[THE ICT EMPLOYEES' SOCIAL SECURITY (BENEFIT) REGULATIONS, 2017]

S.R.O. 115(KE)/2017:

- 1. Title and application. (1) These regulations may be called the ICT Employees' Social Security (Benefit) Regulations, 2017.
 - (2) These shall come into force at once.
- 2. Definitions. In these regulations, unless the context otherwise requires -
 - (i) The following expressions shall have the meanings hereby, respectively assigned to them, that is to say -
 - (a) "Ordinance" means the Provincial Employees' Social Security Ordinance, 1965.
 - (b) "Section" means a section of the Ordinance.
 - (c) "Hospital" means a Social Security Hospital or any other hospital's dispensary with which arrangements have been made by the Institution for treatment of its employees.
 - (ii) Other expressions shall have the meanings assigned to them in section 2 of the Ordinance.

Medical Care

- 3. Subject to any notification by Government made under section 1 (3) of the Ordinance and to the provisions of these regulation, medical care shall be given to a secured person and/or his dependents whenever he or they are suffering from any morbid conditions.
- 4. (1) A person in receipt of injury benefit, disablement pension for loss of earning capacity not less than 50 per cent, or a survivor's pension shall be entitled to medical care for so long as it is considered necessary for his recovery, or for the period laid down in section 44 (2) of the Social Security Ordinance, 1965, whichever period is shorter.
- (2) Subject to satisfaction of the condition regarding contributions laid down in section 38 (1) of the Social Security Ordinance, 1965 any other secured person shall be entitled to medical care for so long as it is considered necessary or for six months after he has exhausted his title to sickness benefit, whichever period is shorter.
- 5. Every secured person shall, at the time of his registration as a secured person, be notified of the dispensary responsible for his medical care and that of his dependants, and every application for medical care shall in the first instance, be made to the dispensary so specified, in order that he may be examined by a medical practitioner.

- 6. (1) Medical care shall be provided with a view to maintaining, restoring or improving the health and ability to work of secured persons.
 - (2) Subject to these regulations medical care shall be given to a secured person suffering from a morbid condition as laid down in the Appendix to these regulations.
 - (3) Medical care shall be provided only if the secured person satisfies the condition as laid down in Sections 35, 36, 37, 38, 39 and 40 of the Social Security Ordinance, 1965.
 - (4) Medical care shall be provided at a dispensary maintained by the Institution.
 - (5) A dispensary shall be established in an area in which sufficient number of secured persons work or reside.
 - (6) A dispensary shall be located in a building or in a part of a building suitable for that purpose and set apart for the exclusive use of persons entitled to medical care.
- 7. No specific form of application in writing shall be required from persons desiring medical care, except in the case of a pregnant secured woman claiming antenatal confinement and postnatal medical care under the provisions of Section 38 (2) of the Social Security Ordinance, 1965, who shall submit an application on the appropriate form which will be provided by the Dispensary at which she attends for the purpose of obtaining the treatment.
- 8. A secured person or his dependent who has applied for and is entitled to receive medical care under any of the provisions of these regulations -
 - (i) shall submit himself to be medically examined by a medical practitioner or other qualified person authorized by the Institution to undertake such an examination, if directed by the Institution to do so;
 - (ii) shall not refuse to be medically treated in hospital if the Institution considers it to be necessary;
 - (iii) shall comply with the instructions given by the medical practitioner or, where appropriate of the midwife, in charge of the case;
 - (iv) shall not, while in receipt of medical treatment, do anything which might retard or prejudice his recovery; and
 - (v) shall obtain the pharmaceutical supplies prescribed by his medical practitioner from the appropriate dispensary.

- 9. (1) After the examination has taken place, the medical practitioner shall prescribe any pharmaceutical supplies that he considers necessary, provided that they are listed on the Schedule of Pharmaceutical Supplies issued by the Institution.
 - (2) He shall state when and where the next examination will take place.
 - (3) The secured person or his dependant shall take the prescription to the dispenser, who will supply the items prescribed. The recipient shall acknowledge the receipt of the items by signing at the appropriate space on the prescription form, or by making his thumb-print thereon, as the case may be.
 - (4) He shall continue to attend the dispensary as long as he is directed to do so.
- 10. (1) In order to obtain medical care, a secured person or his dependant shall, unless prevented from doing so by ill-health, apply personally to the medical practitioner at the dispensary responsible for treatment, bringing with him his Registration Card and the certificate referred to in Regulations 14, 15 or 16 of these regulations as the case may be.
 - (2) If the person is unable, by reason of ill-health to apply personally for medical care, an application accompanied by the Registration Card and the certificate referred to in Regulation 18 (i) above shall be made on his behalf by a dependant or other agent.
- 11. The Commissioner of IESSI may however reimburse the expenses incurred by the Secured person from Government Hospital on medical treatment obtained from Hospitals or Dispensaries within the ICT area other than those setup by the Institution by deciding the each case on merits.
- 12. Any information gained by a medical practitioner on a medical board or any other employee of the Institution in relation to the medical treatment of a secured person or his dependant shall be treated as confidential and shall not be disclosed to any one unless required for the use of the Institution or otherwise required to be disclosed under any other law.
- 13. The cost of transporting an incapacitated secured person or an incapacitated dependant shall be payable by the Institution if, in the opinion of the medical practitioner in attendance, the incapacitated person cannot receive appropriate care in the locality of his residence, or his place of employment. In such a case, the cost of the transport and, if considered by the medical practitioner to be necessary, that of a person to accompany him to and from the nearest place where he can receive adequate treatment, shall be payable by the Institution from nearest Government Hospital as general patient.

PART II

BENEFIT PAYABLE IN

- 14. Sickness Benefits. An employer shall furnish to a secured person, on demand, if he wishes to claim sickness benefit, or medical care or if a dependent of the secured person wishes to claim medical care, a certificate stating -
 - (i) that he has been employed continuously by the employer for at least ninety days or, if not, stating the number of days for which he has been employed by the employer in the six months immediately preceding the onset of his incapacity;
 - (ii) the rate of wage last paid.
- 15.(1) A secured person desiring to claim sickness benefit shall obtain from his employer the certificate referred to in Regulation 14 and shall take it to the dispensary to which he had been allotted, together with his Registration Card, for the purpose of examination and treatment, and for the issue of a medical certificate of incapacity described as First Certificate (Form M-1) containing on the reverse of the certificate a claim form for sickness benefit. The Certificate of Incapacity (M-1, M-2, M-3, attached as appendices IX, X and XI) will be prepared in triplicate, original for the lodging of the claim with the local office of the Institution, duplicate for the information of the employer and triplicate to be retained in the dispensary.
 - (2) The secured person shall then take the following documents to the Local Office of the Institution at which he has been registered -
 - (i) the certificate referred to in Regulation 14 of these regulations;
 - (ii) the First Certificate of incapacity (Form M-1) duly completed in the space on the reverse of the certificate headed "Claim for sickness benefit".
 - (iii) his Registration Card.
 - (3) The deposit at the Local Office of these documents shall constitute a claim for sickness benefit, as soon as the reverse of the Medical Certificate headed 'Claim' has been completed. The staff of the local office shall render every assistance in the completion of these formalities.
- 16.(1) The secured person shall continue to attend the medical practitioner as long as he directed to do so and he shall obey an instructions that he is given regarding behavior and diet.
 - (2) The medical practitioner shall issue 'Intermediate' medical certificate (Form M-2) in respect of any examination after the first, until the recovery of the secured person permits him to return to work either at once or within three days of the date of examination, in which case, he shall issue a 'Final Certificate' (Form M-3).

- (3) The secured person shall take or send the 'Intermediate' and 'Final' certificates, without delay, to the Local Office of the Institution which is dealing with his claim after completing the statement on the reverse of the medical certificate that he has done no work since his claim, after completing the statement on the reverse of the medical certificate that he has done no work since the date of the issue of the previous certificate.
- (4) Sickness benefit shall be payable for all days covered by the medical certificate of incapacity issued by approved medical practitioner, except for the first three days of incapacity (hereinafter referred to as the 'waiting days'), for which no benefit is payable. Provided that sickness benefit shall be payable for those days if the incapacity claimed for is a recrudescence of a period of incapacity which terminated not more than fifteen days before such recrudescence.
- 17. If a secured person, although not incapacitated himself, has been prevented from attending his place of employment by reason of the fact that he had been certified by a medical practitioner as having been in contract with an infectious disease, he shall be entitled to claim sickness benefits as if he himself had been incapacitated. He shall submit the certificate referred to in paragraph 14 of these regulations to the Local Office of the Institution, and his entitlement shall be subject to the same conditions regarding the number of contributions paid, the waiting days and the continued submission of such certificates, as if he had been himself incapacitated.
- **18. Maternity benefit.** A secured woman who satisfies the contribution requirements laid down by Section 36 of the Ordinance, and desires to claim the cash maternity benefit provided by that Section, shall obtain
 - (i) from her medical practitioner, a certificate stating the expected date of her confinement, not earlier than eight weeks before that date; and
 - (ii) from her employer, a certificate which he shall furnish on demand, stating -
 - (a) that she has been continuously employed by the employer for at least a year immediately preceding her expected date of confinement, as stated on the certificate referred to at (i) above, or, if not, stating the number of days for which she has been so employed in the year immediately preceding the expected date of confinement; and
 - (b) the rate of wages last paid.

She shall take these certificates together with her Social Security Registration Card to the Local Office of the Institution at which she is registered and the complete a claim for maternity benefit on the appropriate form.

19. The secured woman shall submit herself for examination by a medical practitioner or an approved midwife, when required by them to do so, and shall comply with any instructions given by them regarding diet and behavior. The maternity benefit will be only for three children.

- 20. Injury benefit. A secured person who is incapacitated from work as the result of an employment injury arising out of and in the course of his employment, shall be entitled to claim injury benefit, if he takes to the Local Office at which he was registered within 48 hours of injury or causes to be submitted on his behalf the following documents: -
 - (i) a certificate from his employer, which he shall furnish on demand, stating -
 - (a) that he is employed by the employer; and
 - (b) the rate of wages last paid;
 - (ii) his Social Security Registration Card;
 - (iii) a 'First Certificate' of Incapacity, as provided by these regulations, duly completed in the space on the reverse of the certificate headed "Claim for Injury Benefit" on prescribed form.
- 21. Disablement Pensions and Disablement Gratuities. As soon as possible before an award of injury benefit is due to terminate because it will have been in payment for one hundred and eighty days, or by reason of the fact that the beneficiary is no longer of work, the Institution shall arrange for the secured person who has been receiving the payments to be examined by a Medical Board in order that the degree of disablement, if any, remaining at the end of the injury benefit period may be determined, and the secured person shall submit himself for examination as directed by the Local Office.
- 22. The degree of disablement shall be determined by a Medical Board in accordance with the provisions of the Schedule to these regulations and the Institution shall
 - (i) if the disablement has been assessed at a percentage at least 5% up to and including 20% award a disablement gratuity to the secured person at the rate fixed by Government by notification;
 - (ii) if the degree of disablement has been assessed at a percentage of 21% or more, up to and including 100% award a disablement person to the secured person at the rate fixed by Government notification, for such period as may have been specified by the Medical Board and shall arrange for such further examination as the Board has considered necessary. The pension shall continue in payment at the rate awarded until the death of the recipient or until it has been determined by the Board that the degree of disablement has changed, in which case the rate of pension shall be adjusted accordingly from the date of the revised assessment:

Provided that, if the degree of disablement falls below 21% the disablement pension shall cease to be payable and subject to sub clause (i) above, the secured person shall be eligible for a disablement gratuity.

- 23. No formal claim for a disablement gratuity or pension need be made by a secured person who is in receipt of injury benefit.
- 24. Survivor's Pension. (1) If a secured person dies as a result of an employment injury, a claim, on the appropriate form, shall be made to the Institution, and accompanied by a medical certificate signed by a medical practitioner, certifying that the death was the result of an employment injury, together with such evidence of birth, marriage and need as the Institution may require.
 - (2) Claims for a survivor's pension may be submitted by -
 - (a) the widow or widows of the secured person;
 - (b) a person having charge of the dependent children of the secured person;
 - (c) the needy widower of a secured woman;
 - (d) the dependent father of the secured person if he be alive, and if not, the dependent mother provided that there is no widow, or needy widower.
- (3) A child of the deceased secured person shall cease to be regarded as a dependent child if he is employed to the extent that his earnings exceed Rs. 15,000/- a month.
- 25. The widower of a deceased secured person or a father or mother of a deceased secured person, shall not be regarded as a needy widower, or a dependent, as the case may be, unless he can show to the satisfaction of the Institution, that he has been mainly dependent for his livelihood on the deceased secured person.
- 26. The second proviso to Section 42 (1) shall be applied as follows: -

The survivor's pension that would have been awarded under the said sub-section in the absence of the said proviso shall be calculated and if the total of such unreduced pensions exceeds the total disablement pension to which the secured person was, or would have been entitled, each survivor's pension as so calculated shall be reduced by the same proportion, that is to say, the proportion required to reduce the total of the survivor's pension to the amount of the said total disablement pension, and each survivor's pension as so reduced shall be the pension payable under the said Section.

27. If at any time it becomes necessary to review the amount of survivor's pensions in payment, whether as a result of any additional valid claim for a survivor's pension having been received or on the termination of any survivor's pension under section 42 (3), in order to affect the adjustment required by the said sub-section the method of calculation laid down in the preceding regulation shall be followed in determining the amount of each survivor's pension payable as the result of such review.

- 28. Death Grant. If a secured person dies while in receipt of or entitled to receive injury benefit, sickness benefit or medical care at the time of his death or while he is in receipt of a total disablement pension, a claim for a death grant may be made to the Institution, on the appropriate form, by any of the following persons the first named or second named taking precedence over the third
 - (i) the surviving widow or widows;
 - (ii) a needy widower, provided he can show to the satisfaction of the Institution, that he was mainly dependent for his livelihood on the earnings of his late wife;
 - (iii) the person who provided for the funeral.
- 29. The claim form, when completed, shall be accompanied by such evidence as the Institution may require including evidence of the identity of the claimant, certificate of death, certificate of marriage or other acceptable evidence of marriage. In the case of a claim by a widower the Institution may require evidence of need, and in the case of a claim by a person who provided for the cost of the funeral, evidence that he had done so.
- **30.** The Death Grant shall be calculated on the basis of daily rates of sickness benefit, injury benefit, or total disablement pension in payment, or payable, as the case may be, multiplied by thirty.
- 31. General. The rate of cash benefit payable shall be as fixed by Government by notification.
- 32. If a claimant who is entitled to any cash benefit is unable at any time to draw such benefit in person from a Local Office of the Institution by reason of illness or infirmity, he may, on the appropriate form which may be obtained on request from any Local Office or dispensary, authorise a person to act as agent to draw the benefit on his behalf. The agent so authorized shall present such form of authority, together with the Registration Card of the secured person, to the cashier at the office of payment, and shall sign on behalf of the secured person in acknowledgement of having received payment.
- 33. If a claimant is unable to produce a birth certificate or other satisfactory evidence of the exact date of birth of any child, the age on the first day of January next following shall be determined by the Institution on the basis of an examination of the child by a medical practitioner. For the purpose of determining the entitlement of the child to a survivor's, pension, his birthday shall, in such cases, be deemed by the Institution to be the first day of January.
- 34. (1) Cash benefit payments, including pensions, will normally be payable at the Local Office of the Institution at which the relevant claim was made as soon as the entitlement of the claimant to the benefit has been established.

- (2) Sickness Benefit or Injury Benefit will be payable as the second medical certificate of incapacity for work, issued to the secured person in accordance with the provisions of Regulation 14 of these regulations, has been received at the Local Office of the Institution at which a valid claim for benefit was made in respect of a period of incapacity lasting more than three days. Thereafter, further payments will be made on the days on which any further medical certificates from authorized medical practitioners are received at the Local Office.
- (3) Death Grant or Disablement Gratuity will become payable as soon as entitlement to the benefit has been established and a notice of the amount awarded has been sent to the claimant.
- (4) Maternity Benefit will be paid at monthly intervals, after the certificates referred to in Regulation 18 have been received in a Local Office in respect of valid claim and a notice of the amount awarded has been sent to the claimant.
- (5) Disablement Pensions and Survivor's Pensions will be payable at monthly intervals, the first payment becoming due as soon as the title to the benefit has been established, and a notice of the amount awarded has been sent to the claimant.
- 35. Beneficiaries may request the Local Office to send any cash benefit by post. In such cases, a money order for the amount of the benefit will be sent to the beneficiary to the address given by him to the Local Office of the Institution for this purpose. Any payment so made will be at the risk of the beneficiary and in the event of it not being received by him, the Institution shall not be liable to replace the amount not received.
- 36. Any benefit claimed, and awarded but not collected, will become void after one year from the date on which it first became payable.
- 37. Every person in receipt of any cash benefit shall be responsible for notifying the Local Office from which it is paid of any change of circumstances that may affect the title to the cash benefit, without delay. If any overpayment arises through his failure to do so, he will be held liable to refund amount of benefit overpaid.
- 38. Every secured person shall be supplied with a registration card which he/she shall be required to produce on applying for any benefit under the Ordinançe. If for any reason, a replacement of the card is required, the Institution may make a charge of Rs.50/- for a new card.

SCHEDULE

DEGREE OF DISABLEMENT

PART - I

For the purpose of the assessment of the degree of disablement in the form of a percentage as provided in Section 2(7) of the Ordinance, where as a result of the employment injury the claimant has suffered an injury specified in the second column hereunder then the loss of earning capacity suffered by the claimant as a result of that injury shall be treated as resulting in the degree of disablement set against such employment injury in the second column hereunder: -

Serial No.	Description of injury	Degree of disablement percent
1	2	3
1,	Los of both hands or amputation at higher sites	100
2.	Loss of a hand and a foot	100
3.	Double amputation through 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	al 100
5.	Very severe facial disfigurement	100
6.	Absolute deafness	100
	AMPUTATION CASES - UPPER LIMBS (EITHER AR	RM)
7.	Amputation through shoulder joint	90
8.	Amputation below shoulder with stump less than 8 inches from tip of acromion	80
9.	Amputation from 8 inches from tip of acromion to less than 8 ½ inches below tip of olecranon	70
10.	Loss of a hand or the thumb and four fingers of one hand or amputation from 4 1/2 inches below tip of olecranon	d 60
11.	Loss of thumb	30

1	2	3
12.	Loss of thumb and its metacarpal bone	40
13.	Loss of four fingers of one hand	50
14.	Loss of the three fingers of one hand	30
15.	Loss of to fingers of one hand	20
16.	Loss of terminal phalanx of thumb	20
	AMPUTATION CASES LOWER LIMBS	
17.	Amputation of both feet resulting in end-bearing stumps	90
18.	Amputation through both feet proximal to the metatarso- phalangeal joint	80
19.	Loss of all toes of both feet through the metatarso- phalangeal joint	40
20.	Loss of all toes of both feet proximal to the proximal inter-phalangeal joint	30
21.	Loss of all toes of both feet distal to the proximal inter- phalangeal joint	20
22.	Amputation at hip	90
23.	Amputation below hip with stump not exceeding 5 inches in length measured from tip of great trochanter	80
24.	Amputation below tip with stump exceeding 5 inches in length measured from tip of great trochanter, but not beyond middle thigh	70
25.	Amputation below middle thigh to 3 1/2 inches below knee	60
26.	Amputation below knee stump exceeding 3 1/2 inches but not exceeding 5 inches	50
27.	Amputation below knee with stump exceeding 5 inches	40
28.	Amputation of one foot resulting in end-bearing stump	30
29.	Amputation through one foot proximal of the metatarso- phalangeal joint	30

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1	2	3
	Any other toe –	
47.	Through metatarso-phalangeal joint	3
48.	Part, with some loss of bone	1
	Two toes of one foot, excluding great toe -	
49.	Through metatarso-phalangeal joint	5
50.	Part, with some loss to bone	2
51.	Through metatarso-phalangeal joint	3
52.	Part, with some loss of bone	3
	Four toes of one foot, excluding great toe -	
53.	Through metatarso-phalangeal joint	9
54.	Part, with some loss of bone	3

PART - II

In case of any disablement resulting from any injury not specified in Part I of this Schedule the extent of such disablement shall be assessed in such manner as may be deemed proper having regard to the nature of the disablement and, where appropriate, to the percentages set out in Part I of this Schedule.