IN EXERCISE of the powers conferred by section 28 and 53 of the National Insurance Act, the Minister makes the following Regulations:

NATIONAL INSURANCE (BENEFITS) REGULATIONS, 1994

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1. **Citation:** These Regulations may be cited as the National Insurance (Benefits) Regulations 1994.

2. **Interpretation:** In these Regulations unless the context otherwise requires –

   “Act” means the National Insurance Act:

   "Appeal Tribunal" means a tribunal established in accordance with regulations made under section 34:

   “Appointed Day” means the day so appointed pursuant to section 1 (2) of the Act:
“claimant” means a person claiming benefit for himself or on behalf of another person:

“credited” means a credit awarded in accordance with regulation 57:

“confinernent” means labour resulting in the birth of a living child or labour after not less than twenty-eight weeks of pregnancy resulting in the birth of a child whether alive or dead:

“contribution” means the total of an employer's and an employee’s contributions:

“Contributions Regulations” means the National Insurance (Contributions) Regulations:

"determining authority" means, as the case may require the Board, the Director, an Appeal Tribunal or the High Court:

“Director” means the Director of National Insurance:

"grant" means a maternity, invalidity, age or survivor's benefit grant paid by a single payment:

"insurable earning" means the earning in the relevant period by the relevant person on which contributions have been paid subject to a maximum of $600.00 weekly or $2,600.00 monthly: (Click here for 2002 Amendments)

"medical examination" includes bacteriological and radiological tests and similar investigations and references to being medically examined shall be construed accordingly:
"medical practitioner" means a person registered as a medical practitioner in Saint Vincent and the Grenadines or a person registered as such in a country outside Saint Vincent and the Grenadines where he is qualified to practice.

PART II CLAIMS

3. Claims to be made in writing: (1) A claim for benefit shall be made in writing to the Director on the form approved by the Board for the purpose, or in such other manner, being in writing, as the Director may accept as sufficient in the circumstances of any particular case or class of cases.

(2) Forms for claims shall be supplied without charge by the Board.

4. Information to be given: (1) A claimant shall furnish such certificates, documents, information and evidence for the purpose of determining the claim as are prescribed in these Regulations and the Director may require any claimant to attend at such place as the Director may specify and there to submit himself to medical or other examination by one or more medical officers, medical referees or other professional persons appointed by the Board for that purpose.

(2) If so required by the Director, a claimant shall in particular furnish the following information concerning himself, or any person on behalf of whom he is claiming a benefit:

(a) his name, date and place of birth, usual place of residence, employment or former employment and not being the claimant his relationship to the claimant:

(b) in the case of a claim in respect of a wife or husband, or a widow or widower, or a claim based on the fact that the wife, husband, widow or widower is an insured person, a certificate of the marriage, together with a declaration confirming the information given at (a).

(3) The Director may accept in support of claims and, in the absence of any certificate or document mentioned in the foregoing paragraphs:
(a) as proof of kinship the sworn declaration of other persons or other evidence;

(b) as proof of age, extracts from the baptismal records or school records or such other evidence as he considers satisfactory.

5. **Date for claims:** For the purpose of any claim to benefit the date of receipt of the claim at the office of the Director shall be deemed to be the date of the claim.

6. **Amendment of claim:** (1) If a claim is defective, when it is received by the Director, the Director may refer the claim back to the claimant and if the form is returned properly completed within one month from the date on which it is so referred the claim shall be treated as if it had been duly made in the first instance.

(2) A claimant who has made a claim in accordance with these Regulations may amend the claim at any time before a decision has been given thereon, by notice in writing delivered or sent to the Director, and any claim so amended shall be treated as if it had been duly made in the first instance.

7. **Interchange of claims:** Where it appears that a claimant one benefit may be to some other benefit, the claim may be treated by the Director as a claim for that other benefit.

8. **Time for claiming benefits:** (1) The time for claiming benefits shall be -
(a) in the case of sickness benefit (unless good cause is given) not later than fifteen days from the earliest day in respect of which incapacity for work is certified.

(b) in the case of maternity benefit.

(i) if the benefit is claimed before confinement, not earlier than thirteen weeks beginning with the contribution week before that in which it is expected that the claimant will be confined.

(ii) in any other case, within four weeks beginning with the date of confinement;

(c) in the case of invalidity, age or survivor's benefit, within three months from the date on which, apart from satisfying the condition of making a claim, the claimant becomes entitled thereto; and

(d) in the case of funeral grant, within six months from the date of death of the deceased.

(2) Subject to paragraphs (3) and (4), a person failing to make a claim for benefit within the time prescribed shall be disqualified from receiving

(a) in the case of sickness benefit, benefit in respect of any day more than fifteen days before the date on which incapacity for work is certified, subject to regulation 13;

(b) in the case of maternity benefit, benefit in respect of any period before the beginning of the contribution week in which the claim is made;

(c) in the case of invalidity, age or survivor's benefit, benefit in respect of any period more than three months before the date on which the claim is made;
(d) in the case or funeral grant, the amount of the grant.

(3) If in any case the claimant proves

(a) that on a date earlier than the date on which the claim was made, apart from satisfying the condition of making a claim, he was 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,

he shall not be disqualified under paragraph (2) from receiving any benefit to which he would have been entitled if the claim had been made on the earlier date.

(4) Notwithstanding the provisions of sub-paragraph (3) no sum shall be paid by way of

(a) sickness, maternity, invalidity, age, survivor's benefit in respect of any period more than six months before the date on which the claim therefore is duly made;

(b) funeral grant, if the claim is not duly made within twelve months after the date of the death of the person in respect of whom the grant is payable.

PART III BENEFITS

A. Sickness Benefit

9. **Entitlement:** Subject to the provisions of these Regulations, sickness benefit shall be awarded to an insured person who is rendered incapable of work as a result of some specific disease or of bodily or mental disablement; and for this purpose an insured person shall be treated as incapable of work because he is under observation by reason of being a carrier of a disease, or of his having been in contact with a case of infectious disease.
10. No entitlement after age sixty: No insured person shall be awarded or-paid sickness benefit on or after attaining the age of sixty years.

11. Support of claim: A claim for sickness benefit shall be supported by a certificate of a medical practitioner in accordance with the First Schedule to these Regulations or by such other evidence as the Director may require for the purpose of establishing the incapacity of the insured person for work.

12. Conditions to be satisfied: Sickness benefit shall be payable only if the insured person-

(a) had paid not less than twenty-six weekly contributions;

(b) had paid or had been credited with not less than eight weekly contributions in the period of thirteen contribution weeks immediately preceding the contribution week in which the first day of incapacity for work occurred.

13. Commencement: An insured person who is awarded sickness benefit shall not be entitled to receive such benefit for the first three days of any continuous period of incapacity for work but only from the fourth day of any such period:

Provided that for the purpose of computing the first three days of any continuous period of incapacity for work,

(a) public holidays shall be included; and

(b) Sundays shall not be included.
14. **Duration:** (1) Subject to the provisions of these Regulations, sickness benefit shall be paid in respect of each day (excluding Sundays) as long as incapacity for work continues, subject to a maximum of twenty-six weeks, in any one continuous period of incapacity.

(2) Any two or more periods or incapacity for work not separated by more than eight weeks shall be treated as one continuous period of incapacity for work starting on the first day of the first week of those periods.

(3) The daily rate of benefit payable in respect of the later period or periods under this Regulation is the daily rate of benefit paid during the first period of incapacity.

15. **Rate of benefit:** (1) The weekly rate of sickness benefit shall be sixty five per centum of the sum of the insurable earnings or credits of the insured person in the thirteen contribution weeks immediately preceding the contribution week in which incapacity for work occurred or was deemed to have occurred, divided by thirteen.

(2) The daily rate of sickness benefit shall be the weekly rate divided by six.

(3) When an insured person who is not exempted from benefit under section 18 of the Act continues after the third consecutive day of sickness and while on leave to receive from his employer all or part of his wages, the weekly rate of sickness benefit to be contributed by the Fund shall be sixty five per centum of his average weekly insurable earning which amount shall form part of and not be in addition to, the amount paid by his employer.
(4) When a claimant is entitled to receive from his employer full pay during any period of incapacity for work, the Director shall pay directly to the employer the weekly rate of sickness benefit payable by the Fund as prescribed in paragraph (3).

16. Disqualification: An insured person entitled to payment of sickness benefit shall be disqualified from receiving benefit for such period as the Director may decide, but not exceeding six weeks if-

(a) the claimant has become incapable of work through his own misconduct; or

(b) the claimant fails, without good cause, to comply with a notice in writing by the Director requiring him to attend for and submit himself to medical or other examination; or

(c) the claimant fails, without good cause, to observe any of the following rules of behaviour, namely

(i) to refrain from behaviour calculated to retard his recovery, or to answer any reasonable enquiries by an officer of the Board directed to ascertaining whether he is doing so;

(ii) not to be absent from his place of residence without leaving word as to where he may be found; or
(iii) to do no work for which remuneration is or would ordinarily be payable.

B. Maternity Benefit

17. Entitlement: Subject to the provisions of these Regulations, maternity benefit shall be awarded to a woman who is an insured person, in respect of her pregnancy and confinement.

18. Certificate in support of claim: A claim for maternity benefit shall be supported by a certificate of a medical practitioner or a registered midwife in accordance with the First Schedule to these Regulations or by such other evidence as the Director may accept for the purpose of establishing the pregnancy or confinement, as the case may be.

19. Conditions to be satisfied: Maternity benefit shall be payable to a woman who has been insured for thirty weeks where not less than twenty weekly contributions have been paid by, or credited to her, during the thirty weeks immediately preceding that contribution week

(a) which is six weeks before the expected week of confinement; or

(b) in which occurs the day from which the allowance is claimed whichever is later.

20. Certificate of confinement: A woman who has been awarded maternity benefit shall obtain a certificate of confinement in accordance with paragraphs 7 and 8 of the Schedule to these Regulations and send it to the Director within three weeks of confinement or, within the same period furnish the Director with such other evidence of her confinement as may be acceptable to him.
21. **Duration of maternity benefit**: Subject to the provisions of these Regulations, maternity benefit shall be payable for a period starting not earlier than six weeks before the expected week of confinement and continuing until the expiration of thirteen weeks:

Provided always that the total period of maternity benefit payable shall not exceed thirteen weeks.

22. **Rate of benefit**: (1) The weekly rate of maternity benefit shall be sixty-five per centum of the sum of the insurable earnings or credits of the insured person in the thirty weeks specified in regulation 19 divided by thirty, and the daily rate shall be the weekly rate divided by six.

(2) When an insured person during her confinement continues while on leave to receive from her employer all or part of her wages, the weekly rate of maternity benefit to be contributed by the Fund shall be sixty-five per centum of her average weekly insurable earning while on leave which amount shall form part of and not be in addition to, the amount paid by the employer.

(3) When a claimant is entitled to receive from her employer full pay during any period of absence from work, due to pregnancy, the Director shall pay directly to her employer the weekly rate of maternity benefit payable by the Fund as prescribed in paragraph (2).

23. **Maternity Grant**: (1) A woman is entitled to a grant of two hundred dollars if-

(a) she has given birth to a living child; and

(b) she or her husband has contributed to the fund for at least twenty of the thirty weeks immediately preceding the week which she gave birth.
(2) For the purpose of this regulation the provision of section 28 (4) of the Act applies and the expression "husband" includes a single man living in a common law relationship with a single woman with whom he resides in the same dwelling house.

(3) The payment made by virtue of this regulation shall in respect of the husband's contribution be made only to one such woman.

24. Disqualification: An insured person entitled to payment of maternity benefit shall be disqualified from receiving such benefit for such period as the Director may decide if during the period for which benefit is payable -

(a) she engages in remunerative work;

(b) she fails without good cause to comply with a notice in writing by the Director requiring her to furnish a medical certificate as prescribed in the Schedule or other acceptable evidence of her confinement.

25. Incapacity from complications of confinement: The provisions of the Regulations relative to sickness benefit shall apply in relation to a case where there is incapacity for work arising from pathological complications of confinement immediately following the cessation of rights to maternity benefit:

Provided that in such a case the conditions of regulation 12 shall be applied in relation to the period immediately preceding the first day from which maternity benefit was payable.
C. INVALIDITY BENEFIT

26. **Entitlement:** Subject to the provisions of these Regulations, invalidity benefit shall be awarded to an insured person who is an invalid.

27. **Certificate in support of claim:** A claim for invalidity benefit shall be supported by a certificate of a medical practitioner in accordance with the First Schedule to these Regulations or by such other evidence as the Director may require for the purposes of establishing the incapacity of the insured person for work.

28. **Conditions to be satisfied:** Invalidity pension shall be awarded if-

   (a) the insured person has not attained the age of sixty years; and

   (b) not less than one hundred and fifty weekly contributions have been paid by the insured person.

29. **Duration:** Subject to the provisions of these Regulations, invalidity pension shall be paid for so long as invalidity continues, but shall cease at age sixty when it shall be converted to an age pension of the same amount.

30. **Rate of benefit:** (1) The annual rate of invalidity pension shall be thirty per centum of the average annual insurable earnings of the insured person to which shall be added one half per centum of his average annual insurable earnings for each twenty-five weekly contribution paid by or credited to him in excess of the first five hundred such contributions:
Provided that in no case shall invalidity pension exceed sixty per centum of the insured persons average annual insurable earnings, nor be less than a weekly rate of forty dollars.

(2) For the purpose of this regulation the average annual insurable earnings shall be the sum of the insurable earnings or credits of the insured person in the best three contribution years out of the fifteen contribution years immediately preceding the contribution year in which invalidity occurs, or such lesser number being the total number of contribution years since the Appointed Day or since the initial date of insurance of the insured person divided by three.

(3) The weekly rate of invalidity benefit shall be the annual rate thereof divided by fifty-two and rounded to the nearest multiple of ten cents.

31. Invalidity grant: (1) Subject to the provisions of these Regulations an insured person who does not satisfy the provisions of regulation 28 but who

(a) is an invalid,

(b) has not attained the age of sixty, and

(c) has paid not less than fifty weekly contributions, shall be entitled to an invalidity grant.
(2) The amount of invalidity grant shall be a lump sum equal to six times the average insurable weekly earnings of the insured person for each complete fifty contributions paid by or credited to him.

(3) Average insurable weekly earnings for the purpose of this regulation means the sum of the last fifty weekly insurable earnings or credits of the insured person prior to the onset of incapacity, divided by fifty.

32. Disqualification: An insured person entitled to payment of invalidity pension shall be disqualified from receiving such benefit for such period as the Director may decide, if-

   (a) the claimant has become incapable of work through his own misconduct: or

   (b) the claimant fails, without good cause, to comply with a notice in writing by the Director requiring him to attend for and submit himself to medical or other examination; or

   (c) the claimant fails, without good cause, to observe any of the following rules of behaviour namely-

   (i) to refrain from behaviour calculated to retard his recovery, or to answer any reasonable enquiries by an officer of the Board directed to ascertaining whether he is doing so,

   (ii) not to be absent from his place of residence without leaving word where he may be found, or
(iii) to do no work for which remuneration is or would ordinarily be payable.

D. AGE BENEFIT

33. **Age pension entitlement**: Age benefit shall be awarded as a pension to an insured person who has attained the age of sixty years and who

(b) has paid not less than one hundred and fifty weekly contributions; and

(c) has paid or been credited with not less than five hundred weekly contributions.

34. **Duration of age pension**: Subject to the provisions of these Regulations age pension shall be payable from the date of the beneficiary's sixtieth birthday until his death.

35. **Rate of age pension**: (1) The annual rate of age pension shall be sixteen per centum of the average annual insurable earnings of the insured person to which shall be added one per centum of his average annual insurable earnings for each complete twenty-five weekly contributions paid by or credited to him in excess of the first one hundred and fifty weekly contributions and up to the first five hundred weeks, plus one half per centum of his average insurable earnings for each complete twenty-five weekly contributions paid or credited to him in excess of the first five hundred weeks.

(2) In no case shall age pension exceed sixty per centum of the average insurable earnings of the insured person nor less than a weekly rate of forty dollars. *(Click here for 2002 Amendments)*

(3) For the purpose of this regulation -"average annual insurable earnings" means the sum of the insurable earnings or credits of the insured person during the best three contribution years of the last fifteen contribution years before he attains sixty years or such lesser amount being the number of contributions -

(a) since the Appointed Day: or -
(b) since the initial date of insurance of the insured person, divided by three.

(4) The weekly rate of age pension shall be the annual rate divided by fifty-two and rounded to the nearest multiple of ten cents.

36. Age Grant entitlement: (1) Subject to the provisions of these Regulations age grant shall be payable to an insured person who does not satisfy the requirements set out in regulation 33 but who

(a) has attained the age of sixty years; and

(b) has paid not less than fifty weekly contributions.

(2) The amount of age grant shall be a lump sum equal to six times the average insurable weekly earnings of the insured person for each complete fifty weekly contributions paid by or credited to him.

(3) For the purpose of this regulation "average insurable weekly earnings" means the sum of the last fifty weekly insurable earnings or credits prior to age sixty divided by fifty.

37. Reduced Age pension: (1) A person of the age of thirty-seven years and over on the Appointed Day shall be eligible for an age pension, when he has

(a) attained the age of sixty years; and

(b) paid one hundred and fifty weekly contributions; and (Click here for 20002 amendment)

(c) paid or credited an additional twenty-five weekly contributions for every year during which he was under the age of 50 years on the appointed day as described in the Second Schedule.
E. FUNERAL GRANT

38. Funeral grant: (1) Subject to the provisions of these Regulations a funeral grant shall be awarded on the death of an insured person, an invalidity or age pensioner or the spouse or dependent child of any person.

(2) A funeral grant shall be paid to any person who has paid or to any person who gives to the Director an undertaking in writing to pay, the whole or part of the funeral expenses of the deceased, so, however, that any payment of the funeral grant to a person by virtue of an undertaking shall be subject to the condition that if that person fails to carry out any such undertaking he shall repay to the Fund any funeral grant paid him.

(3) Where

(a) death occurred at sea and the deceased person was buried at sea, or

(b) the person who has paid or is liable to pay the cost of the funeral of the deceased person cannot be found, or

(c) the cost of the funeral was less than the amount of the benefit.
the benefit or as the case may be, the remainder thereof, shall be paid to
such person or persons as the Director in his discretion may decide.

39. **Condition to be satisfied**: Funeral grant shall be awarded, only if the insured person has
been insured for not less than twenty-six contribution weeks and has paid not less than twenty-six
weekly contributions.

40. **Certificate in support of claim**: A claim for funeral grant shall be supported by a death
certificate or by such other evidence as the Director may require for the purpose of establishing
the death of the insured person and by such evidence as the Director may require to establish that
the claimant is entitled to such grant.

41. **Amount of grant**: The amount of funeral grant shall be a prescribed in the Third
Schedule.

**F. SURVIVOR'S BENEFIT**

42. **Survivors Benefit entitlement**: (1) Subject to the provisions of these Regulations
Survivor's Benefit shall be payable to the widow or widower, or the children of a deceased
insured person, if at the time of death, such person -

(a) was in receipt of age or invalidity pension.

(b) could have satisfied the prescribed conditions for an invalidity pension or grant:
(c) was sixty years of age or over and would have been entitled to an age pension or grant had he made a claim for such benefit.

(2) Where at the date of his death a deceased insured person was in receipt of an age or invalidity pension or would have been entitled to an age pension or to an invalidity pension, the benefit payable shall be a pension.

(3) Where at the date of his death the deceased insured person would have been entitled to an age grant or to an invalidity grant, the benefit shall be a grant.

(4) Survivor’s benefit shall not be payable in respect of a marriage contracted after the insured person is granted an age pension or invalidity pension.

(5) The annual rate of survivor’s pension shall not exceed the rate of the age or the invalidity pension which is payable or would have been payable to the deceased insured person at the time of his death.

(6) The amount of survivor's grant shall not exceed the amount of age or invalidity grant which would have been payable to the deceased person at the time of his death.

43. Entitlement of dependent children: (1) Survivor's benefit shall be payable in respect of the unmarried children of a deceased insured person who, at the date of death of that person were wholly or mainly maintained by him.

(2) Survivor's benefit in respect of dependent children payable under this regulation shall be paid to the widow or widower, or other person having custody of the dependent children.
(3) Where there is no surviving parent or stepparent, survivor’s benefit payable under this regulation shall be payable as an orphan's pension or orphan's grant, as the case may be to a person having the custody of the dependent children.

(4) Where the Survivor's benefit payable under this regulation is a survivor's pension such survivor's pension shall be payable until the child has attained the age of sixteen years, or if continuing in full-time education until he has attained the age of eighteen years:

Provided that in the case of an invalid child the pension shall be payable beyond the age of 16 years for the period during which the invalidity continues.

(5) A survivor's pension payable under the provisions of this regulation is payable, subject to paragraph (4) of this regulation, so long as the child continues to reside with or be wholly or mainly maintained by the widow or widower, or other person having custody of him.

In this section "child" includes adopted children, stepchildren and children born out of wedlock.

44. Entitlement of widow: (1) A widow is at the date of the death of her husband entitled to

(a) if fifty years of age or over, subject to paragraph (6) a Survivor’s pension for life, or a Survivor’s grant, as the case may be;
(b) if under fifty years of age and incapable of self-support by reason of invalidity, a Survivor's pension during her invalidity and if her invalidity cease after she has attained the age of 50 years then such pension shall continue for life:

(c) if under fifty years and has children eligible for survivor’s benefit under regulation 43 a Survivor’s pension payable in accordance with paragraph (2), or a Survivor's grant, as the case may be;

(d) if under the age of fifty years and is pregnant survivor’s pension payable in accordance with paragraph (3), or Survivor’s grant, as the case may be.

(2) A survivor's pension awarded to a widow under paragraph (1) © shall be payable until the youngest eligible child attains the age of 16 years, or if continuing in full-time education., 18 years and if she is over fifty years when the youngest child ceases to be eligible under these Regulations the pension shall continue for life or until she re-marries or co-habits with a man as his wife.

(3) Where a widow is awarded a Survivor's pension under paragraph 1 (d) the pension shall be payable for one year unless as a result of the pregnancy the provisions of paragraph (1) (c) are satisfied by the birth of a child when the provisions of paragraph 1(c) will then apply.

(4) A widow who at the date of the death of her husband is

(a) under the age of 50 years;

(b) has no children eligible for pension under the provisions of paragraph (1) (c);
(c) is not incapable of self-support by reason of invalidity

shall be entitled to a Survivor's pension for a period of one year, or to a Survivor's grant as the case may be.

(5) A Survivor's pension payable to a widow shall cease on her re-marriage or if she co-habits with a man as his wife.

(6) In this regulation 'wife' and 'husband' includes a single man or woman, a widow or widower living with each other in the same household and cohabiting as man and wife for not less than three years and the term 'widow' and 'widower' shall be construed accordingly.

45 Entitlement of Widower: The provisions of regulation 44 shall apply mutatis mutandis with regard to the entitlement of a widower to survivor's pension on benefit.

47. Entitlement to higher benefit: Where spouses are in receipt of age benefits awarded as pension under these Regulations and one spouse has predeceased the other and the survivor becomes entitled to survivor's pension under these Regulations, that survivor is entitled to the higher of the two benefits in accordance with regulation 59.

48. Meaning of "husband" and "wife": Under this Sub-Heading the expression 'husband" or "wife" in relation to a man or woman who has been married more than once refers only to the last husband or wife.
49. **Survivor's benefits in common law unions**: For the purpose of this Part where it is a condition for title to survivor's benefit that a woman is the widow of an insured man or vice versa the provisions of section 28 (3) and (4) of the Act shall apply.

50. **Rate of benefit**: (1) The rate of survivor's pension payable to a widow or widower under the provisions of these Regulations shall be seventy-five per centum of the age or invalidity pension in payment to the deceased insured person at the date of his death.

   (2) If the deceased insured person was not in receipt of age or invalidity pension in accordance with paragraph (1) the survivor's pension payable to the widow or widower shall be seventy-five per centum of the age pension earned up to the date of death.

   (3) The rate of survivor's pension payable in respect of children shall be twenty-five per centum of the amounts specified in paragraph (1) or (2) save that if the pension payable is an orphan's pension the amount payable shall be fifty per centum.

   (4) For the purposes of this regulation the age pension earned up to the date of death shall be the rate of age pension calculated in accordance with regulation 35 (2) to date of death.

   (5) The amount of survivor's grant payable to a widow or widower shall be seventy-five per centum of the age grant calculated in accordance with regulation 36 (2) and (3), prior to the date of death of the insured person, and in respect of a child twenty-five per centum of the said amount, and in the case of an orphan fifty per centum of the said amount.

   (6) The maximum amounts payable under the provisions of this regulation shall not exceed the amount of age or invalidity pension in payment to the deceased insured person or the amount of age pension earned up to the date of death.
(7) **Insufficiency of amount for distribution to children:** (1) Where the maximum amount available for the payment of survivor's pension or grant to the children of a deceased insured person is insufficient to enable payment to be made in respect of all the children in accordance with regulations 43 and 49 and a question is raised as to which of several children should be awarded a pension or grant, then the question shall be referred to the Board for decision in accordance with the National Insurance (Determination of Questions) Regulations.

(8) Where survivor's pension (or grant) has been awarded in circumstances for which paragraph (1) provides and in accordance with that paragraph, and there is any other child of the deceased insured person who has been awarded a survivor's pension (or grant) because of the provisions of that paragraph, then any such other child may be awarded a survivor's pension (or grant), in accordance with regulations 43 and 49 at any time when the total amount of survivor's pension being paid in respect of the children of the deceased insured person falls below the maximum amount, and in any such case the provisions of paragraph (1) shall apply.

(9) Where no spouse is entitled to benefit, the full amount of survivor’s pension or grant may be paid in respect of the children of the deceased.

Provided always that the rate of benefit payable in respect of each child shall not exceed the rate set out in regulation 49 (3) and (5).

50 A. (1) **Benefit for surviving parents:** If on the death of an insured person in the circumstances mentioned under regulation 42 there are no survivors eligible for benefit under sections 43 to 45, a benefit shall be payable to a dependent parent (if any) who has attained the age of sixty years and who received at least fifty per centum of his income by way of contribution from the insured person.

(2) A parent eligible under paragraph (1) shall be paid survivor's benefit for life.
(3) The rate of pension payable to a parent receiving benefit under this regulation shall be two thirds of the amount specified in regulation 49 (1) and (2).

PART IV

PAYMENT OF BENEFIT

(Click here for 2002 Amendment)

51. (1) Payment of benefit: Benefit shall be paid in accordance with an award as soon as is reasonably practicable after the award has been made and may be paid in cash, cheque or payable order or as the Board may direct, either generally or in respect of any benefit, or of any beneficiary, and periodical payments shall be made at such intervals as the Board may direct, either generally or in respect of any class of such payments or of any beneficiary.

(2) After 1st January, 1994 payments made in respect of benefits awarded before that date in accordance with regulations 28, 33, 37 and 42 shall be increased by one half per centum of the provision rate.

52. Information when required for payment: A beneficiary or any person to whom benefit is paid on behalf of a beneficiary shall furnish in such manner and at such times as the Director may require certificates and other documents and other information of fact relating to the receipt or disbursement as may be specified as a condition on which any sum shall or shall not be paid by the Director.

53. Extinguishment of right to benefit: (1) The right to any sum payable by way of benefit 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 this regulation.
(2) In calculating the period of six months for the purposes of paragraph (1) no account shall be taken of

(a) any period during which the Board has under consideration any representation that a payable order or cheque in respect of the sum has not been received or has been lost, mislaid or stolen;

(b) any period during which the beneficiary is for the time being unable to act by reason of any mental incapacity subject to the qualification that the total period to be disregarded on account of such inability to act shall not exceed one year; or

(c) any period during which the determination of any question as to such extinguishment is pending.

(3) For the purposes of this regulation, a sum payable by way of benefit shall, subject to paragraph (4) are to regulation 56(5) be receivable.

(a) In the case of a sum contained in a payable order or cheque-

(i) If the order is sent through the post, on the date on which it is authenticated for payment, and

(ii) in any other case, on the date of issue of the order;
(b) where sums are not payable by payable order six months (or such longer period as may be determined by the Board in the circumstances of any particular case) after the date on which the sum became payable.

(4) In determining when a sum is receivable under paragraph (3) the following provisions shall apply-

(a) if a beneficiary proves that through no fault of his own he did not receive the payable order or cheque until a date later than the appropriate receivable date determined in accordance with paragraph (3), the sum 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 beneficiary proves that through no fault of his own he has not received the payable order or cheque the sum shall be receivable-

(i) on the date determined in accordance with paragraph (3) on the basis of the issue of any further payable order or cheque in respect of that survivor; or
(ii) on the date which is six months after the receivable date determined in accordance with paragraph (3) on the same basis whichever is the earlier.

(5) Any sum payable by way of benefit to a beneficiary who is for the time being unable to act shall be receivable in accordance with this regulation, notwithstanding his inability to give a receipt therefore.

(6) A person who would be entitled to benefit but for the operation of this regulation shall be treated as if he were entitled thereto for purpose of any rights or obligations under the Act or any regulations made there under (whether of himself or any other person) which depend on his being so entitled, other than the right to payment of that benefit.

54. **Beneficiaries to notify changes of circumstances:** (1) A beneficiary shall inform the Director of any change in the circumstances affecting his continued right to receive benefit or the rate at which the benefit is payable, within one week of the occurrence of the change.

(2) The Board may require any beneficiary to furnish from time to time documentary evidence that he is alive and that the conditions governing that grant of such benefit continue to be satisfied.

55. **Persons unable to act:** (1) In the case of any beneficiary, or of any person who is alleged to be entitled to benefit, or by whom or on whose behalf a claim to benefit has been made, being a child or a person unable for the time being to act on his own behalf where no other person or authority has been duly appointed under the law to have charge of such person or his estate, the Board may, upon written application being made to it, appoint a person to act on behalf of any such child or person entitled under the Act and any Regulations made there under, and to receive and deal with any sums payable on behalf of such child or person:

Provided that-
(a) any such appointment by the Board shall terminate on the date on which the Board is notified that another person or authority has been duly appointed under the law to have charge of such person or his estate;

(b) a person who has not attained the age of eighteen years shall not be capable of being appointed to act under this regulation;

(c) the Board may at any time in its absolute discretion revoke an appointment made under this regulation; and

(d) any person appointed under this regulation may, on giving the Board one month's notice in writing of his intention to do so, resign his office.

(2) Anything required by these Regulations to be done by or to any person who is a child or who is for the time being unable to act on his own behalf may be done by or to any person or authority duly appointed under the law to have charge of his estate, or by or to the person appointed under this regulation to act on behalf of such person, and the receipt of any person so appointed shall be good discharge to the Board and the Fund for any sum paid.

56. Payment of death: (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 Board may appoint such person as it thinks fit to proceed with or to make a claim for such benefit, and the provisions of these Regulations shall apply, subject to the necessary modifications, to any such claim.
Subject to paragraph (8) any sum payable by way of benefit which is payable under the award of a claim proceeded with or made under paragraph (1) may be paid or distributed to or amongst persons claiming as personal representatives, next-of-kin or creditors of the deceased, and the provisions of regulation 53 shall apply to any such payment or distribution.

The receipt of any such person who has attained the age of eighteen years shall be a good discharge to the Board and the Fund for any sum so paid under this regulation.

Where the Board is satisfied that any sum or part thereof is needed for the benefit of any person under the age of eighteen years, the Board may obtain a good discharge thereof by paying the sum or part thereof to an adult (who need not be a person specified in paragraph 2 of this regulation) who satisfies the Board that he will apply the sum so paid for the benefit of the person under the age of eighteen years.

Subject to paragraph (8), any sum payable by way of benefit in respect of a deceased insured person (payment of which he had not obtained at the date of his death) may unless the right thereto was already extinguished at the date, be paid or distributed amongst such person as are mentioned in paragraph (2), and the provisions of regulation 53 and of paragraph (8) shall apply to any payment or distribution.

For the purposes of regulation 53 (1) 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 these purposes the reference in regulation 53 (3) (b) to the date on which the sum became payable shall be construed as a reference to the date of application to the Board made in accordance with paragraph (7).

Paragraphs (2), (3), (4), (5) and (6) shall not apply in any case unless written application for the payment of any such sum is made to the Board within six months from the date of death of the deceased or within such longer period as the Board may allow in any particular case.
(8) The Board may dispense with strict proof of the title of any person claiming in accordance with this regulation.

PART V

MISCELLANEOUS

57. Credited contributions: (1) For every contribution week for the whole of which an insured person receives sickness benefit or maternity benefit a credited contribution shall be credited to that person without actual payment thereof.

(2) The provisions of paragraph (1) shall apply in the case of an insured person who but for the provision of regulation 13, would have been entitled to receive sickness benefit.

(3) A credited contribution shall, subject to these Regulations, be valid for sickness, maternity, invalidity, survivors or age benefit and shall be at the level of the weekly wages corresponding to, or most closely corresponding to, those on the basis of which the sickness or maternity benefit is paid;

Provided that where sickness or maternity benefit is payable at different rates during a contribution week, the credited contribution for that week shall be at the level of the weekly wages corresponding to, or most closely corresponding to, the highest level of weekly wages on the basis of which such benefit is paid.
58. **Payment of contributions**: If before the end of any contribution year the maximum amount of contributions being the maximum amount prescribed by the Schedule to the Contributions Regulations is paid by or on behalf of, or is credited by virtue of regulation 57 to any insured person, then for the purposes of these Regulations contributions shall be deemed to have been paid by or on behalf of that person for each contribution week in that year during which he was an employed person and he shall be deemed to have been an insured person for each such week.

59. **Entitlement to more than one benefit**: (1) Notwithstanding that a person is at the same time entitled to two or more benefits under the Act he shall be paid

(a) the benefit first awarded; or

(b) the other benefit if it is payable at a higher rate

(2) A person who has already received an invalidity grant or age grant shall be entitled to a further invalidity grant or age grant based on contributions paid or credited and not already taken into account for the invalidity grant or grants received.

(3) Survivor's grant or grants may be paid to or in respect of persons otherwise entitled notwithstanding that the relevant deceased insured person had in his lifetime received an invalidity grant or invalidity grants, but the survivor's grant or grants shall be based only on contributions paid or credited and not already taken into account for the said invalidity grant or grant received.

(4) Nothing in this regulation shall preclude the full duplication of sickness benefit or maternity benefit with survivor's benefit and any other benefit may be duplicated in full with funeral grant.
60. **Beneficiaries abroad:** (1) Except as hereinafter provided, a beneficiary shall be disqualified from receiving any benefit for any period during which that person is absent from Saint Vincent and the Grenadines.

(2) A beneficiary shall not be disqualified from receiving sickness or maternity benefit by reason of being temporarily absent from Saint Vincent and the Grenadines for the specific purpose of being treated for any illness which commenced before the beneficiary left Saint Vincent and the Grenadines during such period as the Director may allow having regard to the particular circumstances of the case.

(3) A beneficiary shall not be disqualified from receiving age or survivor's benefit by reason of being absent from Saint Vincent and the Grenadines.

(4) A beneficiary shall not be disqualified from receiving invalidity benefit by reason of being absent from Saint Vincent and the Grenadines for such period as the Director may allow, having regard to the particular circumstances of the case, and provided that entitlement to invalidity benefit had been established before that person left Saint Vincent and the Grenadines.

61. **Payment of benefit overseas:** Any benefit which is paid to a beneficiary by virtue of regulation 60 shall be paid in Saint Vincent and the Grenadines to such representative acting for and on behalf of the absent beneficiary as may be approved by the Director.

62. **Deferment of claims and forfeiture:** (1) If any person who is claiming or who has been awarded any benefit fails to furnish any information required of him, or to attend when required to do so for medical or other examination by virtue of these Regulations or of the National Insurance (Determination of Questions) Regulations, consideration of that claim or of any question arising in relation thereto may be deferred until the information has been furnished or the report of the examination has been received, and the determining authority may direct that any benefit payable in consequence of its award or decision shall be forfeited for the period of such failure.
(2) A person who has been awarded benefit under these Regulations and who fails to comply with the provisions of regulation 52 shall be liable to forfeit that benefit for such period not exceeding six weeks as the Director may determine.

63. Persons undergoing imprisonment or detention: (1) Subject to paragraph (2), a person shall be disqualified from receiving any benefit for any period during which that person is undergoing imprisonment or detention in legal custody.

(2) Where the Board is satisfied that an insured person undergoing imprisonment or detention has dependants who immediately before such imprisonment or detention, were wholly or mainly maintained by him, it may authorize the payment to or on behalf of those dependants of an amount not exceeding one half of the benefit which would otherwise be payable to the insured person during such a period as the Board may allow, having regard to the particular circumstances of the case.

64. Offences: If any person contravenes or fails to comply with any requirement of these Regulations he commits an offence and is liable on summary conviction to a fine not exceeding two hundred and fifty dollars or, where the offence continues after conviction to a further fine not exceeding one hundred dollars for each day the offence continues.

PART VI

NATIONAL PROVIDENT FUND BENEFITS

65. Rights of members of National Provident Fund: (1) Every member of the National Provident Fund at the appointed day who has contributions paid into, or due, to his account at that date, shall have his future entitlement to benefit under PART III of the National Provident Fund Act (No. 1 of 1970) preserved, notwithstanding that the Act is repealed and applications for such benefit shall continue to be dealt with under regulations 15 to 20 of the National Provident Fund Regulations, 1971 (No.41 of 1971) as if that Act had not been repealed.
For the purpose of paragraph (1), in regulations 15 to 20 of the National Provident Fund Regulations, 1971 (No.41 of 1971)

"office of the Fund" means the National Insurance Office:

"Director" means the person referred to as "the Director" in the Act:

"Board of Control" means the National Insurance Board.

66. Interest on Accounts after Appointed Day: (1) The Board may, after consultation with the Investment Committee and with the concurrence of the Minister, from time to time fix the rate of interest to be allowed on accounts after the Appointed Day and interest shall be placed to the account of members from dates to be determined by the Board.

(2) In determining the rate of interest the Board shall have regard to the net income of the National Provident Fund Branch of the Fund for the previous financial year and the rate shall be fixed so that the amount of interest allocated shall not exceed the net income of the Branch for the previous financial year.

67. Refund ~ National Provident Fund contributions paid in error: (1) Where after the Appointed Day the Director is satisfied that any amount has been paid to the National Provident Fund in excess of the amount which was due to be paid, he may, subject to paragraphs 2, 3 and 4, refund the amount so paid in excess to the person by whom it was paid.

(2) A claim for the excess shall be made within three years of the date on which it was so paid in error, but if the benefit has already been paid, such excess shall not be refunded but shall be deemed to have been properly paid, if the Director is satisfied that there was gross negligence on the part of the person who made the payment of contributions.
(3) If any amount is due from the person to whom refund of the excess would otherwise be made, the Director may retain the whole or any part of such excess payment and set it off against any such amount due.

(4) No refund shall be made without written application and no amount shall be offset except with the consent of the Director who may require such information as may be necessary to be furnished to determine the amount of the excess payment and no interest shall be paid on any excess contribution.

FIRST SCHEDULE

(Regulations 11, 18 and 27)

MEDICAL CERTIFICATES

1. In this Schedule, unless the context otherwise requires -'

'practitioner' means a medical practitioner.

2. A certificate shall be either on a form supplied by the Board or on such other form substantially similar as the Director may accept.

3. After a certificate based on an examination has been given, no further certificate based on that examination shall be furnished other than a duplicate certificate to replace the original certificate which has been lost or mislaid, and in that case the form shall be clearly marked 'Duplicate'.
4. Every certificate of sickness or invalidity shall be in writing in ink or other indelible substance, and shall contain the following particulars -

(a) the name of the insured person:

(b) the date of the examination on which the certificate is based:

(c) a concise statement of the nature of the disease or disablement by which the insured person is in the practitioner's opinion, at the time rendered incapable of work:

(d) the date on which the certificate is given:

(e) the address of the practitioner.

5. The Statement of the incapacitating disease or disablement shall specify the cause of incapacity as precisely as the Practitioner's knowledge of the condition of the insured person's at the time of the examination permits:

Provided that, if in the practitioners' opinion a disclosure to the insured person of the precise cause would be prejudicial to his well being, the certificate may contain a less precise statement.
6. (1) In any case in which, in the opinion of the practitioner the insured person will become fit to resume work on a day later than the end of the 7th day after the date of the examination on which the certificate is based, the certificate shall specify the first-mentioned day.

(2) Subject to paragraph (1), the certificate shall cover a specified number of days or weeks from and including the date of the examination on which the certificate is based, and which shall not exceed 28 days or where at that date the incapacity has continued for not less than 28 days, 13 weeks.

(3) In computing any period of time in relation to any certificate given under this regulation Saturdays and Sundays shall not be disregarded.

CONFINEMENT

7. Every' certificate' of confinement or expected confinement shall be in writing in ink or other indelible substance and shall be signed by a medical practitioner or a registered midwife attending the expectant mother after the relevant particulars have been entered.

8. Every certificate of confinement or expected confinement shall contain the following particulars -

(a) name of expectant mother-
(b) in the case of a certificate of expected confinement the week of expected confinement and the date of the examination on which the certificate is based:

(c) the date on which the certificate is given:

(d) the address of the practitioner or midwife.

SECOND SCHEDULE

(Regulations 37 (1) (c))

REDUCED AGE PENSION

WEEKLY CONTRIBUTION RATES

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THIRD SCHEDULE

Regulations 41

FUNERAL GRANTS

The amount of a Funeral Grant shall be- (Click here for 2002 Amendment)

(a) with the respect to the death or an insured person, an invalidity pensioner, or an age pensioner: $2,000.00

(b) with respect to the death of the spouse of an insured person, an invalidity pensioner, or an age pensioner, $1,000.00

(c) with respect to the death of a dependent child of an insured person, an invalidity pensioner or an age pensioner: based on the age of the child at death:

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<tr>
<th>Age at death</th>
<th>Amount of Grant</th>
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Dated the 4th day of August 1994.

JAMES F. MITCHELL

Minister of Finance

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