

NATIONAL INSURANCE AND SOCIAL SECURITY ACT, 1969.

**THE NATIONAL INSURANCE AND SOCIAL SECURITY
(INDUSTRIAL BENEFIT MEDICAL CARE)
REGULATIONS, 1969.**

In exercise of the powers conferred upon the Minister by sections 19, 20, 21, 24 and 51 of the National Insurance and Social Security Act, 1969, and by virtue and in exercise of all other powers enabling him in that behalf the following Regulations are hereby made :—

1. These Regulations may be cited as the National Insurance and Social Security (Industrial Benefit Medical Care) Regulations, 1969, and shall come into operation on the day declared pursuant to section 19(3) of the Act. Citation and commencement.

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

“the Act” means the National Insurance and Social Security Act, 1969; No. 15 of 1969.

“employment injury” has the same meaning as in paragraph (b) of sub-section (1) of section 19 of the 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 out-patient departments maintained in connection with any such institution or home as aforesaid;

“injured person” means a person suffering from a morbid condition due to employment injury arising out of and in the course of insurable employment on or after the declared day and shall include a person suffering from any sequela to that condition;

“medical adviser” means such medical officer as may be designated by the Board;

“medical care” includes —

(i) general medical practitioner care including medical examinations, diagnosis and treatment and in areas where general medical practitioner care is not available, shall include such para-medical care and treatment as may be approved by the Board;

(ii) specialist care and treatment at hospitals and such specialist care and treatment as may be available at the out-patient departments of hospitals;

- (iii) the supply of essential pharmaceutical products and dressings prescribed by a registered medical practitioner in accordance with any formulary laid down by the Board;
- (iv) medical care in hospitals including free board, lodging, treatment and nursing in cases where, owing to the nature of the employment injury, medical care cannot be provided otherwise;
- (v) the provision, repair and renewal within limits laid down by the Board, of orthopaedic and prosthetic appliances necessary for the rehabilitation, or the reduction of the incapacity for work, of the injured person arising as a direct consequence of the employment injury; but shall not include first aid treatment given by any person other than a registered medical practitioner;

“registered medical practitioner” means a person duly registered as a medical practitioner under the laws for the time being in force relating to the registration of medical practitioners.

Entitlement to medical care for employment injury.

3. (1) Where an injured person requires medical care for any morbid condition due to an accident or prescribed disease arising out of or in the course of insurable employment on or after the first day of January, 1970 he shall be entitled to medical care from the date of that accident or the date of development of that prescribed disease for as long as the need for such care continues or recurs.

(2) There shall be no qualifying contribution condition for the provision of medical care in accordance with this regulation.

(3) Medical care shall be provided with a view to maintaining, restoring or improving the health, and ability to work, of the injured person.

(4) Medical care shall be given in such a manner as to secure maximum efficiency within the scope of the benefit at the minimum reasonable cost.

(5) The Board may make such arrangements as it thinks fit with registered medical practitioners for general medical practitioner care.

Supply of pharmaceutical products.

4. (1) The Board may specify a formulary of pharmaceutical products and dressings which may be prescribed by a registered medical practitioner for an injured person; and in areas where there is no registered medical practitioner, such formulary may be applied by the Board in whole or in part to prescriptions by any para-medical person approved by the Board to give medical practitioner care.

(2) The Board may make arrangements to supply such products and dressings itself or may arrange for their supply through pharmacies, drug stores, dispensaries, hospitals, registered medical practitioners or other agencies, or in more than one of those ways, as to the Board may seem convenient for providing an efficient service in any area.

(3) Such products and dressings shall be prescribed as economically as possible and only as far as they are necessary for the proper treatment of the person for whom they are prescribed.

(4) If in the opinion of the medical adviser equally good results can be obtained by the use of either of two pharmaceutical products, preference shall be given to the less expensive of the two.

(5) The quantity of pharmaceutical products and dressings prescribed for each injured 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.

(6) Instructions for the use of the pharmaceutical products and dressings prescribed shall be given by the registered medical practitioner to the injured person :

Provided that in areas where there is no registered medical practitioner such instructions shall be given by such para-medical person as may be approved by the Board.

5. (1) The Board may make arrangements with the owners of hospitals, whether public or private, for the medical care of injured persons.

Arrangements
with hospitals
for provision
of medical
care.

(2) In making arrangements for medical care with hospitals under paragraph (1) of this regulation, the Board shall have power to make these arrangements on the basis of refunding the agreed cost of medical care for each injured person or of making a grant, periodical or otherwise, for the medical care of all injured persons or partly in one method and partly in the other, as may be desirable having regard to the interests of injured persons.

(3) If the Board is of the opinion that further public provision of facilities for hospital medical care is necessary for injured persons, it shall consider with the appropriate public authorities the extension of existing public services before deciding to set up its own services.

(4) Subject to the provisions of paragraph (3) of this regulation, the Board, if it is satisfied that public provision has not been, and is unlikely to be, made for further hospital medical care for injured persons and is of opinion that such provision is essential, may make such provision either itself or by arrangement under paragraph (1) of this regulation with hospitals other than public hospitals.

(5) Nothing in this regulation shall be construed as preventing the Board, if it so thinks fit, from entering into agreements to reserve for injured persons a specified number of beds in a hospital in return for a payment by the Board of a contribution towards the

operation of that hospital or for extension of the available facilities for the exclusive use of injured persons.

Duties of injured persons in relation to medical care.

6. An injured person who has applied for and is entitled to medical care —

- (a) shall remain under the care and treatment of the registered medical practitioner to whom he first applied for general practitioner care unless in the opinion of the Board the general practitioner care should be continued by another registered medical practitioner or a hospital;
- (b) shall comply with the instructions given by the registered medical practitioner in charge of his case;
- (c) shall not, while under medical care, do anything which might retard or prejudice his recovery;
- (d) shall submit himself to be medically examined by any medical referee approved by the Board to undertake such an examination; and
- (e) shall not refuse to receive medical care in hospital if such care is considered essential in his case.

Medical case histories.

7. Where arrangements are made by the Board with registered medical practitioners for the medical care of injured persons, the medical adviser may require them to submit a medical case history for any case in which he is of the opinion that such a case history is necessary to ascertain whether the charges made (if any) or the pharmaceutical products and dressings prescribed are reasonable.

Reimbursement of medical care in exceptional cases.

8. (1) If arrangements for medical care of injured persons have been made under the foregoing provisions of these Regulations the Board shall not be empowered to re-imburse other medical care expenses incurred by an injured person except in cases of extreme emergency in which the medical care arrangements made by the Board are not immediately available and delay in attending immediately to the person may have caused serious risk to his life or grave detriment to his health.

(2) In any case of emergency in which medical care expenses may be re-imbursed under paragraph (1) of this regulation, the reimbursement shall be made within such limits as may be determined by the Board.

Transitional provisions.

9. Pending the making of arrangements for medical care under these Regulations, either generally or for a particular area, the Board may re-imburse to an employer such expenses as may be incurred by him after the declared day in continuation of any arrangements for the medical care of employment injury cases made by the employer under the Workmen's Compensation Ordinance :

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Provided that the Board shall not be liable under this regulation for medical care expenses of any case of employment injury arising out of and in the course of employment before the declared day.

10. All information regarding the health of any person to whom medical care is being or has been given shall be strictly confidential and no other person, apart from officers of the Board, the National Insurance Commissioner, tribunals and medical boards appointed or constituted under Regulations made under the Act, shall have access to any medical case history or any other medical document or record in connection with the case.

Confidentiality
of medical
care

11. An injured person shall not be entitled to medical care outside Guyana at the cost of the Board unless in the opinion of the Board the care is justified by the circumstances of the case and the necessary medical care cannot be provided in Guyana:

Medical
care outside
Guyana.

Provided that the Board shall before deciding that the necessary medical care cannot be obtained in Guyana, obtain a certificate to that effect from the Chief Medical Officer of the Ministry of Health.

12. The Board may re-imburse to an injured person or to his employer any reasonable costs necessarily incurred in the conveyance of the injured person and any necessary escort to or from any place at which he is required to attend for medical care under these Regulations:

Travelling
Expenses.

Provided that —

- (a) the Board shall not refund any expenses which for an individual journey amount to less than twenty-five cents; and
- (b) except in a case of emergency, no reimbursement of any expenses whatsoever shall be made for the conveyance of an injured person to a place for medical care if he could reasonably have obtained the necessary medical care at a place nearer to his own home or to the place of employment where the accident occurred.

Made this 15th day of December, 1969.

W. CARRINGTON
Minister of Labour and Social Security.