leg or thigh, or amputation through leg or thigh on one side and loss of other foot	100
4. Loss of sight to such an extent as to render the claimant unable to perform any work for which eyesight is essential	100
5. Very severe facial disfigurement	100
6. Absolute deafness	100
7. Forequarter or hindquarter amputation	100

Amputation Cases—Upper Limbs (either arm)

8. Amputation through shoulder joint	90
9. Amputation below shoulder with stump less than 8 inches from tip of acromion	80
10. Amputation from 8 inches from tip of acromion to less than 4½ inches below tip of olecranon	70
11. Loss of a hand or of the thumb and four fingers of one hand or amputation from 4½ inches below tip of olecranon	30
12. Loss of thumb	40
13. Loss of thumb and its metacarpal bone	50
14. Loss of four fingers of one hand	30
15. Loss of three fingers of one hand	20
16. Loss of two fingers of one hand	20
17. Loss of terminal phalanx of thumb	20

Amputation Cases—Lower Limbs

18. Amputation of both feet resulting in end-bearing stumps ...	90
19. Amputation through both feet proximal to the metatarsophalangeal joint	80
20. Loss of all toes or both feet through the metatarsophalangeal joint	40
21. Loss of all toes of both feet proximal to the proximal interphalangeal joint	30
22. Loss of all toes of both feet distal to the proximal interphalangeal joint	20
23. Amputation at hip	90
24. Amputation below hip with stump not exceeding 5 inches in length measured from tip of great trochanter ...	80
25. Amputation below hip and above knee with stump exceeding 5 inches in length measured from the tip of great trochanter, or at knee not resulting in end bearing stump	70

THE NATIONAL INSURANCE (EMPLOYMENT INJURIES) (BENEFIT)
REGULATIONS, 1970

SECOND SCHEDULE, *contd.*

Description of Injury	Degree of Disablement Per cent.
26. Amputation at knee resulting in end-bearing stump or below knee with stump not exceeding 3½ inches ...	60
27. Amputation below knee with stump exceeding 3½ inches but not exceeding 5 inches ...	50
28. Amputation below knee with stump exceeding 5 inches	40
29. Amputation of one foot resulting in end-bearing stump ...	30
30. Amputation through one foot proximal to the metatarso-phalangeal joint ...	30
31. Loss of all toes of one foot through the metatarso-phalangeal joint ...	20
<i>Other Injuries</i>	
32. Loss of one eye, without complications, the other being normal ...	40
33. Loss of vision of one eye, without complications or disfigurement of eyeball, the other being normal ...	30
Loss of—	
A. Fingers of right or left hand—	
Index Finger—	
34. Whole ...	14
35. Two phalanges ...	11
36. One phalanx ...	9
37. Guillotine amputation of tip without loss of bone ...	5
Middle Finger—	
38. Whole ...	12
39. Two phalanges ...	9
40. One phalanx ...	7
41. Guillotine amputation of tip without loss of bone ...	4
Ring or Little Finger—	
42. Whole ...	7
43. Two phalanges ...	6
44. One phalanx ...	5
45. Guillotine amputation of tip without loss of bone ...	2
B. Toes of right or left foot—	
Great Toe—	
46. Through metatarso-phalangeal joint ...	14
47. Part, with some loss of bone ...	3
Any other toe—	
48. Through metatarso-phalangeal joint ...	3
49. Part, with some loss of bone ...	1
Two toes of one foot excluding great toe—	
50. Through metatarso-phalangeal joint ...	5

[The inclusion of this page is authorized by L.N. 4/1976]

THE NATIONAL INSURANCE (EMPLOYMENT INJURIES) (BENEFIT)
REGULATIONS, 1970

SECOND SCHEDULE, *contd.*

Description of Injury	Degree of Disablement Per cent.
51. Part, with some loss of bone Three toes of one foot, excluding great toe—	2
52. Through metatarso-phalangeal joint	6
53. Part, with some loss of bone Four toes of one foot excluding great toe—	3
54. Through metatarso-phalangeal joint	9
55. Part, with some loss of bone	3

THE NATIONAL INSURANCE ACT

REGULATIONS
(under sections 5 and 50)

THE NATIONAL INSURANCE (PRESCRIBED DISEASES) REGULATIONS, 1970

(Made by the Minister on the 29th day of September, 1970)

L.N. 286/70
Amd.
L.N. 338/73

[1st October, 1970.]

Vide
279/70

PART I—*Preliminary*

1. These Regulations may be cited as the National Insurance (Prescribed Diseases) Regulations, 1970. Citation.

2. In these Regulations, unless the context otherwise requires— Interpre-
tation.

“benefit” means benefit under section 15, 16 or 19 of the Act;

“the Benefit Regulations” means the National Insurance (Employment Injuries) (Benefit) Regulations, 1970;

“the Claims and Payments Regulations” means the National Insurance (Employment Injuries) (Claims and Payments) Regulations, 1970;

“the Determination of Claims and Questions Regulations” means the National Insurance (Determination of Claims and Questions) Regulations, 1966;

“employment” or “insurable employment” excludes service as a member of the Jamaica Defence Force or as a domestic worker;

“local office” means any office appointed by the Minister as a local office for the purposes of the Act or of these Regulations;

“pneumoconiosis” means fibrosis of the lungs caused by selero-genetic mineral dust, and includes silico-tuberculosis where silicosis is an essential factor in causing incapacity for work, loss of faculty or death;

“prescribed disease” means a disease prescribed under Part II, and other expressions have the same meanings as in the Act.

*THE NATIONAL INSURANCE (PRESCRIBED DISEASES)
REGULATIONS, 1970*

PART II—*Prescription of Diseases and Presumption as to their Origin*

Prescription of diseases. Schedule.

3. For the purposes of the Act, each disease set out in the first column of the Schedule is prescribed in relation to all insured persons who have been employed in insurable employment in any occupation set against such disease in the second column of the said Schedule.

Sequelae or resulting conditions.

4. Where a person—

- (a) is insured under the Act against a prescribed disease; and
- (b) is suffering from a condition which, in his case, has resulted from that disease,

the provisions of the Act and of these Regulations shall apply to him as if he were suffering from that disease, whether or not the condition from which he is suffering is itself a prescribed disease.

Presumption.

5.—(1) Where an insured person has developed a disease which is prescribed in relation to him in the Schedule, that disease shall, unless the contrary is proved be presumed to be due to the nature of his insurable employment if that employment was in any occupation set against that disease in the second column of the said Schedule and he was so employed on, or at any time within one month immediately preceding, the date on which, under the subsequent provisions of these Regulations, he is treated as having developed the disease:

Provided that this paragraph shall not apply to pneumoconiosis.

(2) Where an insured person in relation to whom pneumoconiosis is prescribed in paragraph 1 of the Schedule has developed pneumoconiosis, the disease shall, unless the contrary is proved, be presumed to be due to the nature of his insurable employment if he has been employed in any occupation set against the disease in the second column of the said Schedule for a period or periods amounting in the aggregate to not less than two years in employment which either—

- (a) was insurable employment; or
- (b) would have been insurable employment if it had taken place on or after the appointed day.

PART III—*Date of development and recrudescence*

Development of.

6. If on a claim for benefit in respect of a prescribed disease, a person is found to be or to have been suffering from the disease, or to have died as the result thereof, the disease shall, for the purposes

of such claim, be treated as having developed on a date (hereinafter in these Regulations referred to as “the date of development”) determined in accordance with the provisions of regulations 7 and 8.

7.—(1) For the purposes of the first claim in respect of a prescribed disease suffered by an insured person, the date of development shall be determined in accordance with the following provisions of this regulation, and, save as provided in regulation 8, that date shall be treated as the date of development for the purpose of any subsequent claim in respect of the same disease suffered by the same person.

Date of
Develop-
ment.

(2) Where the claim for the purposes of which the date of development is to be determined is—

- (a) a claim for employment injury benefit, the date of development shall be the first day on which the claimant was incapable of work as a result of the disease on and after the 1st day of October, 1970;
- (b) a claim for disablement pension, the date of development shall be the day on which the claimant first suffered from the relevant loss of faculty on or after the 1st day of October, 1970; or
- (c) a claim for employment injury death benefit, the date of development, shall be the date of death.

8.—(1) If a person after having been awarded benefit in respect of a prescribed disease recovers wholly or partially from the attack of the disease, and thereafter suffers from another attack of the same disease, or dies as a result thereof, then—

Recrudes-
cence.

- (a) if the further attack commences or the death occurs during an employment injury benefit period or during a period taken into account by an assessment of disablement relating to such a previous award (either of which periods is hereinafter referred to as a “relevant period”), the disease shall be treated as a recrudescence of the attack to which the relevant period relates, unless it is otherwise determined in the manner referred to in sub-paragraph (b);
- (b) if the further attack commences or the death occurs otherwise than during a relevant period, or if it is determined in the manner provided in Part V that the disease was in fact contracted afresh, it shall be treated as having been so contracted.

THE NATIONAL INSURANCE (PRESCRIBED DISEASES)
REGULATIONS, 1970

(2) For the purpose of paragraph (1), a further attack of a prescribed disease shall be deemed to have commenced on the date which would be treated as the date of development under the provisions of regulation 7 if no previous claim had been made in respect of that disease.

(3) Where, under the foregoing provisions of this regulation, a disease is treated as having been contracted afresh, the provisions of regulation 7 shall be applied as though no previous claim had been made in respect of that disease and the date of development shall be determined accordingly.

(4) Where, under the foregoing provisions of this regulation, a disease is treated as a recrudescence during a period taken into account by a previous assessment of disablement, any assessment of disablement in respect of the recrudescence shall be by way of review of such previous assessment, and such review shall be subject to the provisions of regulation 21.

Transi-
tional
provisions.

9.—(1) If under the foregoing provisions of this Part a date of development has to be determined in respect of a prescribed disease suffered by a person to whom compensation under the Workmen's Compensation Act has been awarded or paid in respect of the same disease and at the date of such claim for benefit, or if it is a claim for employment injury death benefit, at the date of death—

(a) that person is in receipt of half-monthly payments in respect of such compensation; or

(b) any liability or alleged liability for such compensation had been redeemed by payment of a lump sum,

the disease in respect of which the claim is made shall be treated for the purposes of these Regulations as a recrudescence of the disease in respect of which such compensation was awarded or paid and not as having developed on or after the 1st day of October, 1970, unless it is determined in the manner provided in Part V that the disease was in fact contracted afresh.

(2) If it is determined as provided in paragraph (1) that the disease was contracted afresh, or if compensation is not being or has not been paid as provided in sub-paragraph (a) or (b) thereof, the date of development shall be determined in accordance with regulations 6 to 8 as if no compensation under the Workmen's Compensation Act had been paid in respect of that disease.

(3) If, after the date of a claim for benefit in respect of a prescribed disease, the claimant receives a half-monthly payment of compensation in respect of that disease under the Workmen's Compensation Act which he was not receiving at the date of such claim, or if the amount of any such half-monthly payment which he was receiving at that date is increased, then any decision on any question arising in connection with that claim, if given before the date of, or in ignorance of the fact of, the receipt of such half-monthly payment or increased half-monthly payment may be reviewed as if it had been given in ignorance of a material fact, and on such review the question may be decided as if the claimant had been in receipt of such half-monthly payment or increased half-monthly payment at the date of the claim, and the foregoing provisions of this regulation shall apply accordingly.

(4) For the purpose of this regulation, a person shall be deemed to be, or to have been, in receipt of a half-monthly payment of compensation if—

- (a) he is or was in fact receiving such payment; or
- (b) he is or was entitled thereto under an award or agreement made under the Workmen's Compensation Act.

PART IV—Application of the Act, the Claims and Payments Regulations, and the Benefit Regulations

10. In this Part, unless the context otherwise requires, the expression "relevant disease" means, in relation to any claim for benefit in respect of a prescribed disease, the prescribed disease in respect of which benefit is claimed, but does not include any previous or subsequent attack of that disease, suffered by the same person, which under the provisions of Part III is or has been treated—

Definition.

- (a) as having developed on a date other than the date which, under the said provisions, is treated as the date of development for the purposes of the claim under consideration;
- (b) as a recrudescence of a disease for which compensation has been paid or awarded under the Workmen's Compensation Act.

11.—(1) Save in so far as they are expressly varied or excluded by, or are inconsistent with, the provisions of this Part, the Claims and Payments Regulations and the Benefit Regulations shall apply in relation to prescribed diseases as they apply in relation to accidents.

Application of Claims and Payments Regulations and Benefit Regulations and references in those Regulations.

*THE NATIONAL INSURANCE (PRESCRIBED DISEASES)
REGULATIONS, 1970*

(2) Save as provided in this Part or where the context otherwise requires, references in the aforesaid Regulations to accidents shall be construed as references to prescribed diseases, references to the relevant accident shall be construed as references to the relevant disease, and references to the date of the relevant accident shall be construed as references to the date of development of the relevant disease.

Assessment of extent of disablement.

12. For the purposes of paragraph (b) of subsection (2) of section 16 of the Act, an injury or disease other than the relevant disease shall be treated as having been received or contracted before the relevant disease if it was received or contracted on or before the date of development and as having been received or contracted after the relevant disease if it was received or contracted after that date.

Disablement pension not preceded by incapacity for work.

13. Where an insured person not having been incapable of work as a result of the relevant disease claims disablement pension in respect of that disease and under the provisions of Part III a date of development is determined for the purposes of that claim, subsection (4) of section 16 of the Act shall have effect as if for the reference therein to the end of the injury benefit period there was substituted a reference to the date of development.

Provisions as to medical examination.

14. Those provisions of regulation 5 of the Claims and Payments Regulations which relate to the obligations of claimants and beneficiaries to submit themselves to medical examination for the purpose of determining the effect of the relevant accident shall apply also to medical examinations for the purpose of determining whether a claimant or beneficiary is suffering or has suffered from a prescribed disease.

PART V—Determination of Claims and Questions

Application of and references in the Determination of Claims and Questions Regulations.

15. In their application to claims for benefit in respect of a prescribed disease and questions arising in connection with such claims or with any award of benefit thereon, the Determination of Claims and Questions Regulations shall have effect subject to the provisions of these Regulations.

Reference of diagnosis and recrudescence questions for report.

16.—(1) In the following provisions of these Regulations any question arising in connection with a claim for award of employment injury benefit or disablement pension—

- (a) whether a person is suffering or has suffered from a prescribed disease, is referred to as a diagnosis question;
- (b) whether a prescribed disease has been contracted afresh, in any case where that question arises under the provisions of regulation 8 or 9, is referred to as a recrudescence question.

(2) Subject to the provisions of regulation 17, if a diagnosis or recrudescence question arises in any case the insurance officer shall forthwith refer that question for examination and report by one or more medical practitioners.

17.—(1) The insurance officer may determine a diagnosis or recrudescence question without referring it as provided in paragraph (2) of regulation 16 if he is satisfied that such reference can be dispensed with having regard to—

Determination of diagnosis or recrudescence questions without reference for report.

- (a) a medical report signed by a medical practitioner on the staff of a hospital at which the claimant or beneficiary is receiving or has received treatment for a condition due to a prescribed disease, or by a medical officer engaged at the place of work where the claimant or beneficiary is or was employed; or
- (b) the decision of any similar diagnosis or recrudescence question which has been determined on the consideration of any previous claim or question arising in respect of the same disease suffered by the same person (including the date and terms of any medical report on which such previous decision was based and of any medical certificate submitted by the claimant or beneficiary):

Provided that a reference for a report shall not be dispensed with on the grounds specified in sub-paragraph (a) of this paragraph except where a diagnosis question is determined in favour of the claimant or beneficiary or where a recrudescence question arises in connection with a diagnosis question which has been so determined under this regulation.

(2) If the insurance officer is of the opinion that the claim or question submitted to him or any part thereof can be disposed of without determining any diagnosis or recrudescence question, he may make an award or determine that an award cannot be made or may determine the question submitted to him accordingly without referring such diagnosis or recrudescence question for a report as aforesaid or before so referring it.

*THE NATIONAL INSURANCE (PRESCRIBED DISEASES)
REGULATIONS, 1970*

(3) If during a period taken into account by an assessment of disablement relating to an award of disablement pension in respect of a prescribed disease the beneficiary either—

(a) applies for a review of such assessment; or

(b) makes a further claim for disablement pension in respect of a fresh attack of the disease,

any recrudescence question arising on such application or further claim instead of being referred for report as aforesaid shall be referred for decision to a Medical Board together with any disablement question which arises.

(4) The provisions of paragraph (2) of regulation 16 and of the foregoing paragraphs of this regulation shall apply to a local tribunal and the umpire as they apply to an insurance officer with this modification, that a local tribunal or the umpire shall instead of themselves or himself referring a diagnosis or recrudescence question to a medical practitioner in accordance with regulation 16, shall direct the insurance officer to refer it to a medical board in accordance with regulation 18.

Procedure
on receipt
of report.

18.—(1) If a diagnosis or recrudescence question has been referred as provided by regulation 16, the insurance officer shall, subject to the succeeding paragraphs of this regulation, proceed with the consideration of that question as soon as possible after he has received the report of the medical practitioner or practitioners to whom it was so referred.

(2) If the question so referred was a diagnosis question then subject to paragraph (4) the insurance officer may—

(a) himself determine the question in favour of the claimant or beneficiary;

(b) refer the question to a Medical Board for their decision; or

(c) himself determine the question adversely to the claimant or beneficiary.

(3) If the question so referred was a recrudescence question then, subject to paragraphs (4) and (5), the insurance officer—

(a) if he is satisfied having regard to the report as aforesaid that the disease ought to be treated as having been, in fact, contracted afresh, shall so treat it and shall determine the question accordingly;

(b) if he is not so satisfied, shall treat the disease as a recrudescence of the previous attack or as not having developed on or after the 1st day of October, 1970, as the case may require, and shall determine the question accordingly.

(4) If, on consideration of a diagnosis or recrudescence question, the insurance officer is of the opinion that there arises a disablement question, he shall not determine the diagnosis or recrudescence question but shall refer it to the Medical Board together with the disablement question.

(5) If a diagnosis question is referred to a Medical Board under the foregoing provisions of this regulation, or an appeal from a determination by an insurance officer on any such question is made under regulation 19, the insurance officer shall not himself determine any recrudescence question which arises in connection therewith but shall refer it to the Medical Board together with the diagnosis question.

(6) Subject to the provisions of these Regulations, those provisions of regulations 13, 20 and 25 of the Determination of Claims and Questions Regulations which relate to the determination of claims and questions in cases where a reserved question arises, shall apply as if a diagnosis or recrudescence question were a reserved question, and as if references in those regulations to the determination of, or to the review of, the decision of a reserved question included references to the determination of, or to the review of, a diagnosis or recrudescence question under these Regulations.

19.—(1) No appeal to a local tribunal shall lie from the determination of an insurance officer of a diagnosis or a recrudescence question, but, if an insurance officer has determined a diagnosis question adversely to the claimant or beneficiary or has determined a recrudescence question, the claimant or beneficiary shall have the right to appeal thereon to a Medical Board, and shall be notified in writing of the insurance officer's decision, and the reasons therefor, and of his right of appeal.

Notifica-
tion of
decision
and appeal
to Medical
Board.

(2) A claimant or beneficiary who desires to appeal to a Medical Board shall give notice of appeal at a local office within ten days after the claimant or beneficiary has been notified of the insurance officer's decision or within such further period as the Minister may allow.

*THE NATIONAL INSURANCE (PRESCRIBED DISEASES)
REGULATIONS, 1970*

(3) A notice of appeal shall be in writing and shall contain a statement of the grounds upon which the appeal is made.

(4) Every such appeal shall be considered by a Medical Board consisting of three members.

(5) The provisions of regulations 11 and 12 of the Determination of Claims and Questions Regulations shall (with the necessary modifications) apply in relation to such an appeal as if references therein to a Medical Appeal Tribunal were references to a Medical Board.

Decision of Medical Board on any such question to be final.

20. Subject to the provisions of regulation 22, the decision of a Medical Board on a diagnosis or a recrudescence question shall be final, whether such decision was made on an appeal under regulation 19 or otherwise.

Review of previous assessment.

21. Where, by reason of the provisions of paragraph (4) of regulation 8, the decision on a recrudescence question necessitates the review of a previous assessment of disablement, the Medical Board may review such previous assessment accordingly as provided by section 34 of the Act.

Review of decision on diagnosis or recrudescence question.

22.—(1) Any decision on a diagnosis or recrudescence question of an insurance officer or a Medical Board may be reviewed at any time by a Medical Board if they are satisfied by fresh evidence that the decision was given in ignorance of or was based on a mistake as to some material facts.

(2) A question may be raised with a view to review of any decision on a diagnosis or recrudescence question by means of an application in writing to an insurance officer, stating the grounds of the application, and on receipt of such application the insurance officer shall proceed to refer such question to a Medical Board.

(3) Subject to the foregoing provisions of this regulation, a Medical Board may deal with a case on review in any manner in which they would deal with it on an original reference to them.

Procedure in case of references to Medical Board.

23. Save in so far as they are inconsistent with, or are varied by, the foregoing provisions of this Part, the Determination of Claims and Questions Regulations shall apply to a reference to, or determination by, a Medical Board, of a diagnosis or recrudescence question, as they apply in the case of a disablement question, so, however, that—

- (a) if a diagnosis or recrudescence question is determined by a Medical Board to which a disablement question has been referred, and the decision on the diagnosis or recrudescence question enables the case to be decided adversely to the claimant, the Medical Board shall not determine the disablement question;
- (b) regulation 9 of the Determination of Claims and Questions Regulations shall not apply to a diagnosis or recrudescence question.

*THE NATIONAL INSURANCE (PRESCRIBED DISEASES)
REGULATIONS, 1970*

SCHEDULE

(Regulation 3)

<u>Description of disease</u>	<u>Nature of occupation involving exposure to risk</u>
1. Pneumoconiosis.	All occupation involving exposure to the risk concerned.
2. Disease caused by beryllium or its toxic compounds.	"
3. Disease caused by phosphorus or its toxic compounds.	"
4. Disease caused by chrome or its toxic compounds.	"
5. Disease caused by manganese or its toxic compounds.	"
6. Disease caused by arsenic or its toxic compounds.	"
7. Disease caused by mercury or its toxic compounds.	"
8. Disease caused by lead or its toxic compounds.	"
9. Disease caused by carbon bisulphide.	"
10. Disease caused by toxic halogen derivatives of hydrocarbons of the aliphatic series.	"
11. Disease caused by benzene or its toxic homologues.	"
12. Disease caused by nitro- and amidotoxic derivatives of benzene or its homologues.	"
13. Disease caused by ionising radiations.	All occupations involving exposure to the action of ionising radiations.
14. Primary epitheliomatous cancer of the skin caused by tar, pitch, bitumen, mineral oil, or the compounds, products or residues of those substances.	All occupations involving exposure to the risk concerned.
15. Anthrax infection.	Any occupation involving—
	(a) work in connection with animals infected with anthrax;
	(b) handling of animal carcasses or parts of such carcasses including hides, hoofs and horns;
	(c) loading or unloading or transport of merchandise which may have been contaminated by animals or animal carcasses infected with anthrax.

THE NATIONAL INSURANCE ACT

REGULATIONS
(under sections 18, 23, 24, 25 and 50)

THE NATIONAL INSURANCE (EMPLOYMENT INJURIES) (CLAIMS AND
PAYMENTS) REGULATIONS, 1970

(Made by the Minister on the 29th day of September, 1970)

[1st October, 1970.]

L.N. 284/70
Amdts.
L.N. 337/73
13/2008
Vide
L.N. 279/70

PART I—Preliminary

- | | |
|---|------------------------|
| <p>1. These Regulations may be cited as the National Insurance (Employment Injuries) (Claims and Payments) Regulations, 1970.</p> | <p>Citation.</p> |
| <p>2. In these Regulations, unless the context otherwise requires—</p> <p>“appropriate particulars” means the particulars indicated in paragraph (5) of regulation 3;</p> <p>“benefit” means any benefit referred to in subsection (2) of section 9 of the Act;</p> <p>“cash benefit” means any benefit (as hereinbefore defined) other than medical treatment;</p> <p>“the Claims and Payments Regulations” means the National Insurance (Claims and Payments) Regulations, 1966;</p> <p>“death benefit” means employment injury death benefit and includes death grant and any allowance payable under section 19 of the Act;</p> <p>“death grant” means a grant payable under section 19 of the Act;</p> <p>“draft” means any instrument (other than a pension order) that is payable through a post office or bank;</p> <p>“increase”, in relation to disablement pension, means any increase payable under subsection (8) of section 16 of the Act;</p> <p>“local office” means an office appointed by the Minister as a local office for the purpose of the Act or of these Regulations;</p> <p>“pension” means any benefit to which regulation 10 applies;</p> | <p>Interpretation.</p> |

“pensioner” means a person to whom pension is payable and includes a person appointed to receive payment of such pension under subsection (1) of section 25 of the Act;

“pension order” means an order for the payment through a post office of a sum on account of a pension,

and other expressions have the same meanings as in the Act.

PART II—General

Notice of accident.

3.—(1) Every insured person who suffers injury by accident in respect of which medical treatment may be provided or cash benefit may be payable shall give notice of such accident either in writing or orally as soon as is practicable after the happening thereof:

Provided that any such notice required to be given by an insured person may be given by some person acting on his behalf.

(2) Every such notice shall be given to the employer, or if there is more than one employer to one of such employers, or to any foreman or other official under whose supervision the insured person is at the time of the accident or to any person designated for the purpose by the employer, and shall give the appropriate particulars.

(3) Any entry of the appropriate particulars of an accident made in a book kept for that purpose in accordance with the provisions of regulation 4 shall, if made as soon as practicable after the happening of an accident by the insured person or by some other person acting on his behalf, be sufficient notice of the accident for the purpose of this regulation.

(4) In this regulation, the expressions “employer” and “employers” mean, in relation to a person to whom paragraph (1) applies, the employer or employers (as the case may be) of that person at the time of the accident.

(5) In this regulation and regulation 4, the expression “appropriate particulars” means particulars as follows—

- (a) full name, address and occupation of injured person;
- (b) date and time of the accident;
- (c) place where the accident happened;
- (d) cause and nature of injury;
- (e) name, address and occupation of person giving the notice, if other than the injured person.

4.—(1) Every employer shall investigate the circumstances of every accident of which notice is given to him or to his servant or agent in accordance with the provisions of regulation 3, and, if there appears to him to be any discrepancy between the circumstances found by him as the result of his investigation and the circumstances appearing from the notice so given, he shall record the circumstances so found.

Obligations
of
employers.

(2) Where it appears to any person mentioned in paragraph (2) of regulation 3 that an employed person by whom, or on whose behalf, a notice of accident has been given in accordance with the provisions of that regulation—

(a) requires medical treatment by a medical practitioner in respect of the injury caused by the accident; or

(b) is likely, as a result of the injury caused by the accident, to be incapable of work for at least three days,
then, subject to any instructions issued by the Minister, such first mentioned person shall as soon as is practicable make an interim report in a form approved by the Minister and shall give the same to the employed person or to his medical practitioner and send a copy of such report to the nearest local office.

(3) Where an employed person in respect of whom a notice of accident has been given in accordance with the provisions of regulation 3 dies as a result of the injury caused by the accident and the death occurs on the premises of his employer, his employer shall, as soon as is practicable, make an interim report in a form approved by the Minister and send it to the nearest local office.

(4) Every employer who is required to do so by the Minister shall furnish to an officer of the Ministry, within such reasonable period as may be required, such information and particulars as shall be required—

(a) of any accident or alleged accident in respect of which medical treatment may be provided or cash benefit may be payable to, or in respect of the death of, a person employed by him at the time of the accident or alleged accident; or

(b) of the nature of and other relevant circumstances relating to any occupation mentioned in the Schedule to the National Insurance (Prescribed Diseases) Regulations, 1970, in which any person for whom medical treatment may be provided, or, to whom, or in respect of whose death, cash benefit may

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be payable under the Act was, or, is alleged to have been employed by him.

(5) Every owner or occupier (being an employer) of any mine or quarry or any premises to which any of the provisions of the Factories Act applies, and every employer by whom 10 or more persons are normally employed at the same time on or about the same premises in connection with a trade or business carried on by the employer shall, subject to the following provisions of this paragraph—

- (a) keep readily accessible a book or books in a form approved by the Minister in which the appropriate particulars of any accident causing personal injury to a person employed by the employer may be entered by that person or by some other person acting on his behalf; and
- (b) preserve every such book, when it is filled, for the period of three years beginning with the date of the last entry therein.

Obligations of claimants for, and beneficiaries in receipt of, employment injury benefit or disablement pension.

5.—(1) Subject to the following provisions of this regulation every claimant for and every beneficiary in receipt of, employment injury benefit or disablement pension shall comply with every notice given to him by the Minister which requires him either—

- (a) to submit himself to a medical examination by a medical authority for the purpose of determining the effect of the relevant accident or the treatment appropriate to the relevant injury or loss of faculty; or
- (b) to submit himself to such medical treatment for the said injury or loss of faculty as is considered appropriate in his case by the medical practitioner in charge of the case or by any medical authority to whose examination he has submitted himself in accordance with the provisions of paragraph (a).

(2) Every notice given to a claimant or beneficiary requiring him to submit himself to medical examination shall be given in writing and shall specify the time and place of examination and shall not require the claimant or beneficiary to submit himself to examination—

- (a) by a Medical Board before the expiration of the period of six days beginning with the date of the notice or such shorter period as may be reasonable in the circumstances;

(b) in any other case, on a date earlier than the third day after the day on which the notice was sent.

(3) Every claimant and every beneficiary who, in accordance with the foregoing provisions of this regulation, is required to submit himself to a medical examination or to medical treatment shall attend at every such place time as may required.

(4) In this regulation, the expression "medical authority" means a Medical Appeal Tribunal, a Medical Board or any medical practitioner appointed or nominated by the Minister.

PART III—*Claims*

6.—(1) Every claim for benefit shall be made in accordance with the provisions of section 24 of the Act.

Procedure of making and amending claims for benefit.

(2) If a claim is defective at the date of its receipt by the Minister, the Minister may, in his discretion, refer the claim to the claimant, and, if the claim is duly made within one month from the date on which it is so referred, the Minister may treat the claim as if it had been duly made in the first instance.

(3) Any person who has duly made a claim for benefit may amend his claim at any time before a decision has been given thereon by notice in writing sent to the Minister, and any claim so amended may be treated as if it had been made as so amended in the first instance.

7.—(1) The prescribed time for making claims for cash benefit is—

Claims for cash benefit to be made within prescribed time..

(a) in the case of employment injury benefit, six months, from the first day of the period in respect of which the claim is made or, if the claim is in respect of only one day, six months from that day;

(b) in the case of disablement pension or any increase thereto, three months from the first day on which the conditions for the receipt of such benefit or increase are satisfied;

(c) in the case of employment injury death benefit three months from the date of death of the deceased or, in the case of a grant or allowance under section 19 of the Act, from the date when the conditions for the receipt of such grant or allowance are satisfied.

(2) If a person fails to make a claim for benefit within the prescribed time he shall be disqualified for receiving—

- (a) in the case of employment injury benefit, benefit in respect of any day more than ten days before the date when the claim is made;
- (b) in the case of disablement pension, or any increase thereto, and death benefit, benefit in respect of any period more than three months before the date when the claim is made:

Provided that if in any case the claimant proves—

- (i) that on a date earlier than the date on which the claim was made, he was, apart from satisfying the condition of making a claim, entitled to the benefit; and
- (ii) that throughout the period between the earlier date and the date on which the claim was made there was good cause for delay in making such claim,

he shall not be disqualified under this paragraph for receiving any benefit to which he would have been entitled if the claim had been made on the earlier date:

Provided further that no sum shall be paid on account of benefit in respect of any period more than six months before the date on which the claim therefor is duly made.

(3) For the purpose of paragraph (2) a death grant shall be treated as if it were an award comprising periodical payments at the appropriate weekly rate in respect of the number of weeks by which, under the provisions of that section, the weekly rate of employment injury death benefit falls to be multiplied.

Special provisions relating to prospective claims for employment injury benefit.

8.—(1) Where for the purposes of the provisions of the National Insurance (Employment Injuries) (Medical Certification) Regulations, 1970, it has been certified that a person is incapable of work and will continue to be incapable of work for the period specified in the certificate—

- (a) a claim for injury benefit based on the certificate shall, unless in any case the Minister otherwise directs, be treated as if made by that person for that period;
- (b) on any such claim such benefit may be awarded or disallowed for the whole or any part of that period after the date of the

claim but not exceeding twenty-eight days or such shorter period as the Minister may in any case direct;

- (c) if on any such claim such benefit is awarded or disallowed for part only of the period in respect of which the claim is treated as if made, further decisions in accordance with sub-paragraph (b) awarding or disallowing such benefit may be given on the same claim.

(2) Any decision awarding injury benefit under paragraph (1) shall be subject to the condition that the claimant continues to satisfy the requirements for payment thereof during the period to which the award relates and if the said requirements are found not to have been satisfied at some time during the said period the award shall be reviewed.

PART IV—*Payment of Cash Benefit*

9.—(1) Benefit to which this regulation applies shall be paid, in accordance with the award thereof, as soon as is reasonably practicable after such an award has been made, by means of a draft or by such other means as appear to the Minister to be appropriate in the circumstances of any particular case.

Time and manner of payment of employment injury benefit, etc.

(2) This regulation applies to employment injury benefit, increase of disablement pension and death grant.

10.—(1) Subject to the provisions of these Regulations benefit to which this regulation applies shall be payable fortnightly on the basis of one week in arrear and one week in advance by means of pension orders payable in each case to the pensioner at such post office as the Minister, after enquiring of the pensioner, may from time to time determine.

Manner of payment of disablement pension and death benefit.

(2) In every case in which there is an award under which such benefit is payable the Minister shall cause arrangements to be made whereby the pensioner may obtain a book of pension orders and the Minister shall notify the pensioner of the arrangements.

(3) The Minister shall arrange for the issue to every pensioner or a fresh book of pension orders on the expiration of the previous book.

(4) A book of pension orders issued to any person shall remain the property of the Minister.

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(5) Any person having a book of pension orders or any unpaid pension order shall on the cessation of the benefit to which such book or order relates, or when requested by the Minister, deliver such book or order to the Minister or to such person as the Minister may direct.

(6) Notwithstanding the foregoing provisions of this regulation, the Minister may in any particular case or class of case arrange for the payment of benefit to which this regulation applies otherwise than fortnightly on the basis of one week in arrear and one week in advance or otherwise than by means of pension orders payable to the pensioner.

(7) This regulation applies to disablement pension and death benefit other than a death grant.

Time of payment of disablement pension and death benefit, and commencement and cessation of such pension and benefit.

11.—(1) Fortnightly sums on account of death benefit other than death grant shall be payable on a Tuesday and fortnightly sums on account of disablement pension shall be payable on a Wednesday.

(2) The provisions of paragraphs (2) and (3) of regulation 8 of the Claims and Payments Regulations shall apply in relation to benefits payable as aforesaid as they apply in relation to benefits payable under paragraph (1) of that regulation.

Forfeiture of benefit.

12. If any person claiming or in receipt of employment injury benefit or disablement pension—

- (a) without reasonable cause fails to comply with any requirement to submit himself to medical examination for the purpose of determining the effect of the relevant accident or the treatment appropriate to the relevant injury or loss of faculty; or
- (b) without reasonable cause fails to comply with any requirement to submit himself to appropriate medical treatment for the said injury or loss of faculty; or
- (c) in the case of employment injury benefit, behaves in any manner calculated to retard his recovery,

then if an independent authority so decides, that person shall forfeit that benefit or that pension for such period, not exceeding six weeks, as the independent authority may specify.

PART V—Miscellaneous

13. The provisions of regulations 11, 12 and 13, and paragraph (2) of regulation 14, of the Claims and Payments Regulations shall (with the necessary modifications) apply in relation to benefits as defined in regulation 2 of these Regulations as they apply in relation to benefits as defined in regulation 2 of those Regulations, other than funeral grants, sugar workers old age pensions and sugar workers invalidity pensions.

Application of certain provisions of Claims and Payments Regulations.

14.—(1) If any person, without reasonable excuse, fails to comply with any requirement imposed upon him by paragraphs (1), (4) or (5) of regulation 4, he shall be liable, on summary conviction in a Resident Magistrate's Court to a fine not exceeding one hundred dollars or to a term of imprisonment with or without hard labour not exceeding three months or to both such fine and imprisonment.

Breaches.

(2) If any person, without reasonable excuse, fails to comply with any request made by the Minister under paragraph (5) of regulation 10, within one month from the notification to that person of such request, he shall be liable on summary conviction in a Resident Magistrate's Court to a fine not exceeding fifty dollars.

THE NATIONAL INSURANCE ACT

REGULATIONS

(under sections 22, 23, 24 and 50)

THE NATIONAL INSURANCE (MATERNITY BENEFIT) REGULATIONS, 1980

(Made by the Minister on the 1st day of May, 1980)

L.N. 66B/80

[31st December, 1979.]

1. These Regulations may be cited as the National Insurance (Maternity Benefit) Regulations, 1980. Citation.

2. In these Regulations, unless the context otherwise requires— Interpre-

“local office” means any office appointed by the Minister as a local office for the purposes of the Act or of these Regulations;

“stamp card” includes a duplicate stamp card;

“week” means a period of seven days commencing immediately after twelve o'clock midnight on each Sunday and ending at twelve o'clock midnight on the Sunday next following.

3. Every claim for a maternity benefit shall be made in accordance with the provisions of section 24 of the Act. Claims.

4.—(1) A domestic worker who qualifies for a maternity allowance under the Act, may make her claim for such allowance to the local office, at any time, commencing not earlier than eleven weeks before the expected week of confinement and not later than six months from the date of confinement. Claims by domestic workers.

(2) A domestic worker in making a claim referred to in paragraph (1), shall, in order to establish her right to the maternity allowance, furnish to the local office—

(a) her stamp card; and

(b) a certificate as required by subsection (2) of section 20A of the Act or such other information or evidence as the Minister may in the circumstances consider satisfactory.

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Receipt for stamp card.

5. Where the employer is in possession of the stamp card, a domestic worker shall apply to the employer for the return of the stamp card and, on the stamp card being returned to her, give to the employer a receipt for the card.

Issue of stamp card.

6. The domestic worker shall, on resumption of her employment apply to the local office for a stamp card and, on a stamp card being issued to her, deliver it to the employer.

Date from which maternity allowance is payable.

7. A maternity allowance on a weekly basis shall become payable as from the Monday of the week of claim or confinement, as the case may be.

Date and manner of payment.

8. Subject to the provisions of regulation 7, the maternity allowance shall be paid on such date and in such manner as the Minister may direct.

Cessation of maternity allowance.

9. The maternity allowance payable to a domestic worker, shall cease—

- (a) if the worker resumes work before the expiry of the period for which the allowance is payable; or
- (b) in the event of the death of such worker, with effect from the week of such resumption of work or death as the case may be.

Claims by certified exporters.

10. Claims by certified exporters for maternity grants in respect of maternity leave pay paid to their employees, shall be made—

- (a) separately in respect of each such employee;
- (b) not later than six months from the date of such payment; and
- (c) be supported by such evidence as the Minister may from time to time require.

THE NATIONAL INSURANCE ACT

REGULATIONS
(under sections 22, 23, 24, 25 and 50)

THE NATIONAL INSURANCE (CLAIMS AND PAYMENTS) REGULATIONS, 1966

(Made by the Minister on the 17th day of March, 1966)

L.N. 94/66
Amdt.
L.Nn. 110/77
181B/85
42A/2000
26/2008

[4th April, 1966.]

1. These Regulations may be cited as the National Insurance (Claims and Payments) Regulations, 1966.

Citation.

2.—(1) In these Regulations, unless the context otherwise requires—

Interpretation.

“benefits” means a pension or a grant;

“draft” means any instrument (other than a pension order) that is payable through a post office or a bank;

“grant” means any grant mentioned in subsection (1) of section 9 of the Act, and includes a refund of contributions and a lump sum, payable under regulation 9 of the Transitional Regulations;

“pension” means any pension mentioned in subsection (1) of section 9 of the Act, a sugar worker’s old age pension or a sugar worker’s invalidity pension;

“pensioner” means a person to whom any pension is payable and includes a person appointed to receive payment of such pension under subsection (1) of section 25 of the Act;

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“pension order” means an order for the payment through a post office of a sum on account of a pension;

“the Transitional Regulations” means the National Insurance (Sugar Workers Transitional) Regulations, 1966,

and other expressions have the same meanings as in the Act.

(2) For the purposes of the provisions of these Regulations relating to the making of claims, an increase of pension under section 21 of the Act shall be treated as a separate benefit.

Procedure for making and amending claims for benefit.

3.—(1) Every claim for benefit shall be made in accordance with the provisions of section 24 of the Act.

(2) If a claim is defective at the date of its receipt by the Minister, the Minister may, in his discretion, refer the claim to the claimant, and, if the claim is duly made within one month from the date on which it is so referred, the Minister may treat the claim as if it had been duly made in the first instance.

(3) Any person who has duly made a claim for benefit may amend his claim at any time before a decision has been given thereon by notice in writing sent to the Minister, and any claim so amended may be treated as if it had been made as so amended in the first instance.

Interchange with claims for other benefits.

4.—(1) Where it appears that a person who has made a claim for a benefit may be entitled to some other benefit, any such claim may be treated as a claim in the alternative for that other benefit.

(2) In this regulation "benefit" means any benefit under the Act.

4A.—(1) Claims for benefits shall be made—

Period
within
which
claims for
benefits to
be made.

- (a) in the case of a funeral grant, within twelve months from the date of death;
- (b) in the case of any benefit, within three years from the date of title thereto.

(2) If a person fails to make a claim for a benefit within the period specified in paragraph (1) he shall be disqualified from receiving—

- (a) in the case of a benefit payable by way of a grant, any benefit;
- (b) in the case of pension, payment in respect of any period which is more than three months before the date when the claim is made:

Provided that, if in any case the claimant proves—

- (a) that on a date earlier than the date on which the claim was made, he was, apart from satisfying the condition of making a claim, entitled to the benefit; and
- (b) that throughout the period between the earlier date and the date on which the claim was made there was good cause for delay in making such claim,

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he shall not be disqualified under this paragraph from receiving any benefit to which he would have been entitled if the claim had been made on the earlier date:

Provided further that—

- (a) no sum shall be paid by way of a funeral grant if the claim therefor is not duly made within twelve months after the date of title thereto;
- (b) a payment on account of a claim for pension may be made at any time after the date of the claim; and
- (c) no sum shall be paid on account of a pension in respect of any period which is more than three years before the date on which the claim therefor is duly made.

5. [*Deleted but subject to paragraph 3 of L.N. 110/77.*]

Claim in advance.

6. A claim for old age benefit may be made at any time not more than four months before the date on which the claimant will, subject to the fulfilment of the necessary conditions, become entitled to such benefit.

Manner of payment of pensions.

7.—(1) Subject to the provisions of these Regulations, pensions shall be payable fortnightly on the basis of one week in arrear and one week in advance by means of pension orders payable in each case to the pensioner at such post office as the Minister, after enquiring of the pensioner, may from time to time determine.

(2) In every case in which there is an award under which a pension is payable the Minister shall cause arrangements to be made whereby the pensioner may obtain a book of pension orders and the Minister shall notify the pensioner of the arrangements.

(3) The Minister shall arrange for the issue to every pensioner of a fresh book of pension orders on the expiration of the previous book.

(4) A book of pension orders issued to any person shall remain the property of the Minister.

(5) Any person having a book of pension orders or any unpaid pension order shall on the cessation of the pension to which such book or order relates, or when requested by the Minister, deliver such book or order to the Minister or to such person as the Minister may direct.

(6) Notwithstanding the foregoing provisions of this regulation, the Minister may in any particular case or class of case arrange for the payment of pensions otherwise than fortnightly on the basis of one week in arrear and one week in advance or otherwise than by means of pension orders payable to the pensioner.

8.--(1) Fortnightly sums on account of pensions shall be payable on different days of the week as follows—

- (a) in the case of orphan's pension and special child's pension, on Mondays;
- (b) in the case of widow's pension and widower's pension, on Tuesdays;
- (c) in the case of invalidity pension, on Wednesdays;
- (d) in the case of old age pension, on Thursdays; and
- (e) in the case of sugar workers old age and invalidity pensions, on Fridays.

Time of
payment of
pensions and
commence-
ment and
cessation of
pensions.

(2) Where the date on which a pension would, but for this paragraph, commence (or recommence) is a day of the week other than the appropriate day of the week for payment of that type of pension, the pension shall commence (or recommence) as from the beginning of the next such appropriate day.

(3) Where the date on which a pension would, but for this paragraph, cease to be payable is a day of the week other than the day immediately preceding the appropriate day of the week for payment of that type of pension, the pension shall continue to be payable in respect of the days of the week up to, but not including, the next such appropriate day.

Adjustment
in cases of
duplicate
pension
rights.

9.—(1) Payment on account of a further pension shall not be made for any days in respect of which payment on account of another pension payable to the same pensioner at an equal or higher rate has already been made.

(2) Payment on account of a further pension for any days in respect of which payment on account of another pension payable to the same pensioner at a lower rate has already been made shall be restricted to the difference between—

- (a) the rate of the pension on account of which payment has already been made; and
- (b) (i) where there is only one such further pension, the rate of that pension; or
 - (ii) where there are two or more such further pensions payable at the same rate, the rate of one only of such pensions; or
 - (iii) where there are two or more such further pensions payable at different rates, the higher or highest such rate.

(3) In paragraphs (1) and (2) the expressions “pension” and “further pension” include any benefit under the Act, (other than a grant under the Act) not being an orphan’s pension or special child’s pension.

Time and
manner of
paying
grants.

10. Grants shall be paid, in accordance with the award thereof, as soon as is reasonably practicable after the making of the award, by means of a draft or by such other means as appear to the Minister to be appropriate in the circumstances of any particular case.

Extinguish-
ment of
right to
sums pay-
able by
way of
benefit which
are not
obtained
within pre-
scribed time.

11.—(1) Subject to the provisions of this regulation, the right to any sum payable by way of benefit, other than a sum payable by way of funeral grant, shall be extinguished where payment thereof is not obtained within the period of six months from the date on which that sum is receivable in accordance with the following provisions of this regulation:

Provided that in calculating the said period of six months no account shall be taken of—

- (a) any period during which a pension order or draft containing the sum is in the possession of the Minister or any post office at which it is payable, other than a period after written notice has been given that the pension order or draft is available for collection;
- (b) any period during which the Minister has under consideration any representation that a pension order or draft containing the sum has not been received or has been lost, mislaid or stolen;
- (c) any period during which the person concerned is for the time being unable to act by reason of any mental incapacity (subject to the qualification that the total period disregarded on account of such inability to act shall not exceed one year); or
- (d) any period during which the determination of any question as to such extinguishment is pending.

(2) For the purposes of this regulation, a sum payable by way of benefit shall, subject to the provisions of paragraph (3) and of paragraph (3) of regulation 13, be receivable—

- (a) in the case of a sum contained in a pension order, on the date on which the order is due to be paid;
- (b) in the case of a sum contained in a draft—
 - (i) if the draft is sent through the post, on the date on which it would be delivered in the ordinary course of post; and
 - (ii) in any other case, on the date of issue of the draft;
- (c) in the case of a sum not contained in a pension order or draft, where notice is given orally or in writing that the sum is available for collection—
 - (i) if written notice is sent through the post, on the date on which it would be delivered in the ordinary course of post; and

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- (ii) in any other case, on the date of the notice; and
 - (d) in any case to which none of the preceding sub-paragraphs of this paragraph applies, six months (or such longer period as the Minister may determine in the circumstances of any particular case) after the date on which the sum became payable.
- (3) In determining when a sum is receivable under the provisions of paragraph (2), the following provisions shall apply—
- (a) If a person proves that through no fault of his own he did not receive any such pension order or draft or written notice until a date later than the appropriate receivable date determined in accordance with the provisions of paragraph (2), the sum contained in the order or draft or referred to in the notice shall be receivable—
 - (i) on that later date; or
 - (ii) on the date which is six months after the said appropriate receivable date,
whichever is the earlier.
 - (b) If a person proves that through no fault of his own he has not received any such pension order or draft or written notice, the sum contained in the original order or draft or referred to in the notice shall be receivable—
 - (i) on the date determined in accordance with the provisions of paragraph (2) on the basis of the issue of any further order or draft or notice in respect of that sum; or
 - (ii) on the date which is six months after the receivable date determined in accordance with the provisions of paragraph (2) on the basis of the original order or draft or notice,
whichever is the earlier.
 - (c) Subject to the provisions of paragraph (3) of regulation 13 and of sub-paragraph (b), a sum which in accordance with the foregoing provisions of this regulation was receivable on any date, shall remain receivable on that date notwithstanding the issue since that date of a pension order or draft or notice in respect of that sum or any part thereof.

(4) A sum payable by way of benefit shall be receivable in accordance with the foregoing provisions of this regulation, notwithstanding the inability of the person to whom it is payable to give a receipt therefor.

(5) This regulation does not apply in relation to sugar workers old age pensions or sugar workers invalidity pensions.

12.—(1) Every person entitled to benefit and every person by whom or on whose behalf sums payable by way of benefit are receivable shall—

Information to be given when obtaining payment of benefit.

- (a) furnish in such manner and at such times as the Minister may determine such certificates and other documents and such information of facts affecting the right to benefit or to the receipt thereof as the Minister may require and, in particular, shall notify the Minister in writing of any change of circumstances which he might reasonably be expected to know might affect the right to benefit or to the receipt thereof, as soon as reasonably practicable after the occurrence thereof; and
- (b) if the Minister so requires, forward an approved photograph of himself.

(2) In this regulation, "document" includes a photograph and "approved photograph" means a photograph taken and developed by a photographer designated by the Minister for the purposes of this regulation.

13.—(1) On the death of a person who has made a claim for benefit or who is alleged to have been entitled to benefit, or in respect of whose death a funeral grant is alleged to be payable, the Minister may appoint such person as he may think fit to proceed with or to make a claim for the benefit, and the provisions of these Regulations shall apply, subject to the necessary modifications, to any such claim:

Claims and payments on death.

Provided that in the case of a funeral grant a claim may be made by any person specified in the next following paragraph of this regulation.

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(2) Subject to the provisions of paragraph (6), any sum payable by way of benefit which is payable under an award on a claim proceeded with or made under paragraph (1) may be paid or distributed by the Minister to or amongst persons claiming as personal representatives, legatees, next of kin, or creditors of the deceased (or, where the deceased was illegitimate, to or amongst other persons), and the provisions of regulation 11 shall apply to any such payment or distribution:

Provided that—

- (a) the receipt of any such person who has attained the age of eighteen shall be a good discharge to the Minister and the National Insurance Fund for any sum so paid; and
- (b) where the Minister is satisfied that any such sum or part thereof is needed for the benefit of any person under the age of eighteen, he may obtain a good discharge therefor by paying the sum or part thereof to a person over that age (who need not be a person specified in this paragraph) who satisfies the Minister that he will apply the sum so paid for the benefit of the person under the age of eighteen.

(3) Subject as aforesaid, any sum payable by way of benefit to the deceased payment of which he had not obtained at the date of his death, may, unless the right thereto was already extinguished at that date, be paid or distributed to or amongst such persons as are mentioned in paragraph (2), and the provisions of regulation 11 and the proviso to the said paragraph shall apply to any such payment or distribution:

Provided that, for the purpose of paragraph (1) of regulation 11, the period of six months shall be calculated from the date on which the sum was receivable by any such person, and not from the date on which it was receivable by the deceased, and for this purpose the reference in sub-paragraph (d) of paragraph (2) of regulation 11 to the date on which the sum became payable, shall be construed as a reference to the date of the application to the Minister made in accordance with paragraph (6) of this regulation.

(4) In relation to a funeral grant, the reference in paragraph (2) to creditors shall include a reference to any person who gives an

undertaking in writing to pay the whole or part of the deceased's funeral expenses, so, however, that any payment of funeral grant to a person by virtue of this paragraph shall be subject to the condition that if the person fails to carry out such undertaking he shall repay to the National Insurance Fund any funeral grant so paid to him.

(5) Where any person has received an amount by way of funeral grant by virtue of the provisions of this regulation and is entitled to reimbursement of the deceased's funeral expenses out of the deceased's estate, his right to such reimbursement shall be reduced by the amount of the funeral grant received by him.

(6) Paragraphs (2) and (3) shall not apply in any case unless written application for the payment of any such sum is made to the Minister within six months from the date of the deceased's death or within such longer period as the Minister may allow in any particular case.

(7) The Minister may dispense with strict proof of the title of any person claiming in accordance with the provisions of this regulation.

14.—(1) If any person, without reasonable excuse, fails to comply with any request made by the Minister under paragraph (5) of regulation 7, within one month from the notification to that person of such request, he shall be liable on summary conviction in a Resident Magistrate's Court to a fine not exceeding fifty dollars. Breaches.

(2) If any person, without reasonable excuse, fails to notify the Minister in writing of any change of circumstances which he might reasonably be expected to know might affect the right to benefit or to the receipt thereof as soon as reasonably practicable after the occurrence thereof, as required by sub-paragraph (a) of paragraph (1) of regulation 12, he shall be liable on summary conviction in a Resident Magistrate's Court to a fine not exceeding one hundred dollars or to a term of imprisonment with or without hard labour not exceeding three months or to both such fine and imprisonment.

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REGULATIONS, 1966*

Regulations
not to apply
in relation
to existing
claimants
under Sugar
Workers
Transitional
Regulations.

15. The provisions of these Regulations relating to the making of claims shall not apply in relation to claims falling within regulation 4 of the Transitional Regulations.

THE NATIONAL INSURANCE ACT

REGULATIONS

(under sections 29, 31, 33, 35 and 50)

THE NATIONAL INSURANCE (DETERMINATION OF CLAIMS AND
QUESTIONS) REGULATIONS, 1966

(Made by the Minister on the 17th day of March, 1966)

[4th April, 1966.] L.N. 95/66
Amd: L.N. 280/70
339/73

PART I—Preliminary

1.—(1) These Regulations may be cited as the National Insurance (Determination of Claims and Questions) Regulations, 1966. Citation.

(2) In so far as any provision contained in these Regulations relates to any benefit mentioned in subsection (2) of section 9 of the Act, it shall not have effect until the 1st day of October, 1970. Vide L.N. 279/70

2.—(1) In these Regulations, unless the context otherwise requires— Interpretation.

“claimant” means a person who has claimed benefit and includes, for the purposes of Part IV, a person whose right to be excepted from liability to pay or be credited with a contribution is in question;

“grant” means any grant under the Act;

“local office” means any office appointed by the Minister as a local office for the purposes of the Act or of these Regulations;

“question” includes, for the purposes of Part IV of these Regulations, a claim for benefit;

“reserved question” has the meaning assigned to it by paragraph (4) of regulation 13,

and other expressions have the same meanings as in the Act.

(2) Any notice or other document required or authorized to be given or sent to any person under the provisions of these Regulations shall be deemed to have been given or sent if it was sent by post to that person at his ordinary or last known address.

(3) Any power given in these Regulations to extend the period during which anything is required to be done under these Regulations or to dispense with any of the requirements thereof may be exercised in any case, notwithstanding that the period during which the thing is required to be done has expired.

PART II—Determination of Questions by Minister

Questions for determination by the Minister.

3. The following questions arising under or in connection with the Act shall be determined by the Minister—

- (a) whether a person is or was an insured person;
- (b) whether a person is or was employed in insurable employment;
- (c) as to the class of insured persons in which a person is to be included;
- (d) whether the contribution conditions for any benefit are satisfied, or any question otherwise relating to a person's contributions;
- (e) who is or was liable for payment of contributions as the employer of any insured person.

Procedure for determination of questions by the Minister.

4.—(1) Any person desiring to obtain the decision of the Minister on any question mentioned in regulation 3 shall deliver or send to the Minister an application for the purpose in writing in a form approved by him, and shall furnish such particulars as the Minister may require for the purpose of the consideration and determination of any such question.

(2) The Minister shall take steps to bring any such application and any such particulars to the notice of any person appearing to him to be interested therein and to obtain from such person such particulars within such time and in such form as he considers reasonably necessary for the proper determination of the question.

(3) The Minister shall give notice in writing of his decision to the applicant and to any persons appearing to him to be interested therein and may publish his decision in such manner as he thinks fit.

Appeals etc., to the Court of Appeal.

5.—(1) Any question of law arising in connection with the determination by the Minister of any such question as is mentioned in regulation 3 may, if the Minister thinks fit, be referred for decision to the Court of Appeal.

(2) In the event of the Minister determining in accordance with the preceding paragraph of this regulation to refer any question of law to the Court of Appeal, he shall send notice in writing of his intention so to do to the applicant and to any other person appearing to him to be interested therein.

(3) Any person aggrieved by the decision of the Minister on any question of law which is not referred in accordance with paragraph (1) may, in accordance with rules of court made under the Judicature (Rules of Court) Act, appeal from that decision to the Court of Appeal, and the applicant and any other person appearing to the Minister to be interested shall, on request, be furnished with such a statement of the grounds of the decision as will enable him to determine whether any question of law has arisen upon which he may wish to appeal.

(4) Without prejudice to the rights of any other person, the Minister shall be entitled to appear and be heard on any such reference or appeal.

6.—(1) The Minister may, on new facts being brought to his notice or if he is satisfied that the decision was given in ignorance of, or was based on a mistake as to, some material fact, review a decision given by him in accordance with this Part of these Regulations:

Review of
decisions
by the
Minister.

Provided that any such decision shall not be reviewed while an appeal is pending against the decision of the Minister on a question of law arising in connection therewith, or before the time for appealing has expired.

(2) The provisions of regulation 5 shall apply in relation to a decision on review as they apply to the original determination or decision.

PART III—Disablement Questions

7.—(1) Reasonable notice of the time and place at which a Medical Board will sit for the consideration of any case shall be given to the claimant and if, after such notice has been given, the claimant should fail to appear at the sitting of the Board, the Board shall not proceed to determine the questions referred to them without his consent.

Procedure
of Medical
Boards.

(2) No person shall be entitled to be present during the consideration of any question by a Medical Board other than the claimant and

THE NATIONAL INSURANCE (DETERMINATION OF CLAIMS AND QUESTIONS) REGULATIONS, 1966

any other person whom the Medical Board may, with the consent of the claimant, allow to be present as being a person who, in their opinion, is likely to assist them in the determination of that question.

(3) A Medical Board shall not determine any question referred to them if—

- (a) any member is unable to be present at the consideration of such question; or
- (b) the Board, being a Board consisting of two members, are unable to reach a unanimous decision on any such question.

(4) In any case in which, by reason of the provisions of paragraph (3), a Medical Board are unable to determine any question which has been referred to them, the reference to that Board shall be revoked and the questions arising in that case shall forthwith be referred to another Medical Board:

Provided that, in a case to which sub-paragraph (b) of paragraph (3) relates, the reference shall be to a Medical Board consisting of three members whose decision, if not unanimous, shall be that of the majority of such members.

Notice of
decision of
Medical
Board.

8.—(1) A Medical Board shall in each case record their decision in writing in such form as may from time to time be approved by the Minister and shall include in such record (which shall be signed by all the members of the Board)—

- (a) a statement of their findings on all questions of fact material to such decision; and
- (b) in a case in which the decision of a Medical Board consisting of three persons was not unanimous, a statement that one of the members dissented and of the reasons given by him for so dissenting.

(2) As soon as may be practicable, the claimant shall be sent written notice of the decision of a Medical Board, and such notice shall be in such form as may from time to time be approved by the Minister and shall contain a summary of the said findings of the Board, including, where the decision was not unanimous, a statement that one of the members dissented and of the reasons given by him for so dissenting.

9.—(1) For the purposes of the provisions of section 35 of the Act, the disablement questions arising in any case may, with the consent of the claimant, be referred to a single medical practitioner appointed by the Minister instead of to a Medical Board.

Reference to a single medical practitioner.

(2) The provisions of paragraphs (1) and (2) of regulation 7, and of regulation 8, shall apply to the proceedings on a reference to a single medical practitioner in accordance with the preceding paragraph, and the provisions of regulation 10 shall apply to his decision, as if such practitioner were a Medical Board constituted in accordance with the Act or the chairman of such a Board, as the case may be.

(3) If a medical practitioner to whom any questions have been referred in accordance with paragraph (1) is of the opinion that a final assessment can be made but that the period which should be taken into account by such assessment would exceed six months, he shall, in lieu of himself determining such questions, make a report in writing stating his opinion and the grounds therefor, and thereupon the reference to the single medical practitioner shall be revoked and the disablement questions arising in the case shall be referred to a Medical Board constituted under the Act, to whom a copy of such report shall be made available.

10.—(1) An appeal by a claimant against a decision of a Medical Board shall be brought by giving notice of appeal at a local office within three months after notice of that decision has been given in accordance with regulation 8 or within such further period as the chairman of the Medical Appeal Tribunal may allow.

Procedure for appeals to Medical Appeal Tribunal.

(2) A notice of appeal shall be in writing and shall contain a statement of the grounds upon which the appeal is made.

(3) For the purpose of securing the reference of a case to a Medical Appeal Tribunal in accordance with subsection (3) of section 33 of the Act where the Minister is of the opinion that a decision of a Medical Board ought to be considered by a Medical Appeal Tribunal, the Minister may notify the insurance officer of his opinion in that respect within three months or such longer period as the chairman of the Tribunal may allow after the date of that decision.

11.—(1) For the purpose of determining any case referred to them, a Medical Appeal Tribunal shall hold a hearing which shall be in public, except in so far as the chairman of the Tribunal may for special reasons otherwise direct.

Hearings of appeals by Medical Appeal Tribunals.

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(2) Reasonable notice of the time and place at which a Medical Appeal Tribunal will hear a case shall be given to the claimant and to the Minister, and except with the consent of the claimant, the Tribunal shall not proceed with the hearing unless such notice has been given.

(3) If a claimant to whom notice of hearing has been duly given in accordance with paragraph (2) should fail to appear either in person or by representative at such hearing, and has not given a reasonable explanation for his absence, the Tribunal may proceed to determine the case or may give such directions with a view to the determination of the case as they may think proper.

(4) The following persons shall be entitled to be heard at the hearing of any case by a Medical Appeal Tribunal—

- (a) the claimant;
- (b) the Minister.

(5) The claimant or the Minister may be represented at the hearing by some other person, whether having professional qualifications or not, and for the purpose of the hearing such representative shall have all the rights to which the person whom he represents is entitled under these Regulations.

(6) Any person who exercises the right conferred by this regulation to be heard at the hearing may call witnesses and shall be given an opportunity of putting questions directly to any witnesses called at the hearing.

(7) For the purpose of arriving at their decision, or discussing any question of procedure, a Medical Appeal Tribunal may, notwithstanding anything in this regulation, order all persons not being members of the Tribunal, other than a person acting as clerk to the Tribunal, to withdraw from the sitting of the Tribunal.

12.—(1) A Medical Appeal Tribunal shall in each case record their decision in writing in such form as may from time to time be approved by the Minister, and shall include in such record, which shall be signed by all the members of the Tribunal, a statement of the reasons for their decision, including their findings on all questions of fact material thereto.

Decision of
Medical
Appeal
Tribunal.

(2) Where the Tribunal are unable to reach a unanimous decision on any case, the decision of the majority of the members thereof shall be the decision of the Tribunal.

(3) As soon as may be practicable the claimant shall be sent written notice of the decision of the Tribunal, and such notice shall be in such form as may from time to time be approved by the Minister and shall contain a summary of the record of that decision made in accordance with paragraph (1).

PART IV—*Determination of Claims and Questions by an Independent Authority*

13.—(1) The following questions, that is to say—

- (a) any question as to the right to benefit; and
- (b) any other question arising under or in connection with the Act,

not being a reserved question, shall be submitted to one of the insurance officers, who shall consider the question, and, so far as practicable, dispose of it in accordance with these Regulations within fourteen days from the date when it was submitted to him, so, however, that nothing in this regulation shall preclude the reference by an insurance office to a medical practitioner, for examination and report, any question not being a reserved question.

(2) If on consideration of a question the insurance officer is of opinion that no reserved question arises then—

- (a) if he is satisfied that the question ought to be determined wholly in favour of the claimant, he may determine the question accordingly;
- (b) in so far as he is not so satisfied, he may either—
 - (i) refer the question (so far as is practicable within fourteen days from the date on which it was submitted to him) to a local tribunal for its decision; or
 - (ii) himself determine the question in whole or in part adversely to the claimant.

(3) Where the insurance officer refers a question to a local tribunal in accordance with paragraph (2), notice in writing of such reference shall be given to the claimant.

Submission
of questions
to insurance
officers.

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(4) In these Regulations "reserved question" means a disablement question, any question mentioned in regulation 3, and any question or claim mentioned in regulation 27.

Appeals to local tribunals.

14.—(1) If an insurance officer has determined a question in whole or in part adversely to the claimant, the claimant shall, subject to the provisions of this regulation, have a right of appeal in respect of the decision to the local tribunal and shall be notified in writing of the decision and the reasons therefor and of his right of appeal therefrom:

Provided that where a reserved question has arisen in connection with the decision of the insurance officer and has been determined by the proper authority, and the insurance officer certifies that the decision on that question is the sole ground of his decision, no appeal shall lie without the leave of the chairman of the local tribunal.

(2) An appeal against a decision of an insurance officer must be brought by giving notice of appeal at a local office within two months after the date of that decision or within such further time, not exceeding four months, as the chairman of the local tribunal may allow.

(3) A notice of appeal shall be in writing and shall contain a statement of the grounds upon which the appeal is made.

Time and place of hearings before local tribunals.

15.—(1) Reasonable notice of the time and place of the hearing before the local tribunal shall be given to the claimant, and to any other person who may appear to the chairman of the tribunal to be interested, and, except with the consent of the claimant, the local tribunal shall not proceed with the hearing of any case unless such notice has been given.

(2) If a claimant or other person to whom notice of hearing has been duly given in accordance with these Regulations should fail to appear either in person or by representative at such hearing and has not given a reasonable explanation for his absence, the tribunal may proceed to determine the case, or may give such directions with a view to the determination of the case as they may think proper.

Hearings before local tribunals.

16.—(1) Every hearing by a local tribunal shall be in public except in so far as the chairman of the tribunal may otherwise direct if he is of the opinion that intimate personal or financial circumstances may have to be disclosed or that considerations of public security are involved.

(2) The following persons shall be entitled to be heard at the hearing of any case by a local tribunal—

- (a) the claimant;
- (b) the insurance officer;
- (c) the Minister,

and any person appearing to the tribunal to be interested shall have the right to be present notwithstanding that the hearing of the case is not in public.

(3) Any person who by virtue of the provisions of this regulation has the right to be heard at the hearing of a case by a local tribunal may be represented at the hearing by some other person whether having professional qualifications or not and, for the purposes of the hearing, any such representative shall have all the rights to which the person whom he represents is entitled under these Regulations.

(4) Any person who exercises the right conferred by this regulation to be heard at the hearing may call witnesses and shall be given an opportunity of putting questions directly to any witnesses called at the hearing.

(5) For the purpose of arriving at their decision, or discussing any question of procedure, a local tribunal may, notwithstanding anything in this regulation, order all persons not being members of the tribunal, other than a person acting as clerk to the tribunal, to withdraw from the sitting of the tribunal.

(6) In such cases as the chairman of a local tribunal may determine, a medical practitioner may sit with that tribunal as an assessor, but an assessor sitting with a local tribunal as aforesaid shall not take any part in the determination or decision of that tribunal except in an advisory capacity.

17.—(1) A local tribunal shall—

- (a) record in writing in such form as may from time to time be approved by the Minister all their decisions (whether on an appeal or on a reference from an insurance officer); and
- (b) include in the record of every decision (which shall be signed by all the members of the tribunal) a statement of the reasons for their decision including their findings on all questions of fact material thereto.

Decisions
of local
tribunals.

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(2) Where the tribunal are unable to reach a unanimous decision on any case, the decision of the majority of the members thereof shall be the decision of the tribunal.

(3) As soon as may be practicable, a copy of the record of their decision made in accordance with this regulation shall be sent to the claimant and to the insurance officer and to any other person who appears to the local tribunal to be interested, and, if the decision of the tribunal is adverse to the claimant, he shall be informed of the conditions governing appeals to an umpire.

Appeals
to umpire
from local
tribunals.

18.—(1) Subject as hereinafter provided, an appeal shall lie to an umpire from any decision of a local tribunal at the instance of—

- (a) an insurance officer; or
- (b) the claimant.

(2) An appeal to an umpire must be brought within three months from the date of the decision of the local tribunal, or such further period as the umpire may in any case for special reasons allow, and such an appeal shall be brought by giving notice in writing (in a form approved by the Minister) stating the grounds of the appeal—

- (a) in the case of an appeal by the insurance officer, to the claimant; and
- (b) in the case of an appeal by the claimant, at a local office.

Procedure
before
umpire.

19.—(1) If the claimant or the insurance officer makes a request to the umpire for an oral hearing of the appeal, the umpire shall grant such request, unless, after considering the record of the case and the reasons put forward in the request for the hearing, he is satisfied that the appeal can properly be determined without a hearing, in which event he shall so inform the claimant and the insurance officer in writing and may proceed to determine the case without a hearing.

(2) If, in accordance with the provisions of the last foregoing paragraph, a request for an oral hearing has been granted, or if, notwithstanding that no request has been made, the umpire is otherwise satisfied that an oral hearing is desirable, reasonable notice of the time and place of the hearing shall be given to the claimant and the insurance officer, and, if he thinks fit, to any other person appearing to the umpire to be interested.

(3) In any case in which an oral hearing of an appeal is held such hearing shall be in public except in so far as the umpire may otherwise direct if he is of the opinion that intimate personal or financial circumstances may have to be disclosed or that considerations of public security are involved.

(4) Any person to whom notice of the hearing has been given shall be entitled to be heard at the hearing and to be represented thereat by some other person, whether having professional qualifications or not and for the purpose of the hearing such representative shall have all the rights to which the person whom he represents is entitled under these Regulations.

(5) Any person who exercises the right conferred by this regulation to be heard at the hearing may, with the leave of the umpire, call witnesses and shall be given an opportunity of putting questions directly to any witnesses called at the hearing.

(6) If any person to whom notice of the hearing has been duly given should fail to appear either in person or by representative at the hearing, and has not given a reasonable explanation for his absence the umpire may proceed to determine the appeal or may give such directions with a view to the determination of the appeal as he thinks proper.

(7) If it appears to the umpire that any appeal which is made to him involves a question of law of special difficulty, he may direct that the appeal shall be dealt with, not by an umpire alone, but by a tribunal consisting of any three umpires, and if the decision of any such tribunal is not unanimous, the decision of the majority shall be the decision of the tribunal.

(8) If it appears to the umpire that any appeal which is made to him involves a question of fact of special difficulty, the umpire may direct that in dealing with the appeal or any part thereof he shall have the assistance of an assessor or assessors specially qualified.

(9) The umpire may, if he thinks fit, refer any question arising for his decision to a registered medical practitioner for examination and report.

(10) The decision of the umpire shall be in writing and signed by him, and, as soon as may be practicable, copies thereof shall be sent, simultaneously, one to the claimant and one to the Minister.

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Review of decisions of independent authorities.

20.—(1) Any decision under this Part of these Regulations of an insurance officer, a local tribunal or an umpire may be reviewed at any time by an insurance officer, or on a reference from an insurance officer, by a local tribunal, if—

- (a) he or they is or are satisfied, but not without fresh evidence in the case of a decision of an umpire, that the decision was given in ignorance of, or was based on a mistake as to some material fact; or
- (b) there has been any relevant change of circumstances since the decision was given; or
- (c) the decision was based on the decision of any reserved question and the decision of that question has been revised.

(2) A question may be raised with a view to such a review by means of an application in writing to an insurance officer, stating the grounds of the application.

(3) On receipt of any such application, the insurance officer shall proceed to deal with or refer any question arising thereon in accordance with the Act and these Regulations:

Provided that where, in the opinion of the insurance officer, such application raises a question as to the review of a decision of a Medical Board or a Medical Appeal Tribunal and, by virtue of subsection (3) of section 34 of the Act, such decision may not be reviewed without the leave of a Medical Appeal Tribunal, the insurance officer shall submit the application to a Medical Appeal Tribunal so that such Tribunal may consider whether such leave shall be granted, and shall not refer the question to a Medical Board with a view to a review of that decision unless the Medical Appeal Tribunal grant such leave.

(4) Any decision given on a review under this regulation, and any refusal to review a decision under this regulation, shall be subject to appeal in like manner as an original decision, and the provisions of this Part of these Regulations shall, subject to the necessary modifications, apply in relation to any decision given on a review as they apply to the original decision of a question.

Interim payments.

21.—(1) Subject to the provisions of this regulation and regulation 24, benefit shall be payable in accordance with an award, notwithstanding that an appeal against the award is pending.

(2) Where an appeal to an umpire from an award of a local tribunal is made by an insurance officer within one month of the date on which the award was given, payment of the benefit (or that part of the benefit) to which the appeal relates shall, in the case of old age pension, widow's or widower's pension, orphan's pension and special child's pension be suspended until the appeal has been determined.

(3) So much of a disablement pension as is awarded in respect of a period before the date of award shall not be payable until after the expiration of the period of twenty-one days from that date, and if before the expiration of that period an appeal from the award or from a decision on which the award was based is brought, until after the decision on the appeal is given:

Provided that—

(a) this paragraph shall not apply to an award made by an insurance officer of disablement pension based on a decision of a Medical Appeal Tribunal or to any award of disablement pension made by an umpire;

(b) payment of benefit shall not be suspended under the provisions of this paragraph if in any case or class of case the Minister so directs.

(4) In paragraph (3), the expression "appeal" shall be construed as including a reference of the decision of a Medical Board to a Medical Appeal Tribunal.

(5) Where it appears to the Minister that a question has arisen whether—

(a) the conditions for the receipt of benefit payable under an award are or were fulfilled; or

(b) an award of benefit ought to be revised in accordance with these Regulations,

he may direct that payment of the benefit shall be suspended in whole or in part until that question has been determined.

22.—(1) Where on review a decision is revised so as to make benefit payable, or to increase the rate of benefit, the decision on review shall have effect as from the date of the application for the review:

Review of decisions involving payment or increase of benefits other than grants.

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Provided that, subject to paragraph (2), if in any case the claimant proves that on a date earlier than the date on which the application for the review was made, he was (apart from satisfying the condition of making a claim therefor) entitled to benefit, he shall not be disqualified by virtue of the foregoing provisions of this paragraph for receiving any benefit to which he would have been entitled in respect of the period between the earlier date and the date on which the application for the review was made.

(2) Notwithstanding anything contained in this regulation, the following provisions shall have effect—

- (a) the proviso to paragraph (1) shall apply subject to the condition that no sum on account of benefit shall be paid to any person in respect of any part of the period referred to in that proviso earlier than six months before the date on which the application for the review was made;
- (b) the decision on review shall not in any event have effect for any period before the date on which the original decision took effect or would have taken effect if an award had been made;
- (c) if the said decision on review was based on a material change of circumstances subsequent to the date from which the original decision took effect, it shall not have effect for any period before the date declared by the insurance officer, the local tribunal or the umpire, as the case may be, to be the date on which such material change of circumstances took place.

(3) For the purpose of this regulation, where a decision is reviewed at the instance of an insurance officer under paragraph (1) of regulation 20, the date on which it was first decided by the insurance officer that the decision should be reviewed shall be deemed to be the date of the application for the review.

(4) In this regulation "benefit" does not include a grant.

Review of decisions involving payment of grants.

23.—(1) A decision shall not be reviewed so as to make a grant payable unless the claimant proves that the application for review was made not later than four years from the date of the decision.

(2) The provisions of paragraph (3) of regulation 22 shall apply in the application of paragraph (1) of this regulation as they apply in the application of paragraphs (1) and (2) of that regulation.

24.—(1) Where a grant is awarded by a decision on review or appeal in lieu of a pension previously awarded, such decision shall direct that any payments made on account of such pension shall, in so far as they do not exceed the amount of the grant, be treated as being made on account of the grant.

Adjustment
of benefit.

(2) Where a pension is awarded by a decision on review or appeal in lieu of another kind of benefit previously awarded, that decision shall, as respects any payments made on account of the benefit previously awarded—

- (a) direct that in so far as the amount thereof does not exceed the amount of any arrears payable by way of the pension so awarded, such payments shall be treated as having been made on account of such arrears; and
- (b) to the extent by which the amount thereof exceeds the amount of the said arrears, direct that such payments shall (except in so far as they are required to be repaid under this regulation) be treated as having been made on account of sums becoming payable after the date of the decision on review or appeal by way of the pension awarded thereby:

Provided that where the benefit originally awarded was a disablement grant, a direction under this paragraph shall relate only to so much of the amount paid on account thereof as remains after deducting therefrom in respect of each week between the date as on which it was awarded and the date as from which the pension awarded in lieu of such grant becomes payable, a sum equal to the weekly rate of such pension.

(3) Where on review or appeal a decision is revised, or is reversed or varied so as to make benefit not payable or to reduce benefit, the decision given on the review or appeal shall require repayment to the National Insurance Fund of any benefit in pursuance of the original decision to the extent to which it—

- (a) would not have been payable if the decision on the review or appeal had been given in the first instance; and
- (b) is not directed to be treated as paid on account of the benefit awarded by the decision on review or appeal.

(4) Where—

- (a) on appeal against an award of benefit by way of a pension, a decision is reversed or varied, so that such benefit is not payable or is payable at a less rate; and

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(b) on review, the decision on that appeal is revised so as to make such benefit payable or payable at a higher rate from a date before the decision on appeal, any benefit paid in pursuance of the award before the decision on appeal shall, to the extent to which it would not have been payable if the decision on appeal had been given in the first instance, be treated as having been paid on account of any benefit made payable for the same period by the decision on review, except in so far as it has, in pursuance of the decision on appeal, been repaid or treated as paid on account of the benefit awarded by that decision.

(5) Where, in accordance with a decision given on a review or appeal, any benefit is required to be repaid to the National Insurance Fund then, without prejudice to any other method of recovery, such benefit shall be recoverable by deduction from any benefit then or thereafter payable to the person by whom it is to be repaid or from any benefit payable on his death.

(6) In this regulation "pension" includes any benefit other than a grant.

Reference of reserved questions.

25.—(1) If on consideration of a question an insurance officer is of opinion that a reserved question arises he shall—

- (a) refer the reserved question for determination to the authority authorized to determine the same; and
- (b) deal with any other questions as if the reserved question had not arisen:

Provided that the insurance officer may—

- (i) postpone the reference of or dealing with any question until after other questions have been determined;
- (ii) in cases where the determination of any question disposes of a claim or any part thereof, make an award, or decide that an award cannot be made, as to the claim or that part thereof without referring or dealing with, or before the determination of, any other question.

(2) The foregoing provisions of this regulation shall apply to a local tribunal and an umpire as they apply to the insurance officer, except that a local tribunal or an umpire, instead of themselves

or himself referring a question for determination in accordance with sub-paragraph (a) of paragraph (1), shall require it to be so referred by the insurance officer.

PART V—Miscellaneous

26.—(1) Where in any proceedings—

- (a) for an offence under the Act; or
- (b) involving any question as to the payment of contributions under the Act; or
- (c) for the recovery of any sums due to the National Insurance Fund,

Decisions to be conclusive for purpose of proceedings under Act, etc.

any question arises which under the Act or the Regulations is to be determined by the Minister, an independent authority, a Medical Board, a Medical Appeal Tribunal or a single medical practitioner, the decision by the Minister or by such authority, Board, Tribunal or practitioner shall, unless an appeal under these Regulations is pending or the time for so appealing has not expired, be conclusive for the purpose of those proceedings.

(2) If any such decision under paragraph (1) has not been obtained and the decision of the question is necessary for the determination of the proceedings, the question shall be referred to the Minister, an insurance officer or a Medical Board, as the case may require, in accordance with the procedure (modified where necessary) prescribed in these Regulations.

(3) Where any such appeal as is mentioned in paragraph (1) is pending, or the time for so appealing has not expired, or where any question has been referred under paragraph (2), the court dealing with the case shall adjourn the proceedings until such time as a final decision upon the question has been obtained.

27. Subject to the provisions of the National Insurance (Sugar Workers Transitional) Regulations, 1966, these Regulations do not apply in relation to the determination of questions arising under or in connection with the said National Insurance (Sugar Workers Transitional) Regulations, 1966 or of claims falling within regulation 4 thereof.

Exclusion of Regulations.

THE NATIONAL INSURANCE ACT

ORDER
(under section 43)

THE NATIONAL INSURANCE (RECIPROCAL CONVENTION) (UNITED KINGDOM
OF GREAT BRITAIN AND NORTHERN IRELAND)

ORDER, 1999.

(Made by the Minister on the 14th day of July, 1999)

L. N. 109/99

[14th July, 1999]

1. This Order may be cited as the National Insurance (Reciprocal Convention) (United Kingdom of Great Britain and Northern Ireland) Order, 1999.

2. The provisions contained in the Convention set out in the Schedule shall have full force and effect, so far as they relate to Jamaica and provide for reciprocity with the Government of the United Kingdom of Great Britain and Northern Ireland in the matters mentioned in section 43 of the Act; and the Act and the Regulations made thereunder shall have effect subject to such modifications as may be required therein for the purpose of giving effect to such provisions.

SCHEDULE

CONVENTION

BETWEEN THE GOVERNMENT OF JAMAICA

AND

THE GOVERNMENT OF THE UNITED KINGDOM OF GREAT
BRITAIN

AND

NORTHERN IRELAND

ON

SOCIAL SECURITY

The Government of Jamaica and the Government of the United Kingdom of Great Britain and Northern Ireland;

Having established reciprocity in the field of social security by means of the Agreement which was signed on their behalf at London on 20th September, 1972;

Wishing to consolidate the above Agreement and its extension and modification into a single document;

Wishing to extend and modify the scope of that reciprocity, including extension to the States of Jersey and to take account of changes in their legislation;

Have agreed as follow:

SCHEDULE

PART I—*General Provisions*

ARTICLE 1

Definitions

1. For the purpose of this Convention the following definitions apply, except where the context otherwise requires:

“additional pension” payable under the legislation of Great Britain, Northern Ireland or the Isle of Man means any additional pension based on the payment of insurance contributions above the level required for entitlement to basic pension;

“benefits for industrial accidents and industrial diseases” means—

- (i) a pension or benefit payable to a person for loss of physical or mental faculty as a result of an industrial accident or an industrial disease arising out of, and in the course of, employed earner’s employment under the legislation of Great Britain, Northern Ireland or the Isle of Man, and accident benefit payable under the legislation of Jersey, or
- (ii) a benefit payable to a person for personal injury or for loss of physical or mental faculty as a result of an accident arising out of, and in the course of, an insured person’s employment or self-employment, or an industrial disease under the legislation of Guernsey, or
- (iii) a benefit attributable to injury or disease in employment payable under the legislation of Jamaica;

“Category A retirement pension” means either, or both, a basic retirement pension and an additional pension based on a person’s own insurance contributions or, for certain persons whose marriages have ended by divorce or widowhood, a basic retirement pension based on the former spouse’s insurance contributions, payable under the legislation of Great Britain, Northern Ireland or the Isle of Man, and an old age pension based on a person’s own contributions, or for certain persons whose marriages have ended by divorce or widowhood, based on the former spouse’s contributions, payable under the legislation of Jersey or Guernsey;

“Category B retirement pension” means a basic retirement pension payable to a married woman on her husband’s contributions or, for a widow or widower, either, or both, a basic retirement pension and an additional pension based on the late spouse’s contributions payable under the legislation of Great Britain, Northern Ireland or the Isle of Man, and an old age pension payable under the legislation of Jersey or Guernsey to a married woman by virtue of the contributions of her husband while he is alive;

“competent authority” means—

- (i) in relation to the territory of the United Kingdom, the Department of Social Security for Great Britain, the Department of Health and Social Services for Northern Ireland, the Department of Health and Social Security of the Isle of Man, or
- (ii) in relation to Jersey, the Employment and Social Security Committee of the States of Jersey, or
- (iii) in relation to Guernsey, the Social Security Authority, and
- (iv) in relation to Jamaica, the Minister responsible for National Insurance, and any person or body to whom the functions, relevant to this Convention, of any of those persons or bodies, may be transferred;

SCHEDULE, *contd.*

“contribution period” means a period in respect of which contributions appropriate to the benefit in question are payable, have been paid or treated as paid under the legislation concerned;

“death grant” means—

- (i) a death grant payable under the legislation of Jersey or Guernsey, or
- (ii) a funeral grant payable under the legislation of Jamaica;

“dependent” means a person who would be treated as such for the purpose of any claim to an increase of benefit in respect of a dependant under the legislation concerned;

“employed person” means—

- (i) except for the purposes of Articles 22 to 24, a person who, in the applicable legislation, comes within the definition of an employed earner or of an employed person or is treated as such, and the words “person is employed” shall be construed accordingly, or
- (ii) for the purposes of Articles 22 to 24, a person who is, or who is treated as being, an employed earner or an employed person under the legislation of Great Britain, Northern Ireland or the Isle of Man, or an employed or self-employed person under the legislation of Jersey or Guernsey;

“employment” means employment as an employed person and the words “employ”, “employed” or “employer” shall be construed accordingly;

“equivalent period” means a period for which contributions appropriate to the benefit in question have been credited under the legislation of either Party;

“former Agreement” means the Agreement signed at London on 20th September, 1972;

“gainfully employed” means employed or self-employed;

“Guernsey” means the Islands of Guernsey, Alderney, Herm and Jethou;

“income tax year” means, in relation to the United Kingdom, the twelve months beginning with 6th April in any year;

“insurance authority” means the authority competent to decide entitlement to the benefit in question;

“insurance period” means a contribution period or an equivalent period;

“insured” means that contributions have been paid by, or are payable by, or in respect of, or have been credited in respect of the person concerned;

“invalidity benefit” means—

- (i) long-term incapacity benefit, additional pension, invalidity allowance and incapacity age addition payable under the legislation of Great Britain, Northern Ireland or the Isle of Man, or

SCHEDULE, *contd.*

(ii) invalidity benefit payable under the legislation of Jersey, Guernsey or Jamaica;

“Jersey” means the Island of Jersey;

“legislation” means, in relation to a Party, such of the legislation specified in Article 2 as applies in the territory of a Party, or in any part of the territory of that Party;

“orphan’s benefit” means—

(i) guardian’s allowance payable under the legislation of Great Britain, Northern Ireland or the Isle of Man or Guernsey, or

(ii) orphan’s benefit payable under the legislation of Jamaica;

“Party” means, unless otherwise defined, the territory of the United Kingdom, including any part of the United Kingdom, or Jamaica;

“pension”, “allowance” or “benefit” includes any increases of, or any additional amount payable with, a pension, allowance or benefit respectively;

“qualifying year” means—

(i) in relation to Great Britain, Northern Ireland or the Isle of Man, at least fifty weeks of insurance for periods before 6th April, 1975 or that the person has received, or been treated as having received, earnings of at least fifty-two times the lower earnings limit in an income tax year after 5th April, 1978, under the legislation of Great Britain, Northern Ireland and the Isle of Man, or

(ii) in relation to Jersey, an annual contribution factor of 1.00 under the legislation of Jersey, or

(iii) in relation to Guernsey, an insurance period of not less than fifty weeks under the legislation of Guernsey;

“reckonable year” means, in relation to Great Britain, Northern Ireland and the Isle of Man, an income tax year between 6th April, 1975 and 5th April, 1978 during which contributions have been paid on earnings received, or treated as received, of at least fifty times the lower earnings limit for that year;

“refugee” means a person so defined in Article 1 of the Convention on the Status of Refugees signed on 28th July, 1951 and the Protocol to that Convention signed on 31st January, 1967;

“retirement pension” means retirement pension or old age pension payable under the legislation of either Party;

“seasonal worker” means—

(i) a person subject to the legislation of Jersey or Guernsey, or

(ii) a person subject to the legislation of Jamaica

SCHEDULE, *contd.*

who goes to the territory of Jersey or Guernsey or Jamaica (not being the one in which he is ordinarily resident) in order to carry out in that territory for an employer or undertaking with a place of business there, employment of a seasonal character which depends on the cycle of the seasons and which recurs automatically each year, and the duration of which cannot in any case exceed eight months, and who remains in that territory for the duration of his employment;

“self-employed person” means a person who, in the applicable legislation, comes within the definition of a self-employed earner or of a self-employed person or is treated as such, and the words “person is self-employed” shall be construed accordingly;

“ship or vessel” means any ship or vessel whose port of registry is a port in either territory, or a hovercraft which is registered in either territory, and whose legal or natural owner (or managing owner if there is more than one owner) resides in, or has a place of business in, either territory;

“social assistance” means income support payable under the legislation of Great Britain or Northern Ireland, or supplementary benefit payable under the legislation of the Isle of Man;

“territory” means—

- (i) in relation to the United Kingdom, Great Britain, Northern Ireland and also the Isle of Man, Jersey and Guernsey, and references to the “United Kingdom” or to “territory” in relation to the United Kingdom shall include the Isle of Man, Jersey and Guernsey, where appropriate, or
- (ii) in relation to Jamaica, the island of Jamaica, the Pedro Cays, Morant Cays and other islands within Jamaica’s archipelagic system;

“widow’s benefit” means—

- (i) widow’s payment, widowed mother’s allowance and widow’s pension payable under the legislation of Great Britain, Northern Ireland or the Isle of Man, or
- (ii) widow’s allowance, widowed mother’s allowance, widow’s pension and widowed father’s allowance payable under the legislation of Jersey, or
- (iii) widow’s allowance, widowed mother’s allowance and widow’s pension payable under the legislation of Guernsey, or
- (iv) widow’s and widower’s benefit payable under the legislation of Jamaica.

(2) Other words and expressions which are used in this Convention have the meanings respectively assigned to them in the legislation concerned.

(3) Any reference in this Convention to an “Article” means an Article of this Convention, and any reference to a “paragraph” is a reference to a paragraph of the Article in which the reference is made, unless it is stated to the contrary.

SCHEDULE, *contd.*

ARTICLE 2

Applicable Legislation

(1) This Convention shall apply,

(a) in relation to the territory of the United Kingdom, to:

- (i) the Social Security Administration Act, 1992, the Social Security Contributions and Benefits Act, 1992, the Social Security (Consequential Provisions) Act, 1992 and the Social Security (Incapacity for Work) Act, 1994;
- (ii) the Social Security Administration (Northern Ireland) Act, 1992, the Social Security Contributions and Benefits (Northern Ireland) Act, 1992, the Social Security (Consequential Provisions) (Northern Ireland) Act, 1992 and the Social Security (Incapacity for Work) (Northern Ireland) Order, 1994;
- (iii) the Social Security Administration Act, 1992, the Social Security Contributions and Benefits Act, 1992, the Social Security (Consequential Provisions) Act, 1992 and the Social Security (Incapacity for Work) Act, 1994 (Acts of Parliament) as those Acts apply to the Isle of Man by virtue of Orders made, or having effect as if made, under the Social Security Act, 1982 (An Act of Tynwald);
- (iv) the Social Insurance (Guernsey) Law, 1978;
- (v) the Social Security (Jersey) Law, 1974;

and the legislation which was repealed or consolidated by those Acts, Laws or Orders or repealed by legislation consolidated by them;

(b) in relation to Jamaica, to the National Insurance Act, 1965 and other legislation to which it refers.

(2) Subject to paragraphs (3) and (4), this Convention shall apply also to any legislation which supersedes, replaces, amends, supplements or consolidates the legislation specified in paragraph (1).

(3) This Convention shall apply, unless the Parties agree otherwise, only to benefits under the legislation specified in paragraph (1) at the date of entry into force of this Convention and for which specific provision is made in this Convention.

(4) This Convention shall not apply—

- (i) in relation to Great Britain or Northern Ireland, to legislation on social security adopted by the Council, or the Council and the Parliament of the European Community, or
- (ii) in relation to Jamaica, to any treaties arising under regional economic or other arrangements to which Jamaica is, or may become, party

or to any convention on social security which either Party has concluded with a third party or to any laws or regulations which amend the legislation specified in paragraph (1) for the purpose of

SCHEDULE, *contd.*

giving effect to such a convention, but shall not prevent either Party taking into account under its legislation the provisions of any other convention which that Party has concluded with a third party.

ARTICLE 3

Equal Treatment

A person, together with his dependants and survivors, who is, or has been, subject to the legislation of one Party shall, while he is in the territory of the other Party, enjoy the provisions of the legislation of the other Party under the same conditions as a national of that Party, subject to the special provisions of this Convention.

ARTICLE 4

Refugees

This Convention shall apply to refugees who are residing in the territory of either Party. It shall apply under the same conditions to members of their families, and to their survivors, with respect to the rights they derive from those refugees.

ARTICLE 5

Provisions for the Export of Benefit

(1) Subject to paragraph (2), Articles 13 to 24 and Article 30, a person who would be entitled to receive invalidity benefit under the legislation of Jamaica, or a retirement pension, widow's benefit, or any pension or benefit payable in respect of an industrial accident or industrial disease under the legislation of one Party, other than reduced earnings allowance payable under the legislation of the United Kingdom, if he were in the territory of that Party shall be entitled to receive that pension or benefit while he is in the territory of the other Party, as if he were in the territory of the former Party.

(2) Notwithstanding paragraph (1), a person who is entitled to receive a retirement pension or widow's benefit under the legislation of Great Britain, Northern Ireland or the Isle of Man and who would be entitled to an increase in the rate of that pension or benefit if he were in Great Britain, Northern Ireland or the Isle of Man shall be entitled to receive any such increase prescribed on or after 1st October, 1972 by that legislation if he is in Jamaica, but nothing in this Article shall confer entitlement to receive any such increases prescribed before that date by that legislation.

(3) Where, under the legislation of one Party, an increase of any of the benefits for which specific provision is made in this Convention would be payable for a dependant if he were in the territory of that Party, it shall be payable while he is in the territory of the other Party.

PART II—*Provision 3 which Determine the Legislation Applicable Concerning Contribution Liability*

ARTICLE 6

General Provisions

(1) Subject to paragraphs (2) to (12) and Articles 7 to 11, where a person is gainfully employed, liability for contributions for him shall be determined under the legislation of the Party in whose territory he is so employed.

SCHEDULE, *contd.*

(2) Where a person is employed in the territory of both Parties for the same period, liability for contributions for him shall be determined only under the legislation of the Party in whose territory he is ordinarily resident.

(3) Where a person is self-employed in the territory of both Parties for the same period, liability for contributions for him shall be determined only under the legislation of the Party in whose territory he is ordinarily resident.

(4) Where a person is employed in the territory of one Party and self-employed in the territory of the other Party for the same period, liability for contributions for him shall be determined only under the legislation of the former Party.

(5) No provision of this Article shall affect a person's liability to pay a Class 4 contribution under the legislation of Great Britain, Northern Ireland or the Isle of Man.

(6) Where a person is not gainfully employed, any liability for contributions shall be determined under the legislation of Guernsey if he is ordinarily resident in Guernsey, or under the legislation of Jersey if he is ordinarily resident in Jersey.

(7) Where, but for this paragraph, a person would be entitled to pay contributions voluntarily under the legislation of both Parties for the same period, he shall be entitled to pay contributions only under the legislation of one Party according to his choice.

(8) Where, under Articles 7, 8 (a) or (b), or 9 (2), a person is employed in the territory of one Party while remaining liable for contributions under the legislation of the other Party the legislation of the former Party shall not apply to him and he shall not be liable, nor entitled to pay contributions under the legislation of the former Party.

(9) Where a person is gainfully employed in the United Kingdom and the legislation of Jamaica does not apply to him in accordance with paragraphs (1) and (4) or ceases to apply to him under Articles 7, 8 (a) or (b), or 9 (2), the legislation of the United Kingdom shall apply to him as if he were ordinarily resident in the United Kingdom.

(10) A person who is entitled to receive invalidity benefit or injury benefit for any period under the legislation of Jamaica while he is in Jersey or Guernsey, shall be excepted from liability to pay a contribution in respect of that period, other than as an employed or self-employed person, under the legislation of Jersey or Guernsey.

(11) A person who is entitled to receive widow's benefit under the legislation of Jersey shall be awarded credits only for periods during which that person is ordinarily resident in Jersey.

(12) A woman who is entitled to receive widow's benefit under the legislation of Guernsey while she is in Jamaica, shall not be credited with a Class 3 contribution in respect of every week during which that benefit is payable to her, but shall be credited, for the purposes of entitlement to retirement pension or death grant, in respect of each year during the whole or part of which such benefit is payable, with a number of Class 3 contributions equal to her husband's yearly average of reckonable contributions at the date of his death. If the rate of retirement pension payable to such a woman would be less than the rate of widow's benefit formerly payable it shall be increased to that of the widow's benefit.

SCHEDULE, *contd.*

ARTICLE 7

Detached Workers

Subject to Articles 8 and 9, where a person insured under the legislation of one Party, and employed by an employer with a place of business in the territory of that Party, as sent by that employer, either from the territory of that Party, or from a third country not party to this Convention, to work in the territory of the other Party, the legislation of the former Party concerning liability for contributions shall continue to apply to him as if he were employed in the territory of that Party, provided that the employment in the territory of the other Party is not expected to last for more than three years, and the legislation of the latter Party shall not apply to him.

ARTICLE 8

Travelling Personnel

Subject to Article 9, the following provisions shall apply to any person employed as a member of the travelling personnel of an undertaking engaged in the transport of passengers or goods whether for another undertaking or on its own account:

- (a) subject to sub-paragraphs (b) and (c), where a person is employed by an undertaking which has its principal place of business in the territory of one Party, the legislation of that Party concerning liability for contributions shall apply to him as if he were employed in its territory even if he is employed in the territory of the other Party;
- (b) subject to sub-paragraph (c), where the undertaking has a branch or agency in the territory of one Party and a person is employed by that branch or agency, the legislation of that Party concerning liability for contributions shall apply to him;
- (c) where a person is ordinarily resident in the territory of one Party and is employed wholly or mainly in that territory, the legislation of that Party concerning liability for contributions shall apply to him, even if the undertaking which employs him does not have a place of business or branch or any agency in that territory.

ARTICLE 9

Mariners and Others Employed on Board a Ship or Vessel

(1) Subject to paragraphs (2) to (4), where a person is employed on board any ship or vessel of one Party, the legislation of that Party concerning liability for contributions shall apply to him as if any conditions relating to residence were satisfied in his case, provided that he is ordinarily resident in the territory of either Party.

(2) Where a person who is insured under the legislation of one Party and employed either in the territory of that Party or on board any ship or vessel of that Party, is sent by his employer in the territory of that Party to work on board a ship or vessel of the other Party, the legislation of the former Party concerning liability for contributions shall continue to apply to him provided that his employment on board the ship or vessel of the latter Party is not expected to last for a period of more than one year. Where his employment on board the ship or vessel of the latter Party continues after such period of one year, the legislation of the former Party shall

SCHEDULE, *contd.*

continue to apply to him for any further period of not more than one year, provided that the competent authority of the latter Party agrees thereto before the end of the first period of one year.

(3) Where a person who is not normally employed at sea is employed other than as a member of the crew, on board a ship or vessel of one Party, in the territorial waters of, or at a port of, the other Party, the legislation concerning liability for contributions of the Party in whose territory he is ordinarily resident shall apply to him as if any conditions relating to residence were satisfied in his case.

(4) Where a person who is ordinarily resident in the territory of one Party and employed on board any ship or vessel of the other Party is paid remuneration in respect of that employment by a person who is ordinarily resident in, or by an undertaking having a place of business in, the territory of the former Party, the legislation of the former Party concerning liability for contributions shall apply to him as if the ship or vessel were a ship or vessel of the former Party, and the person or undertaking by whom the remuneration is paid shall be treated as the employer for the purpose of such legislation.

ARTICLE 10

Diplomats, Government Servants and Consular Employees

(1) This Convention shall not apply to persons who are exempted from the social security law of the Party in whose territory they are present or resident by virtue of the Vienna Conventions on Diplomatic or Consular Relations.

(2) Subject to paragraph (1), where any person who is in the Government Service of one Party or in the service of any public corporation of that Party is employed in the territory of the other Party, the legislation of the former Party concerning liability for contributions shall apply to him as if he were employed in its territory.

(3) Subject to paragraphs (1) and (2), where a person is employed in a diplomatic mission or consular post of one Party in the territory of the other Party, or in the private service of an official of such a mission or post, the legislation of the latter Party concerning liability for contributions shall apply to him as if he were employed in its territory, unless within three months of the entry into force of this Convention, or within three months of the beginning of the employment in the territory of the latter Party, whichever is later, he chooses to be insured under the legislation of the former Party, provided that he was so insured within the period of one month immediately before the commencement of the employment at that mission or post. Where, under this paragraph, a person has the right to choose to be insured under the legislation of the former Party but does not choose to do so, he shall not be liable, nor entitled, to pay contributions under the legislation of the former Party.

ARTICLE 11

Modification Provisions

The competent authorities of the Parties may agree to modify the application of Articles 6 to 10 in respect of particular persons or categories of persons, it being understood that such modification is an exceptional measure.

SCHEDULE, *contd.*PART III—*Special Provisions*

ARTICLE 12

Conversion Formulae

(1) For the purpose of calculating entitlement to any benefit under the legislation of Great Britain, Northern Ireland or the Isle of Man in accordance with Articles 14 to 21, contribution periods or equivalent periods completed under the legislation of Jamaica before 6th April, 1975 shall be treated as if they had been contribution periods or equivalent periods completed under the legislation of Great Britain, Northern Ireland or the Isle of Man, as the case may be.

(2) For the purpose of calculating entitlement to any benefit under the legislation of Great Britain, Northern Ireland or the Isle of Man in accordance with Articles 14 to 21, contribution periods completed as a self-employed person or as a non-employed person or equivalent periods completed under the legislation of Jamaica after 5th April, 1975 shall be treated as if they had been contribution periods completed as a self-employed person or as a non-employed person or equivalent periods completed under the legislation of Great Britain, Northern Ireland or the Isle of Man, as the case may be.

(3) Subject to paragraph (4), for the purpose of calculating an earnings factor for assessing entitlement to any benefit under the legislation of Great Britain, Northern Ireland or the Isle of Man in accordance with Articles 14 to 21, a person shall be treated for each week beginning in a relevant income tax year commencing after 5th April, 1975, the whole or any part of which week is a contribution period completed as an employed person under the legislation of Jamaica, as having paid a contribution as an employed earner, or having earnings on which primary Class I contributions have been paid, on earnings equivalent to two-thirds of that year's upper earnings limit.

(4) For the purpose of calculating entitlement to additional pension under the legislation of Great Britain, Northern Ireland or the Isle of Man, no account shall be taken of any contribution period completed under the legislation of Jamaica.

(5) For the purposes of the calculation in Article 15 (2) where:—

(a) in any income tax year commencing after 5th April, 1975, an employed person has completed periods of insurance exclusively in Jamaica and the application of paragraph (3) results in that year being a qualifying year under the legislation of Great Britain, Northern Ireland or the Isle of Man, he shall be deemed to have been insured for fifty-two weeks in that year.

(b) any income tax year commencing after 5th April, 1975, does not count as a qualifying year under the legislation of Great Britain, Northern Ireland or the Isle of Man, any periods of insurance completed in that year shall be disregarded.

(6) For the purpose of calculating the appropriate contribution factor to establish entitlement to any benefit under the legislation of Jersey in accordance with Articles 13 to 24 and 26, a person shall be treated:

SCHEDULE, *contd.*

- (a) for each week in an insurance period completed under the legislation of Jamaica, being a week in the relevant quarter, as having paid contributions which derive a quarterly contribution factor of 0.077 for that quarter;
- (b) for each week in an insurance period completed under the legislation of Jamaica, being a week in a relevant year, as having paid contributions which derive an annual contribution factor of 0.0193 for that year.

(7) For the purpose of calculating entitlement to any benefit under the legislation of Guernsey, in accordance with Articles 13 to 24 and 26, contribution periods or equivalent periods completed under the legislation of Jamaica shall be treated as if they had been contribution periods or equivalent periods completed under the legislation of Guernsey.

(8) For the purpose of calculating entitlement to any benefit under the legislation of Jamaica, in accordance with Articles 13 to 26, each contribution period or equivalent period completed under the legislation of Great Britain, Northern Ireland or the Isle of Man before 6th April, 1975, shall be treated as if it had been a contribution period or an equivalent period completed under the legislation of Jamaica.

(9) For the purpose of converting to an insurance period any earnings factor achieved in any income tax year commencing after 5th April, 1975, under the legislation of Great Britain, Northern Ireland or the Isle of Man, the competent authority of Great Britain, Northern Ireland or the Isle of Man, shall divide the earnings factor achieved under its legislation by that year's lower earnings limit. The result shall be expressed as a whole number, any remaining fraction being ignored. The figure so calculated, subject to a maximum of the number of weeks during which the person was subject to that legislation in that year, shall be treated as representing the number of weeks in the insurance period completed under that legislation and shall be treated as if it had been an insurance period completed under the legislation of Jamaica.

(10) For the purpose of converting to an insurance period any contribution factor achieved under the legislation of Jersey, the competent authority of Jersey shall:

- (a) in the case of a quarterly contribution factor, multiply the factor achieved by a person in a quarter by thirteen; and
- (b) in the case of an annual contribution factor, multiply the factor achieved by a person in a year by fifty-two.

The result shall be expressed as a whole number, any remaining fraction being ignored. The figure so calculated, subject to a maximum of the number of weeks during which the person was subject to that legislation in a quarter or in a year, as the case may be, shall be treated as representing the number of weeks in the insurance period completed under that legislation and shall be treated as if it had been an insurance period completed under the legislation of Jamaica.

(11) For the purpose of converting insurance periods completed under the legislation of Guernsey, each contribution period or equivalent period completed under that legislation shall be treated as if it had been an insurance period completed under the legislation of Jamaica.

SCHEDULE, *contd.*PART IV—*Benefit Provisions*

SECTION 1

ARTICLE 13

Invalidity Benefit

(1) In this Article “competent authority” means, in relation to Great Britain, the Secretary of State for Social Security.

(2) Where a person is entitled to receive invalidity benefit under the legislation of the United Kingdom, he shall be entitled to receive that benefit in the territory of Jamaica provided that, at the time of leaving the United Kingdom he was considered by the competent authority of the United Kingdom likely to be permanently incapacitated for work, and that he subsequently continues to satisfy that authority that he remains incapacitated for work.

(3) Where a person would be entitled to receive for the same incapacity and for the same period invalidity benefit under the legislation of both Parties, whether by virtue of this Convention or otherwise, he shall be entitled to receive only the invalidity benefit under the legislation of the Party in whose territory the incapacity began.

SECTION 2—*Retirement Pension and Widow's Benefit*

ARTICLE 14

General Provisions

(1) Subject to paragraphs (2) to (4), where a person is entitled to a basic retirement pension under the legislation of any part of either Party otherwise than by virtue of this Convention, that pension shall be payable and Article 15 shall not apply under that legislation.

(2) Notwithstanding paragraph (1), a person entitled to a Category B retirement pension under the legislation of Great Britain, Northern Ireland or the Isle of Man shall also be entitled to have any Category A retirement pension entitlement determined in accordance with Article 15.

(3) Notwithstanding paragraph (1), a married woman entitled to a retirement pension solely on her husband's contributions under the legislation of Jersey or Guernsey shall also be entitled to have any pension entitlement based entirely on her own insurance determined in accordance with Article 15. Such a married woman shall be entitled to received only the benefit of her choice.

(4) Entitlement to a retirement pension in the circumstances referred to in paragraph (1) shall not preclude the competent authority of any part of either Party from taking into account, in accordance with paragraphs (4) to (6) of Article 15, insurance periods completed under the legislation of any part of either Party.

SCHEDULE, *contd.*

ARTICLE 15

Pro-Rata Pensions

(1) Subject to Articles 14 and 16 to 20, this Article shall apply to determine a person's entitlement to retirement pension, including any increase for dependants, under the legislation of any part of either Party.

(2) In accordance with Article 12, the competent authority of any part of either Party shall determine:

- (a) the amount of the theoretical pension which would be payable if all the relevant insurance periods completed under the legislation of both Parties had been completed under its own legislation;
- (b) the proportion of such theoretical pension which bears the same relation to the whole as the total of the insurance periods completed under the legislation of that part of either Party bears to the total of all the relevant insurance periods completed under the legislation of both Parties.

The proportionate amount thus calculated shall be the rate of pension actually payable by the competent authority.

(3) For the purpose of the calculation in paragraph (2), where all the insurance periods completed by any person under the legislation of:

- (i) Great Britain, Northern Ireland and the Isle of Man amount to less than one reckonable year or, as the case may be, one qualifying year, or relate only to periods before 6th April, 1975, and in aggregate amount to less than fifty weeks, or
- (ii) Jersey amount to less than an annual contribution factor of 1.00, or
- (iii) Guernsey amount to less than fifty weeks,

those periods shall be treated in accordance with paragraph (4) or (5).

(4) Insurance periods under paragraph (3) shall be treated as follows:—

- (a) as if they had been completed under the legislation or any part of the United Kingdom under which a pension is, or if such periods are taken into account, would be, payable, or
- (b) where a pension is, or would be, payable under the legislation of two or more parts of the United Kingdom as if they had been completed under the legislation of that part which, at the date on which entitlement first arose or arises, is paying, or would pay, the greater, or greatest amount.

(5) Where no pension is, or would be, payable under paragraph (4), insurance periods under paragraph (3) shall be treated as if they had been completed under the legislation of Jamaica.

(6) Where all the insurance periods completed by a person under the legislation of Jamaica amount to less than fifty-two weeks, those periods shall be treated as if they had been completed under the legislation of the United Kingdom in accordance with paragraph (4).

SCHEDULE, *contd.*

(7) Any increase of benefit payable under the legislation of Great Britain, Northern Ireland of the Isle of Man because of deferred retirement or deferred entitlement, shall be based on the amount of the pro-rata pension calculated in accordance with this Article.

ARTICLE 16

Insurance periods to be taken into Account

For the purpose of applying Article 15 the competent authority of either Party shall take account only of insurance periods (completed under the legislation of the other Party) which would be taken into account for the determination of pensions under its legislation if they had been completed under its legislation, and shall, where appropriate, take into account in accordance with its legislation insurance periods completed by a spouse, or former spouse, as the case may be.

ARTICLE 17

Overlapping Periods

For the purpose of applying Article 15:

- (a) where a compulsory insurance period completed under the legislation of one Party coincides with a voluntary insurance period completed under the legislation of the other Party, only the compulsory insurance period shall be taken into account, provided that the amount of pension payable under the legislation of the latter Party under paragraph (2) of Article 15 shall be increased by the amount by which the pension payable under the legislation of that Party would have been increased if all voluntary contributions paid under that legislation had been taken into account;
- (b) where a contribution period completed under the legislation of one Party coincides with an equivalent period completed under the legislation of the other Party, only the contribution period shall be taken into account;
- (c) where an equivalent period completed under the legislation of one Party coincides with an equivalent period completed under the legislation of the other Party, account shall be taken only of the equivalent period completed under the legislation under which the insured person was last insured before the day when the periods in question began or, if he was never insured before that day, under the legislation under which he first became insured after the day when the periods in question ended;
- (d) where a compulsory contribution period completed under the legislation of one Party coincides with a compulsory contribution period completed under the legislation of the other Party, each Party shall take into account only the compulsory contribution period completed under its own legislation;
- (e) where a voluntary contribution period completed under the legislation of one Party coincides with a voluntary contribution period completed under the legislation of the other Party, each Party shall take into account only the voluntary contribution period completed under its own legislation;

SCHEDULE, *contd.*

- (f) where it is not possible to determine accurately the period of time in which certain insurance periods were completed under the legislation of one Party, such insurance periods shall be treated as if they did not overlap with insurance periods completed under the legislation of the other Party and shall be taken into account to the best advantage of the beneficiary.

ARTICLE 18

Benefits to be Excluded

(1) For the purpose of applying Article 15 no account shall be taken of the following benefits payable under the legislation of Great Britain, Northern Ireland or the Isle of Man:

- (a) any additional pension payable;
- (b) any graduated retirement benefit payable by virtue of any graduated contributions paid before 6th April, 1975;
- (c) any invalidity allowance and incapacity age addition payable;

but any such benefit shall be added to the amount of any benefit payable under that legislation in accordance with paragraph (2) of Article 15.

(2) For the purpose of applying Article 15 no account shall be taken of wage-related pension payable under the legislation of Jamaica, but that pension shall be added to the amount of any benefit payable under that legislation in accordance with paragraph (2) of Article 15.

ARTICLE 19

Pre-Scheme Contributions

For the purpose of applying Articles 15 to 18 no account shall be taken under the legislation of Jamaica of any contribution paid or credited under the legislation of the United Kingdom for any period before 4th April, 1966.

ARTICLE 20

Non-Simultaneous Entitlement

Where a person does not simultaneously satisfy the conditions for entitlement to a retirement pension under the legislation of both Parties, his entitlement from each Party shall be established as and when he satisfies the conditions applicable under the legislation of that Party, taking account, where appropriate, of Article 15.

ARTICLE 21

Widow's Benefit

(1) Articles 14 to 20 shall also apply, with such modifications as the differing nature of the benefits shall require, to widow's benefit.

(2) Where widow's benefit would be payable under the legislation of one Party if a child were in the territory of that Party, it shall be payable while the child is in the territory of the other Party.

SCHEDULE, *contd.*SECTION 3—*Benefits for Industrial Accidents and Industrial Diseases*

ARTICLES 22

General Provisions

(1) Where a person is employed in the territory of one Party and the legislation of the other Party applies to him in accordance with any of the provisions of Articles 7 to 11, he shall be treated under the legislation of the latter Party for the purpose of any claim to benefit in respect of an industrial accident or an industrial disease contracted during that employment, as if the accident had occurred or the disease had been contracted in the territory of the latter Party. Where benefit would be payable in respect of that claim if the person were in the territory of the latter Party, it shall be payable while he is in the territory of the former Party.

(2) Where a person leaves the territory of one Party to go in the course of his employment to the territory of the other Party, but before he arrives in the latter territory sustains an accident, then, for the purpose of any claim to benefit in respect of that accident:

- (a) the accident shall be treated as if it had occurred in the territory of the Party whose legislation applied to him at the time the accident occurred; and
- (b) his absence from the territory of that Party shall be disregarded in determining whether his employment was an employed person under that legislation.

(3) Where a seasonal worker who is entitled to industrial injury benefit under the legislation of Guernsey goes to Jamaica, he shall be entitled to continue to receive such benefit for a period of not more than 13 weeks from the date of departure from Guernsey.

(4) Where because of a death resulting from an industrial accident or an industrial disease, a benefit would be payable under the legislation of one Party in respect of a child if that child were in the territory of that Party, that benefit shall be payable while the child is in the territory of the other Party.

ARTICLE 23

Dual Attribution and Aggravation of an Industrial Disease

(1) Subject to paragraph (2), where a person contracts an industrial disease, after having been employed in the territories of both Parties in an occupation to which, under the legislation of both Parties, the disease may be attributed and he would be entitled to receive benefit in respect of that disease under the legislation of both Parties, whether by virtue of this Convention or otherwise, the benefit shall be payable only under the legislation of the Party in whose territory he was last employed in that occupation before the disease was diagnosed.

(2) Where a person has suffered an aggravation of an industrial disease for which benefit has been paid in accordance with paragraph (1), the following provisions shall apply:

SCHEDULE, *contd.*

- (a) if the person has not had further employment in an occupation to which the disease or the aggravation may be attributed, or has had such employment only in the territory of the Party under whose legislation benefit has been paid, any additional benefit to which he may become entitled as a result of such aggravation shall be payable only under that legislation;
- (b) if the person makes a claim under the legislation of the Party in whose territory he is employed on the ground that he has suffered an aggravation of the disease while he was employed in the territory of that Party in an occupation to which, under the legislation of that Party, the aggravation may be attributed, the competent authority of that Party shall be liable to pay benefit only in respect of the aggravation as determined under the legislation of that Party.

ARTICLE 24

Dual Entitlement

A person shall not be entitled, whether by virtue of this Convention or otherwise, to receive sickness benefit, including industrial injury benefit under the legislation of Guernsey, invalidity benefit or maternity allowance under the legislation of the United Kingdom for any period during which he is entitled to benefit, other than a pension, under the legislation of the other Party in respect of incapacity for work which results from an industrial accident or an industrial disease.

SECTION 4—*Family Benefits*

ARTICLE 25

Orphan's Benefit

(1) In this Article "Party" means:—

- (i) Great Britain, Northern Ireland, the Isle of Man or Guernsey, or
- (ii) Jamaica,

as the case may be.

(2) For the purpose of any claim to orphan's benefit under the legislation of one Party any period of presence or insurance completed under the legislation of, or in the territory of, the other Party, as the case may be, shall be treated as if it were a period of presence of insurance completed under the legislation of, or in the territory of, the former Party.

(3) For the purpose of any claim to orphan's benefit under the legislation of Guernsey, a person who has completed an insurance period under the legislation of Jamaica, shall be treated as an insured person under the legislation of Guernsey.

(4) Where orphan's benefit would be payable to a person under the legislation of one Party if that person, or the orphan for whom the benefit is claimed, were ordinarily resident in the territory of that Party, it shall be paid while that person, or the orphan, is in the territory of the other Party.

THE NATIONAL INSURANCE (RECIPROCAL CONVENTION) (UNITED KINGDOM OF GREAT BRITAIN AND NORTHERN IRELAND) ORDER, 1999

SCHEDULE, *contd.*

(5) Where, but for this paragraph, a person would be entitled to receive orphan's benefit under the legislation of both parties in respect of the same orphan, whether by virtue of this Convention or otherwise, he shall be entitled to receive benefit only under the legislation of the Party in whose territory the orphan is ordinarily resident.

SECTION 5

ARTICLE 26

Death Grant under the Legislation of Jersey, Guernsey or Jamaica

(1) In this Article "Party" means:—

- (i) Jersey or Guernsey, or
- (ii) Jamaica,

as the case may be.

(2) For the purpose of any claim to death grant under the legislation of either Party any insurance period completed under the legislation of one Party shall be treated in accordance with Article 12 as if it were an insurance period completed under the legislation of the other Party.

(3) Where a person dies in the territory of either Party his death shall be treated, for the purpose of any claim to death grant under the legislation of one Party, as if it had occurred in the territory of that Party.

(4) Where there would be entitlement to death grant under the legislation of both Parties, whether by virtue of this Convention or otherwise:

- (a) the grant shall be payable only under the legislation of the Party in whose territory the death occurs; or
- (b) if the death does not occur in the territory of either Party, the grant shall be payable only under the legislation of the Party under whose legislation the person on whose insurance the right to the grant is determined was last insured before the death.

PART V—*Miscellaneous Provisions*

ARTICLE 27

Recovery of Advance Payments and Overpayments of Benefit

(1) Where a competent authority of one Party has made a payment of any benefit to a person for any period, or event, in advance of the period, or event, to which it relates or has paid him any benefit for a period, or event, whether by virtue of this Convention or otherwise, and the competent authority of the other Party afterwards decides that the person is entitled to benefit for that period, or event, under its legislation, the competent authority of the latter Party, at the request of the competent authority of the former Party, shall deduct from the benefit due for that period, or event, under its legislation any overpayment which, by virtue of this Convention, results from the advance payment of benefit, or from the benefit paid, by the competent authority of the former Party and shall, where appropriate, transmit this sum to the competent authority of the former Party.

SCHEDULE, *contd.*

(2) Where a person has received social assistance under the legislation of Great Britain, Northern Ireland or the Isle of Man for a period for which that person subsequently becomes entitled to any benefit under the legislation of Jamaica, the competent authority of Jamaica, at the request of and on behalf of the competent authority of Great Britain, Northern Ireland or the Isle of Man, shall withhold from the benefit due for that period the amount by which the social assistance paid exceeded what would have been paid had the benefit under the legislation of Jamaica been paid before the amount of social assistance was determined, and shall transmit the amount withheld to the competent authority of Great Britain, Northern Ireland or the Isle of Man.

ARTICLE 28

Arrangements for Administration, Review and Mutual Assistance

(1) The competent authorities of the two Parties shall:—

- (i) establish the administrative measures necessary for the application of this Convention, and
- (ii) establish the institutional mechanism for carrying out periodic reviews to ensure the correct application and operation of this Convention and its financial integrity, and
- (iii) agree to the regularity and form of such reviews.

(2) The competent authorities of the two Parties shall transmit to each other, as soon as practicable, all relevant information about the measures taken by them for the application of this Convention or about changes in their national legislation in so far as these changes affect the application of this Convention.

(3) The competent authorities of the two Parties shall establish liaison offices for the purpose of facilitating the implementation of this Convention.

(4) The competent authorities of the two Parties shall assist one another on any matter relating to the application of this Convention as if the matter were one affecting the application of their own legislation. This assistance shall be free of charge.

(5) Where any benefit is payable under the legislation of one Party to a person in the territory of the other Party, arrangements for the payment may be made by the competent authority of the latter Party, at the request of the competent authority of the former Party, and the former Party shall reimburse the latter Party.

(6) Where a person who is in the territory of one Party has claimed, or is receiving, benefit under the legislation of the other Party and a medical examination is necessary, the competent authority of the former Party, at the request of the competent authority of the latter Party, shall arrange for this examination. The cost of such examination shall be met by the competent authority of the former Party.

(7) A medical board appointed by the competent authority of Jamaica, at the request of the competent authority of Guernsey, shall be treated as a medical board for determination of the disablement questions under the legislation of Guernsey.

SCHEDULE, *contd.*

(8) Certificates or other documents which, under the legislation of either Party are exempt, wholly or partly, from any taxes, legal dues, consular fees or administrative charges, shall be exempt from all such dues, fees or charges when submitted by the competent authorities of either Party, pursuant to National legislation or this Convention.

(9) All statements, documents and certificates of any kind required to be produced for the purposes of this Convention shall be exempt from authentication by diplomatic or consular authorities.

(10) Any information about an individual which is sent in accordance with and for the purposes of, this Convention to a Party by the other Party is confidential and shall be used only for the purpose of implementing this Convention and the legislation to which this Convention applies. Such information shall be governed by the laws applicable in either Party for the protection of privacy and confidentiality of personal data.

ARTICLE 29

Submission of Claim or Appeal

(1) Any claim or appeal which should, for the purposes of the legislation of one Party, have been submitted within a prescribed period to the competent authority of that Party, shall be treated as if it had been submitted to that competent authority if it is submitted within the same period to the competent authority of the other Party.

(2) Any claim to benefit submitted under the legislation of one Party shall also be deemed to be a claim to the corresponding benefit under the legislation of the other Party in so far as this corresponding benefit is payable in accordance with this Convention.

ARTICLE 30

Currency and Method of Payment

(1) Payment of any benefit in accordance with this Convention may be made in the currency of the Party whose competent authority makes the payment and any such payment shall constitute a full discharge of the obligation in respect of which payment has been made.

(2) Where the competent authority of one Party has made a payment of benefit on behalf of the competent authority of the other Party in accordance with Article 28 (5), any reimbursement of the amounts paid by the competent authority of the former Party shall be in the currency of the latter Party.

(3) Where a person in the territory of one Party is receiving benefit under the legislation of the other Party, it shall be payable by whatever method the competent authority of the latter Party deems appropriate.

ARTICLE 31

Resolution of Disputes

(1) The competent authorities of the Parties to this Convention shall make all reasonable efforts to resolve through agreement between them any dispute about its interpretation or application.

SCHEDULE, *contd.*

(2) If any dispute cannot be resolved as in paragraph (1) it shall be submitted, at the request of the competent authority of either Party, to an arbitration tribunal which shall be constituted in the following manner:—

- (a) each Party shall appoint an arbitrator within three months from receipt of the demand for arbitration. The two arbitrators shall appoint a third arbitrator, who shall not be a national of either Party, within two months from the date on which the Party which was the last to appoint its arbitrator has notified the other Party of the appointment;
- (b) if within the prescribed period either Party should fail to appoint an arbitrator, the other Party may request the President of the International Court of Justice or, in the event of his having the nationality of one of the Parties, the Vice-President or next senior judge of that Court not having the nationality of either Party, to make the appointment. A similar procedure shall be adopted at the request of either Party if the two arbitrators cannot agree on the appointment of the third arbitrator.

(3) The decision of the arbitration tribunal, shall be binding on both Parties. The decision shall be adopted by a majority vote. The arbitration tribunal shall determine its own rules of procedure.

(4) The costs of the tribunal shall be borne in equal parts by the Parties. The tribunal may, however, in its decisions direct that a higher proportion of costs shall be borne by one of the Parties and this award shall be binding on both Parties.

PART VI—*Transitional and Final Provisions*

ARTICLE 32

Prior Acquisition of Rights—Old Agreement Replaced by New Convention

(1) Upon the entry into force of this Convention the former Agreement shall terminate and shall be replaced by this Convention.

(2) Any right to benefit acquired by a person in accordance with the former Agreement shall be maintained. For the purposes of this paragraph “any right to benefit acquired” includes any right which a person would have had but for his failure to claim timeously where a late claim is allowed.

(3) Any rights in course of acquisition under the former Agreement at the date of entry into force of this Convention shall be determined under this Convention.

(4) Where, from the date of entry into force of this Convention, any claim to benefit has not been determined and entitlement arises before that date, the claim shall be determined under the former Agreement and shall be determined afresh under this Convention from its date of entry into force. The rate determined under this Convention shall be awarded from the date of its entry into force if this is more favourable than the rate determined under the former Agreement.

SCHEDULE, *contd.*

(5) Benefit, other than lump sum payments, shall be payable in accordance with this Convention in respect of events which happened before the date of its entry into force, except that an accident which occurred or a disease which developed before that date shall not, solely by virtue of this Convention, be treated as an industrial accident or an industrial disease if it would not have been so treated under any legislation, or Agreement, having effect at the time of its occurrence or development. For the purpose of determining claims under this Convention, account shall be taken, where appropriate, of insurance periods and periods of residence, employment or presence, completed before the date of its entry into force.

(6) Paragraph (5) shall not confer any right to receive payment of benefit for any period before the date of entry into force of this Convention.

(7) For the purposes of paragraph (2) and for applying the first sentence of paragraph (5):

- (a) any right to benefit may, at the request of the person concerned, be determined afresh under this Convention with effect from the date of its entry into force provided that the request has been made within two years of that date and, if applicable, benefit awarded at the higher rate from that date;
- (b) where the request for the benefit to be determined afresh is made more than two years after the date of entry into force of this Convention payment of benefit, and the payment of any arrears, shall be made in accordance with the legislation concerned.

(8) No provision of this Convention shall diminish any rights or benefits which a person has properly acquired under the legislation of any part of either Party before the date of entry into force of this Convention.

ARTICLE 33

Entry into Force

The Convention shall enter into force on a date to be specified in Notes exchanged by the Parties through the Diplomatic Channel notifying each other that all constitutional procedures as are necessary to give effect to this Convention have been finalized.

ARTICLE 34

Life of the Convention

This Convention shall remain in force for an indefinite period. Either Party may denounce it at any time by giving six months' notice in writing to the other Party.

ARTICLE 35

Rights on Termination of this Convention not Replaced by Another

In the event of the termination of this Convention and unless a new Convention containing provisions regulating the matter is made, any right to benefit acquired by a person in accordance with this Convention shall be maintained and negotiations shall take place for the settlement of any other rights then in course of acquisition by virtue of its provisions.

SCHEDULE, *contd.*

In witness whereof the undersigned, duly authorized by their respective Governments, have signed this Convention.

Done in duplicate at London this 12th day November, 1996.

For the Government of
Jamaica:

For the Government of the
United Kingdom of
Great Britain and
Northern Ireland:

PROTOCOL

ARRANGEMENTS FOR THE IMPLEMENTATION OF THE CONVENTION ON SOCIAL SECURITY BETWEEN JAMAICA AND THE UNITED KINGDOM OF GREAT BRITAIN AND NORTHERN IRELAND

The Government of Jamaica and the Government of the United Kingdom, with the aim of improving the administrative efficiency, cost effectiveness and financial integrity of their social security programmes as they apply to persons covered by the Convention hereby agree to the Administrative Arrangements and Programmes of Mutual Assistance contained in this Protocol:

PART I

ARTICLE 1

General

(1) The Administrative Arrangements (Part 2) and the Programmes of Mutual Assistance (Part 3) contained in this Protocol are concluded in conformity with Article 28 of the Convention on Social Security between the Government of the United Kingdom of Great Britain and Northern Ireland and the Government of Jamaica.

(2) The competent authorities designated in Article 3 (1) shall agree upon joint procedures and forms necessary for the implementation of the Administrative Arrangements set out in Part 2, and the Management Committee designated in Article 3 (2) shall agree upon the instruments necessary for the implementation of the Programmes of Mutual Assistance provided for in Part 3.

ARTICLE 2

(1) In accordance with this Protocol and instruments concluded under its terms the competent authorities of the Parties shall assist each other in administering the laws (and regulations, rules and administrative practices thereunder) in Article 2 of the Convention and, when appropriate, the Convention itself.

(2) The competent authorities shall not carry out administrative measures or practices that are at variance with the statutes, regulations or administrative practices of either Party.

(3) All documents required to be tendered for official purposes under the Convention, and/or arising out of this Protocol or future arrangements and instrument, shall be presumed to be

SCHEDULE, *contd.*

official documents so long as they are on official stationery or they bear the official seal or stamp of the relevant Party.

ARTICLE 3

Establishment

(1) For the purposes of Part 2—

(i) the following bodies have been designated the competent authorities for the purposes of the application of the Convention:

(a) in the United Kingdom:

(i) in Great Britain:

For all contingencies, including pension claims for Northern Ireland, except Articles 5 to 10.

Department of Social Security
Pensions and Overseas Benefits
Directorate
Tyneview Park
Whitley Road
Benton
Newcastle upon Tyne
England
NE98 1YX

For Articles 5 to 10,

Contributions Agency
Overseas Contributions (RA)
Department of Social Security
Longbenton
Newcastle upon Tyne
England
NE98 1YX

(ii) in Northern Ireland:

For all contingencies except pension claims,

Social Security Agency
Overseas Branch
Commonwealth House
Castle Street
Belfast
Northern Ireland
BT1 1DX

SCHEDULE, *contd.*

(iii) in the Isle of Man

For all provisions of the Convention,

Isle of Man Department of
Health and Social Security
Markwell House
Market Street
Douglas
Isle of Man

(iv) in Jersey:

For all provisions of the Convention,

Employment and Social Security
Department
Philip Le Feuvre House
La Motte Street
St. Helier, Jersey
Channel Islands

(v) in Guernsey:

For all provisions of the Convention,

Guernsey Social Security
Authority
Edward T. Wheadon House
Le Truchot
St. Peter Port
Guernsey
Channel Islands
GY1 3WH

(b) in Jamaica:

Ministry of Labour Social
Security and Sport
14 National Heroes Circle
P.O. Box 10
Kingston 5
Jamaica

(ii) In accordance with Article 28 of the Convention the following bodies have been designated liaison offices between the competent authorities of both Parties for the purpose of applying the Convention:

(a) in the United Kingdom:

The competent authorities listed in Article
3 (1) (i) (a).

(b) in Jamaica:

The competent authority listed in Article
3 (1) (i) (b).

SCHEDULE, *contd.*

- (iii) The competent authorities may communicate directly with one another and with any person or institution affected by the Convention or with their legal representative.
- (iv) The competent authorities shall decide the texts of any certificates, reports and forms to be used for the purpose of undertaking the tasks laid down in these Arrangements.

(2) For the purpose of Part 3

- (i) The Programme of Mutual Assistance shall be under the general direction of a Management Committee (hereinafter referred to as the "Committee"), whose function shall be to undertake the ongoing reviews of the policy and procedures relating to the programme.
- (ii) The Committee shall consist of four members:
 - (a) For the UK:
 - (i) The Territorial Director, Benefits Agency, Department of Social Security, or his designee.
 - (ii) The Head of International Relations Branch, Department of Social Security, or his designee.
 - (b) For Jamaica:
 - (i) The Honourable Minister of Labour, Social Security and Sport or his/her designees.
 - (ii) The Honourable Attorney-General or his/her designees.

PART 2

ARTICLE 4

Administrative Arrangements

(1) In cases arising under Articles 7 and 9(2) of the Convention, the competent authority of the Party whose legislation is being applied shall issue to the insured person or to this employer, on application, a certificate showing that the insured person remains liable for contributions under that legislation.

(2) Where the last sentence of Article 9(2), or Article 11 of the Convention, applies and the employer has made an application to the competent authority whose legislation is being applied for an extension of the period of liability, the application shall be dealt with by correspondence between the competent authorities of the two Parties.

(3) Where a person is employed in the territory of one Party but chooses that the legislation of the other Party shall apply to him in accordance with Article 10(3) of the Convention, the competent authority of the latter Party shall notify the competent authority of the former Party of the choice the person has made.

SCHEDULE, *contd.*

ARTICLE 5

Application of the Special Provisions for Invalidity Pension

(1) For the implementation of Article 13 of the Convention the competent authority of one Party shall provide the competent authority of the other Party with such information as may be required.

(2) When a person claims Invalidity Pension under the legislation of one Party and Article 13 (3) of the Convention may apply, the competent authority which received the claim shall satisfy itself whether or not a claim for Invalidity Pension has been made under the legislation of the other Party.

ARTICLE 6

Application of the Special Provisions for Retirement Pensions

(1) Where a claim to benefit under Articles 14, 15 and 21 of the Convention is received by the competent authority of one Party and the person declares that Insurance has been paid under the legislation of the other Party, details of the claim and all relevant information shall be issued to other interested competent authorities as follows:—

- (i) Where the claim is made to one of the competent authorities in the United Kingdom that competent authority shall:
 - (a) send two copies of the appropriate liaison form to the competent authority in Jamaica;
 - (b) liaise with any other competent authority in the United Kingdom under whose legislation the claimant has been insured.

The latter competent authority, or competent authorities, in the United Kingdom shall send two copies of the appropriate liaison form to the competent authority in Jamaica;

- (c) the competent authority in Jamaica shall return one copy of the liaison forms which it receives to the competent authority which issued the form and provide the information requested.
- (ii) Where the claim is made to the competent authority in Jamaica that competent authority shall:
 - (a) send two copies of the appropriate liaison form to each of the competent authorities in the United Kingdom with which the claimant has been insured;
 - (b) where necessary, each of the competent authorities in the United Kingdom shall liaise to exchange insurance records;
 - (c) each of the competent authorities in the United Kingdom shall return one copy of the liaison form to the competent authority in Jamaica and provide the information requested.

(2) Information on liaison forms about the claimants, the insured person and any dependants shall, where necessary, be verified by the issuing competent authority.

SCHEDULE, *contd.*

(3) The competent authority of each Party shall thereafter notify each other of any fact relevant to the determination of the claim.

(4) The decision on a pension claim shall be sent direct to the claimant by the competent authority.

ARTICLE 7

Application of the Special Provisions for Industrial Accidents and Industrial Diseases

(1) For the implementation of Articles 22, 23 and 24 of the Convention, the competent authority of one Party shall provide the competent authority of the other Party with such information as may be required or as may be possible to be secured.

(2) Where a person resident in the territory of one Party claims benefit in respect of an industrial accident or industrial disease under the legislation of the other Party, and Article 23 of the Convention may apply, the competent authority of the latter Party shall enquire, from the competent authority of the former Party, whether a claim to benefit in respect of an industrial accident or industrial disease has been made to that Party.

ARTICLE 8

Application of the Special Provisions for Orphans Benefit

For the implementation of Article 25 of the Convention, the competent authority of one Party shall provide the competent authority of the other Party with such information as may be required.

ARTICLE 9

Application of the Special Provisions for Death Grant under the Legislation of (i) Jersey and Guernsey, and (ii) Jamaica

(1) For the implementation of Article 26 (2) of the Convention, the competent authority of one Party shall, on request, provide the competent authority of the other Party with such information regarding periods of insurance as may be required.

(2) Where a person resident in the territory of one Party claims Death Grant under the legislation of the other Party, and Article 26 (4) of the Convention may apply, the competent authority of the latter Party shall enquire, from the competent authority of the former Party, whether a claim to Death Grant has been made to that Party.

ARTICLE 10

Recovery of Overpaid Benefit

(1) For the implementation of Article 27 of the Convention the competent authority which has overpaid an amount of benefit and wishes to recover that overpayment from the arrears of benefit held by the other Party, shall notify the latter Party of its request either by the appropriate form or by letter.

(2) The arrears of benefit available when the request is received, or which later become available after the request, shall be sent to the competent authority which is to make the recovery. After recovering the appropriate amount under Article 27 the balance of the arrears shall be paid

SCHEDULE, *contd.*

to the beneficiary. Confirmation of the amount received and the amount paid to the beneficiary shall be notified to the competent authority which sent the arrears.

ARTICLE 11

Medical Examination

(1) The competent authority of one Party wishing to have a person medically examined whilst resident in the territory of the other Party shall provide the competent authority of the latter Party with details of the medical examination it requires to be made.

(2) The competent authority of the latter Party shall make the necessary arrangements for the medical examination of the person and forward the resulting reports to the competent authority of the former Party.

ARTICLE 12

Miscellaneous Provisions

(1) Any claim or appeal to the competent authorities of the territory in which a person resides but proper to the competent authorities of the other Party shall be endorsed with the date of its receipt and sent to the competent authorities of the other Party.

(2) The competent authority of one Party shall obtain, where necessary, from the competent authority of the other Party, any declaration or other information which may be required concerning any person for the purpose of the application of the Convention.

(3) Where a competent authority of one Party is unable to collect contributions from an employer (or person) in the territory of the other Party, the competent authority of the latter Party shall provide assistance to collect the contributions. The assistance shall be limited to passing the demand for contributions, with instructions on how the contributions can be paid, to the liable employer (or person).

PART 3—*Programmes of Mutual Assistance*

ARTICLE 13

Functions of the Committee

(1) The Committee, established under Part 1, Article 3(2), shall be responsible for the co-ordination and any modification of the Programmes of Mutual Assistance to be set out in Instruments in accordance with this Protocol. The Committee shall review the various periods stipulated for performance of the functions to be set out in additional instruments in order to ensure that the required standards are met to the extent possible or to modify the stipulated periods, where appropriate.

(2) Any modification to the Programme of Mutual Assistance shall be set out in writing. Additional instruments to the Protocol shall be signed by the members of the Committee, or their designees.

(3) The Committee shall be responsible, *inter alia*, for exchanging information and statistics related to the workloads and other administrative matters associated with the programme

SCHEDULE, *contd.*

of assistance. The form and content of the information and statistics to be exchanged shall be settled by the Committee at its first meeting. The Committee may modify such form and content as may be appropriate in given circumstances.

(4) The Committee shall meet, as required, to review progress and establish programme guidance and priorities, provided however that such meetings shall not normally be held more than once every two years. Meetings of the Committee shall normally be held alternatively in Jamaica and the United Kingdom.

ARTICLE 14

Expenses

(1) Subject to paragraph (3) below, in applying Article 2 of the Convention the assistance rendered under this Protocol shall be without charge to either Party. The foregoing notwithstanding, the Committee shall periodically review the expenses involved in providing such assistance with a view towards balancing the costs incurred by each side.

(2) The United Kingdom undertakes to assist the competent authorities of Jamaica in the areas of technical assistance to enhance the capabilities of the latter Party to carry out fully its obligations pursuant to this Protocol.

(3) The Committee may decide, on a case by case basis, that items of assistance which fail to be implemented in the context of the programme are susceptible to attracting a User Fee, to be negotiated on the basis of cost to the Party executing a particular request.

ARTICLE 15

Confidentiality of Information

(1) Pursuant to Article 28 (10) of the Convention, information conveyed by either Party about an individual and required solely for the purposes of implementing this Protocol shall be used exclusively for the purpose of administering the Convention. Such information shall be governed by the laws applicable in either Party for the protection of privacy and confidentiality of personal data.

(2) In no case shall a competent authority of either Party be expected to furnish information which is not obtainable under the laws of that, or the other Party.

ARTICLE 16

Interpretation or Application

Any disagreement regarding the interpretation or application of this Protocol or its Instruments shall be resolved by the Committee, or failing that, by such other methods as may be resorted to, pursuant to Article 31 (1) of the Convention. This Article is without prejudice to the rights and obligations of either Party under Article 31 (2) and (3) of the Convention.

SCHEDULE, *contd.*

ARTICLE 17

Entry into Force and Period of Operation

(1) This Protocol shall enter into force at the same time as the Convention and shall form an integral part of the Convention.

(2) This Protocol shall remain in force for an indefinite period. The competent authorities of the United Kingdom and Jamaica undertake to initiate the programme of assistance specified in this Protocol and to be set out in future instruments as soon as is practicable.

(3) The competent authorities of either Party may terminate programmes of assistance by providing written notification to the competent authorities of the other Party. Such notice of termination shall not affect either Party's rights or obligations under the Convention, or those arising under this Protocol.

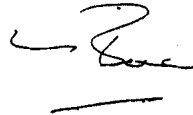
In witness whereof, the undersigned duly authorized thereto by their respective Governments have signed this Protocol.

Done in duplicate at London this 12th day of November, 1996.

For the Government of
Jamaica:



For the Government of the
United Kingdom of
Great Britain and
Northern Ireland:



THE NATIONAL INSURANCE ACT

REGULATIONS

(under section 50 and under section 52 of the
National Insurance Act, 1965, Act 38 of 1965)

THE NATIONAL INSURANCE (SUGAR WORKERS TRANSITIONAL)
REGULATIONS, 1966

(Made by the Minister on the 17th day of March, 1966)

[4th April, 1966.]

L.N. 89/66
Amdts.:
L.N. 255/73
436/74
351/75
62B/78
110/79
113F/81
42D/97
107/99
52/2006
49'A/2009

PART I—Preliminary

1. These Regulations may be cited as the National Insurance (Sugar Workers Transitional) Regulations, 1966.

Citation.

2. In these Regulations, unless the context otherwise requires—

Interpretation

“existing incapacity pensioner” means an existing pensioner who is in receipt of an award under paragraph 15 or paragraph 17 of the Scheme;

“existing old age pensioner” means an existing pensioner who is in receipt of a pension under paragraph 10 or paragraph 16 or paragraph 18 of the Scheme;

“the Scheme” means the Sugar Workers Pension Scheme, 1960, made under the Old Age Pensions and Superannuation Schemes Law, 1958, (repealed),

and other expressions have the same meanings as in the Act.

PART II—Existing Pensioners and Existing Claimants

3. For the purpose of preserving the rights of existing pensioners in regard to pensions and awards granted under the Scheme and for giving effect thereto under the Act—

Preservation under the Act of pensions and awards granted under the Scheme.

(a) there shall be added to the list of benefits mentioned in subsection (1) of section 9 of the Act benefit of the following kind—

- (i) sugar workers old age pension;
- (ii) sugar workers invalidity pension;

- (b) as from the 4th day of April, 1966—
- (i) every existing old age pensioner shall be entitled, in lieu of his pension under the Scheme, to a sugar worker's old age pension as aforesaid; and
 - (ii) every existing incapacity pensioner shall be entitled, in lieu of his award under the Scheme, to a sugar worker's invalidity pension as aforesaid;
- (c) every sugar worker's old age pension and every sugar worker's invalidity pension shall be payable (in accordance with the National Insurance (Claims and Payments) Regulations, 1966) at the rate of \$1000.00 per week and all payments on account of any such pension shall be made out of the National Insurance Fund;
- (d) subject to paragraph (c), the provisions of the Act relating to old age pensions granted thereunder (except subsection (5) of section 9, subsection (2) of section 12 and section 21 of the Act) shall apply in relation to sugar workers old age pensions as they apply in the case of old age pensions; and
- (e) subject to paragraph (c), the provisions of the Act relating to invalidity pensions granted thereunder (except subsection (5) of section 9, subsection (3) of section 11, subsection (2) of section 12 and section 21 of the Act) shall apply in relation to sugar workers invalidity pensions as they apply in the case of invalidity pensions.

Outstanding
claims under
the Scheme.

4. Every claim to any benefit under the Scheme (including a claim for refund of contributions) by an existing claimant shall be decided by the Minister in accordance with the relevant provisions of the Scheme as if the Scheme were still in full force and of full effect and as if the relevant references in the Scheme to the Pensions Authority established under the Old Age Pensions and Superannuation Schemes Law, 1958, were references to the Minister.

Existing
pensioners
not insurable
under the Act.

5. An existing pensioner shall not be capable of becoming insured under the Act.

PART III—*Existing Sugar Workers*

Insurance
under the
Act of existing
sugar workers.

6. Every existing sugar worker who, before the 4th day of April, 1966, had paid one or more pension contributions under the Scheme shall, by virtue of this regulation, become an insured person.

7.—(1) Subject to the provisions of these Regulations, the Act and the Regulations made thereunder shall apply in relation to existing sugar workers as they apply in relation to other persons:

Application
of the Act
to existing
sugar
workers.

Provided that, subject to the provisions of regulation 8, the provisions of the Act relating to old age benefit and invalidity benefit shall, in relation to existing sugar workers, have effect subject to the following modifications—

- (a) for the purpose of the provisions relating to the contribution conditions for old age pension and invalidity pension—
 - (i) the date of entry into insurance of an existing sugar worker shall be taken as being the 19th day of November, 1961, or the date when he first became a sugar worker (within the meaning of the definition contained in paragraph 2 of the Scheme), whichever is the later;
 - (ii) pension contributions paid under the Scheme by an existing sugar worker, and in respect of that worker by his employer, shall (irrespective of the amount of any contribution) be deemed, respectively, to be flat rate contributions paid under the Act by that worker, and in respect of that worker by his employer, for the weeks for which they were paid;
 - (iii) the yearly average of contributions of an existing sugar worker shall be calculated over the period beginning with the relevant Monday and ending with the end of the last contribution year before the date at which the average is to be ascertained;
- (b) for the purpose of the provisions relating to the contribution conditions for old age pension only—
 - (i) if the number of contributions deemed by virtue of sub-paragraph (ii) of paragraph (a) to be flat rate contributions paid under the Act by an existing sugar worker is less than 140, there shall also be deemed to have been paid by that worker under the Act an additional flat rate contribution for every flat rate contribution so deemed to have been paid by him, so, however, that the number of additional flat rate contributions deemed to have been paid under the Act by that worker by virtue of the provisions of

*THE NATIONAL INSURANCE (SUGAR WORKERS TRANSITIONAL)
REGULATIONS, 1966*

this sub-paragraph shall not exceed the difference between the number deemed to have been paid by virtue of sub-paragraph (ii) of paragraph (a) and 140;

- (ii) if the number of contributions deemed, by virtue of sub-paragraph (ii) of paragraph (a) to be flat rate contributions paid under the Act in respect of an existing sugar worker by his employer is less than 140, there shall also be deemed to have been paid in respect of that worker by that employer under the Act an additional flat rate contribution for every flat rate contribution so deemed to have been paid by him, subject, however, to the limitation expressed in sub-paragraph (i) of this paragraph;
- (iii) the proviso to sub-paragraph (1) of paragraph 1 of the Fourth Schedule to the Act shall not apply;
- (c) for the purpose of the provisions relating to old age grant and invalidity grant, the reference to contribution conditions for old age pension in paragraph (b) of subsection (1) of section 10, and the second reference to relevant contribution conditions for invalidity pension in subsection (1) of section 11, of the Act, shall be taken as meaning those contribution conditions as modified by this regulation.

(2) In sub-paragraph (iii) of paragraph (a) of the proviso to paragraph (1), the expression "relevant Monday" means—

- (a) in the case of an existing sugar worker whose date of entry into insurance (as ascertained in accordance with sub-paragraph (i) of paragraph (a) of the said proviso) is the 19th day of November, 1961, the first Monday of April, 1962;
- (b) in the case of an existing sugar worker whose date of entry into insurance (as so ascertained) is a date after the 19th day of November, 1961, the first Monday in April next following such date of entry or, if such date of entry falls on the first Monday in April in any of the years 1962, 1963, 1964 or 1965, the date of entry into insurance.

8.—(1) If, in relation to any existing sugar worker, the effect of applying, at the relevant date, all the modification provisions contained in regulation 7 is that there is entitlement to less favourable benefit than would be the case if none of those provisions were applied, all

Modifica-
tions of
Act not to
operate
detrime-
ntally.

those provisions shall be disregarded in the case of that worker and, accordingly, no account shall be taken of any pension contributions paid by or in respect of him under the Scheme.

(2) In paragraph (1) "relevant date" means the date of the event that gives rise to the question of entitlement to benefit.

9.—(1) An existing sugar worker who, having reached retirement age, is not entitled to old age pension or old age grant and who has not received an invalidity pension or an invalidity grant shall be entitled to a refund of the pension contributions paid by him under the Scheme.

Refund of
certain con-
tributions.

(2) If an existing sugar worker dies before receiving an old age or invalidity pension or an old age or invalidity grant and no one is entitled by virtue of his death to benefit, a lump sum equal to the amount of the pension contributions paid by him under the Scheme shall be paid by the Minister to his named beneficiary, so, however, that if there is no such named beneficiary or the named beneficiary cannot be found, the Minister shall make payment thereof to or for the maintenance of any person or persons appearing to the Minister to have been wholly or partially dependent upon the deceased.

(3) In paragraph (2) "named beneficiary" has the meaning assigned to it by paragraph 2 of the Scheme.

PART IV—*Determination of Questions*

10.—(1) Any question—

- (a) whether a person is an existing incapacity pensioner, an existing old age pensioner or an existing sugar worker;
- (b) as to the number of contributions paid by or in respect of any person under the Scheme;
- (c) whether the provisions of regulation 8 are, in any particular case, applicable,

Questions to
be deter-
mined by
Minister.

and any other question arising under or in connection with these Regulations, shall be determined by the Minister.

(2) The Minister may, on new facts being brought to his notice or if he is satisfied that the decision was given in ignorance of, or was based on a mistake as to some material fact, review a decision given by him by virtue of regulation 4 or of this regulation.

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REGULATIONS, 1966*

(3) The provisions of regulation 4 of the National Insurance (Determination of Claims and Questions) Regulations, 1966, shall apply in relation to the procedure relating to the determination of any question falling within paragraph (1) of this regulation as they apply in relation to the procedure relating to the determination of any question falling within regulation 3 of those Regulations.

(4) The provisions of paragraphs (1) and (2) of regulation 5 of the said Claims and Questions Regulations and so much of paragraph (4) of that regulation as refers to a reference by the Minister shall apply in relation to any question falling within paragraph (1) of this regulation as they apply in relation to any question falling within regulation 3 of those Regulations.

(5) The provisions of regulation 26 of the said Claims and Questions Regulations shall have effect as if regulation 27 of those Regulations had not been made.

THE NATIONAL INSURANCE ACT

REGULATIONS
(under section 50)

THE NATIONAL INSURANCE (EMPLOYMENT INJURIES) (MEDICAL
CERTIFICATION) REGULATIONS, 1970

(Made by the Minister on the 29th day of September, 1970)

L.N. 281/70

[1st October, 1970.]

Vide
L.N. 279/70

1. These Regulations may be cited as the National Insurance (Employment Injuries) (Medical Certification) Regulations, 1970. Citation.

2.—(1) In these Regulations, unless the context otherwise requires— Interpre-

“approved form” means a form approved by the Minister or accepted by an independent authority as being sufficient in the circumstances of any particular case or class of case;

“incapacity” means incapacity by reason of which a person is rendered incapable of work;

“signature” means in relation to any certificate, the name by which the person giving the certificate is usually known (any name other than the surname being either in full or otherwise indicated) written by that person in his own handwriting; and the expression “signed” shall be construed accordingly,

and other expressions have the same meanings as in the Act.

(2) For the purpose of these Regulations, a certificate shall be deemed to be in a form approved by the Minister if it is in a form substantially similar to a form approved by the Minister.

3. Every person claiming medical treatment under the terms of section 15 of the Act shall furnish evidence as to the need for such treatment by means of a medical treatment certificate given by a registered medical practitioner, in accordance with the rules for certification set out in the Schedule, in the approved form.

Medical
treatment
certificates.

Schedule.

THE NATIONAL INSURANCE (EMPLOYMENT INJURIES) (MEDICAL CERTIFICATION) REGULATIONS, 1970

Certificates
of incapacity.

4. Every person claiming employment injury benefit shall furnish evidence of incapacity, in respect of the day or days for which the claim is made, by means of a certificate of incapacity given by a registered medical practitioner, in accordance with the rules for certification set out in the Schedule, in the approved form.

SCHEDULE

(Regulation 3)

Rules for Certification

1. In these rules, unless the context otherwise requires—

“certificate” means a medical treatment certificate or a certificate of incapacity;

“claimant” means the person in respect of whom a certificate is given;

“practitioner” means a registered medical practitioner, not being the claimant.

2. Every certificate shall be in writing in ink or other indelible substance, and shall contain the following particulars—

(a) the claimant's name;

(b) the date of the examination on which the certificate is based;

(c) a concise statement of the disease or injury from which the claimant is suffering and which, in the practitioner's opinion, at the time rendered the claimant incapable of work or which required medical treatment;

(d) the date on which the certificate is given;

(e) the address of the practitioner,

and shall bear opposite the words “Doctor's Signature”, the signature of the certifying practitioner written after there have been entered on the certificate the claimant's name and a statement of the disease or injury.

3. The statement of the disease of injury from which incapacity has resulted or for which treatment is provided shall specify the condition from which the claimant is suffering as precisely as the practitioner's knowledge of this condition permits:

Provided that if in the practitioner's opinion a disclosure to the claimant of the precise condition would be prejudicial to his wellbeing the certificate may contain a less precise statement.

4. Every certificate must have been given on a date not more than one day later than the date of the examination upon which it is based, and no further certificate based on the same examination shall be furnished other than a certificate to replace an original certificate which has been lost or mislaid, but in that case the form shall be clearly marked “duplicate”.

5. The following provisions shall apply in relation to a certificate of incapacity—

(a) the certificate shall cover a specified number of days (from and including the date of the examination on which the certificate is based) which shall not exceed 28 days;

(b) in computing any period of time to be covered by the certificate Sundays and public holidays shall be included.

THE NATIONAL INSURANCE ACT

REGULATIONS
(under section 50)

THE NATIONAL INSURANCE (FOREIGN SERVICE PERSONNEL)
REGULATIONS, 1970

(Made by the Minister on the 29th day of September, 1970)

L.N. 282/70

1.—(1) These Regulations may be cited as the National Insurance (Foreign Service Personnel) Regulations, 1970.

Citation.

(2) The provisions of these Regulations which relate to injury benefit shall not have effect until the 1st day of October, 1970.

Vide
L.N. 279/70

2. In these Regulations, unless the context otherwise requires—

Interpreta-
tion.

“foreign service officer” means a person falling within sub-paragraph (a) of paragraph 4 of the First Schedule to the Act;

“injury benefit” means benefit under sections 15, 16 or 19 of the Act,

and other expressions have the same meanings as in the Act.

3. Payment of benefit to a foreign service officer shall not be suspended for any period during which he is absent from Jamaica.

Exception
from
suspension
of benefit.

4. Where a foreign service officer has failed to obtain payment of benefit within the period of six months specified in regulation 11 of the National Insurance (Claims and Payments) Regulations, 1966, and the failure is due to the fact that he was absent from Jamaica by reason of his employment as a foreign service officer, that regulation shall apply to him with the substitution for the said period of six months of such a period as the Minister may, in any particular case, determine.

Extinguish-
ment of
right of
foreign
service
officer to
receive
payment
of benefit.

5. For the purpose of any claim to benefit by or in respect of a foreign service officer, evidence may be taken in any part of Her Majesty’s dominions other than Jamaica, by a Jamaican consular officer, or before a judge or magistrate, and in a foreign country by a Jamaican or British consular officer.

Evidence.

Medical
Certificates.

6.—(1) If the Minister so directs, then any certificate issued in respect of a foreign service officer by a medical practitioner in any country outside Jamaica in which such officer is or was by reason of his employment as such, shall be deemed to be a certificate which satisfies the requirements of the National Insurance (Employment Injuries) (Medical Certification) Regulations, 1970.

(2) In paragraph (1) "medical practitioner" has the same meaning as in the National Insurance (Employment Injuries) (Benefit) Regulations, 1970.

Applica-
tion of
Act and
Regula-
tions.

7. The provisions of the Act and of the Regulations made thereunder shall, so far as they are not inconsistent with the provisions of these Regulations, apply to a foreign service officer with this modification, that where a foreign service officer is, on account of his being outside Jamaica by reason of his employment as a foreign service officer, unable to perform an act required to be done forthwith, or on the happening of a certain event, or within a specified time, he shall be deemed to have complied therewith if he performs the act as soon as is reasonably practicable, although after the happening of the event or the expiration of the specified time.

Provisions
relating to
Jamaican
domestic
workers
employed
by foreign
service
officer.

8. The provisions of regulations 3, 4, 5 and 7 of these Regulations shall apply in relation to persons falling within sub-paragraph (b) of paragraph 4 of the First Schedule to the Act as they apply in relation to foreign service officers.

THE NATIONAL INSURANCE ACT

REGULATIONS
(under section 50)

THE NATIONAL INSURANCE (MARINERS AND AIRMEN) REGULATIONS,
1970

(Made by the Minister on the 29th day of September, 1970) L.N. 283/70

1.—(1) These Regulations may be cited as the National Insurance Citation.
(Mariners and Airmen) Regulations, 1970.

(2) The provisions of these Regulations which relate to injury L.N. 279/70
benefit shall not have effect until the 1st day of October, 1970.

2. In these Regulations, unless the context otherwise requires— Interpretation.

“airman” means a person insured under the Act by virtue of sub-paragraph (b) of paragraph 2 of the First Schedule to the Act;

“the Claims and Payments Regulations” means the National Insurance (Employment Injuries) (Claims and Payments) Regulations, 1970;

“injury benefit” means benefit under section 15, 16 or 19 of the Act;

“mariner” means a person insured under the Act by virtue of sub-paragraph (a) of paragraph 2 of the First Schedule to the Act,

and, subject as aforesaid, expressions to which meanings are assigned in the Merchant Shipping Acts of the United Kingdom have the same meanings as in those Acts,

and other expressions have the same meanings as in the Act.

3. The provisions of the Act relating to injury benefit shall, in their application to a person insured as an airman by virtue of employment as a pilot, commander, navigator or member of the crew of an aircraft to which sub-paragraph (b) of paragraph 2 of the First Schedule to the Act applies, have effect subject to the following modifications— Special provisions as to injury benefit in the case of airmen.

*THE NATIONAL INSURANCE (MARINERS AND AIRMEN)
REGULATIONS, 1970*

- (a) where the airman having been left outside Jamaica on account of illness, injury, risk of infection or on account of loss of or damage to, the aircraft in which he was employed, subsequently returns to Jamaica at the expense of the employer in whose service he was up to the time of being so left, an accident happening to him while so returning shall, notwithstanding that during that time he renders no services and receives no wages, be deemed to arise out of and in the course of his employment as such airman if it would have been deemed so to have arisen had the return journey been undertaken in pursuance of an obligation under his contract of service with the employer aforesaid;
- (b) the requirements of paragraph (b) of subsection (7) of section 15 of the Act shall not apply in the case of an airman who, with the express or implied permission of his employer, is travelling to or from his place of work in any aircraft;
- (c) in addition to the provisions of subsection (8) of section 15 of the Act, an accident happening to an airman while employed as aforesaid shall be deemed to arise out of and in the course of his employment if it happens while he is taking steps on an actual or supposed emergency on or in connection with any aircraft to rescue, succour or protect persons who are, or are thought to be, or possibly to be, injured or imperilled, or to avert or minimize serious damage to property.

Special provisions as to injury benefit in the case of mariners.

4. The provisions of the Act relating to injury benefit shall, in their application to a person insured as a mariner by virtue of employment as master, or a member of the crew, of any vessel to which sub-paragraph (a) of paragraph 2 of the First Schedule to the Act applies, have effect subject to the following modifications—

- (a) where the mariner having been left at a port other than a proper return port on account of illness, injury, risk of infection or on account of loss of, or damage to, the vessel in which he was employed, subsequently returns to a proper return port at the expense of the employer in whose service he was up to the time of being so left, an accident happening to him while so returning, shall notwithstanding that during that time he renders no services and receives no wages, be deemed to arise out of and in the course of his employment as such mariner if it would have been deemed so to have

arisen had the return journey been undertaken in pursuance of an obligation under his contract of service with the employer aforesaid;

- (b) in subsection (7) of section 15 of the Act—
 - (i) the expression “place of employment” shall include the vessel in the service of which the mariner is employed;
 - (ii) the requirements of paragraph (b) of the said subsection (7) shall not apply in the case of a mariner who, with the express or implied permission of his employer, is travelling to or from such vessel as aforesaid in any other ship or vessel;
- (c) in addition to the provisions of subsection (8) of section 15 of the Act, an accident happening to a mariner in or about a vessel on board which he is for the time being employed shall be deemed to arise out of and in the course of his employment if it happens while he is taking steps on an actual or supposed emergency on or in connection with any ship or vessel to rescue, succour or protect persons who are, or are thought to be, or possibly to be, injured or imperilled, or to avert or minimize serious damage to property;
- (d) employment injury benefit shall not be payable for any period during which the mariner is, under the provisions of the Merchant Shipping Acts of the United Kingdom, entitled to wages as defined in those Acts.

5. Payment of benefit to an airman or mariner shall not be suspended for any period during which he is absent from Jamaica.

Exception from suspension of benefit.

6. Where a mariner or airman has failed to obtain payment of benefit within the period of six months specified in regulation 11 of the National Insurance (Claims and Payments) Regulations, 1966, and the failure is due to the fact that he was absent from Jamaica by reason of his employment as a mariner or airman, that regulation shall apply to him with the substitution for the said period of six months of such a period as the Minister may in the particular case, determine.

Extinguishment of right of mariners and airmen to receive payment of benefit.

7. For the purpose of any claim to benefit by or in respect of a mariner or airman, evidence may be taken in any part of Her Majesty's dominions other than Jamaica, by a Jamaican consular officer or before a judge or magistrate or by a Superintendent within

Evidence.

*THE NATIONAL INSURANCE (MARINERS AND AIRMEN)
REGULATIONS, 1970*

the meaning of the Merchant Shipping Act, 1894, of the United Kingdom and in a foreign country, by a Jamaican or British consular officer.

Notice of
accident
and obliga-
tions of
employers
of
mariners.

8.—(1) The requirements of regulation 3 of the Claims and Payments Regulations shall be deemed to be satisfied in the case of a mariner if notice in accordance with the provisions of that regulation is given to the master of the vessel in which the mariner is for the time being employed, or to any other officer of such vessel with authority to receive such notice.

(2) As regards any accident reported under the provisions of paragraph (1) the master of the vessel shall, subject to the provisions of paragraph (4), comply with the requirements of regulation 4 of the Claims and Payments Regulations.

(3) The owners or managing owner of any vessel shall comply with the requirements of regulation 4 of the Claims and Payments Regulations when required to do so by the Minister, as to any accident happening or alleged to have happened on board or in the service of any such vessel, in respect of which benefit may be payable, or as to any occupation prescribed in the Schedule to the National Insurance (Prescribed Diseases) Regulations, 1970, in which any person has been engaged on board or in the service of such vessel and in respect of which benefit under the Act may be payable.

(4) Paragraph (5) of regulation 4 of the Claims and Payments Regulations shall not apply to a vessel.

(5) In the application of the said regulation 4, as applied by the preceding provisions of this regulation, references to the nearest local office shall be read as references to the National Insurance Head Office.

Medical
certifi-
cates.

9.—(1) If the Minister so directs, then any certificate issued in respect of a mariner or airman by a medical practitioner in any country outside Jamaica in which such mariner or airman is or was by reason of his employment as such, shall be deemed to be a certificate which satisfies the requirements of the National Insurance (Employment Injuries) (Medical Certification) Regulations, 1970.

(2) In paragraph (1) "medical practitioner" has the same meaning as in the National Insurance (Employment Injuries) (Benefit) Regulations, 1970.

*THE NATIONAL INSURANCE (MARINERS AND AIRMEN)
REGULATIONS, 1970*

155

10. The provisions of the Act and of the Regulations made thereunder shall, so far as they are not inconsistent with the provisions of these Regulations, apply to a mariner or airman with this modification, that where a mariner or airman is, on account of his being outside Jamaica by reason of his employment as a mariner or airman, unable to perform an act required to be done forthwith, or on the happening of a certain event, or within a specified time, he shall be deemed to have complied therewith if he performs the act as soon as is reasonably practicable, although after the happening of the event or the expiration of the specified time.

Applica-
tion of
Act and
Regula-
tions.

THE NATIONAL INSURANCE ACT

REGULATIONS
(under sections 50 and 60)

THE NATIONAL INSURANCE (EMPLOYERS' BONUS) REGULATIONS, 1977

(Made by the Minister on the 31st day of March, 1977)

L.N. 63/77

[1st January, 1976.]

1. These Regulations may be cited as the National Insurance (Employers' Bonus) Regulations, 1977.

2. The sum specified in paragraphs (a) and (b) respectively, shall in accordance with section 60 of the Act, be awarded by the Board as bonuses on special contributions made by contributors—

- (a) as respects special contributions made between the 1st day of January, 1976 and the 29th day of February, 1976, a sum equivalent to six *per centum* per annum on any such contribution;
- (b) as respects special contributions made on or after the 1st day of March, 1976, a sum equivalent to seven *per centum* per annum on any such contribution.

3. The bonuses aforesaid shall be awarded on the 15th day of February and the 15th day of August, respectively, in each year.

THE NATIONAL INSURANCE ACT

ORDER
(under section 53)

THE NATIONAL INSURANCE (SELF-EMPLOYED PERSONS AND WORKERS
ON SMALL FARMS) (ENTRY INTO INSURANCE) ORDER, 1967

(Made by the Minister on the 30th day of March, 1967)

L.N. 86/67

1. This Order may be cited as the National Insurance (Self-Employed Persons and Workers on Small Farms) (Entry into Insurance) Order, 1967.

2. In this Order "worker on a small farm" means a person prescribed for the purposes of section 53 of the Act by regulation 3 of the National Insurance (Workers on Small Farms) Regulations, 1966.

3. The provisions of the Act which govern the entry into insurance of self-employed persons and workers on small farms shall be deemed not to come into operation until the 1st day of April, 1968.

THE NATIONAL INSURANCE ACT

ORDER
(under section 78)

THE NATIONAL HOUSING TRUST (RATE OF INTEREST ON LOANS)
ORDER, 1976

(Made by the Minister on the 11th day of October, 1976)

L.N. 29a/77

[31st July, 1976.]

1. This Order may be cited as the National Housing Trust (Rate of Interest on Loans) Order, 1976.

2. As respects any loan made on or after the 31st day of July, 1976, by the Trust, to any contributor pursuant to section 64 of the Act, the rate of interest payable on such loan shall be eight *per centum* per annum.