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WARTA KERAJAAN PERSEKUTUAN

*FEDERAL GOVERNMENT
GAZETTE*

KAEDAH-KAEDAH KUMPULAN WANG SIMPANAN
PEKERJA (PINDAAN) 2017

*EMPLOYEES PROVIDENT FUND (AMENDMENT)
RULES 2017*

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AKTA KUMPULAN WANG SIMPANAN PEKERJA 1991

KAEDAH-KAEDAH KUMPULAN WANG SIMPANAN PEKERJA (PINDAAN) 2017

PADA menjalankan kuasa yang diberikan oleh seksyen 73 Akta Kumpulan Wang Simpanan Pekerja 1991 [*Akta 452*], Lembaga membuat kaedah-kaedah yang berikut:

Nama

1. Kaedah-kaedah ini bolehlah dinamakan **Kaedah-Kaedah Kumpulan Wang Simpanan Pekerja (Pindaan) 2017**.

Pindaan kaedah 2

2. Kaedah-Kaedah Kumpulan Wang Simpanan Pekerja 1991 [*P.U. (A) 493/1991*], yang disebut “Kaedah-Kaedah ibu” dalam Kaedah-Kaedah ini, dipinda dalam kaedah 2 dengan memasukkan selepas takrif “kad pengenalan” takrif yang berikut:

‘ “pengamal perubatan berdaftar” ertinya pengamal perubatan yang berdaftar penuh di bawah seksyen 14 Akta Perubatan 1971 [*Akta 50*];’.

Pindaan kaedah 41

3. Kaedah-Kaedah ibu dipinda dalam kaedah 41—

(a) dengan menggantikan subkaedah (2), (3), (4), (5) dan (6) dengan subkaedah yang berikut:

“(2) Jika notis pengeluaran dibuat atas alasan bahawa ahli Kumpulan Wang tidak berupaya dari segi fizikal atau mental untuk bekerja, ahli Kumpulan Wang itu atau pemohon itu hendaklah memberikan notis pengeluaran kepada Lembaga mengikut apa-apa cara yang ditentukan oleh Lembaga bersama-sama dengan—

(a) laporan perubatan daripada mana-mana pengamal perubatan berdaftar yang menyatakan bahawa—

- (i) ahli Kumpulan Wang itu tidak berupaya dari segi fizikal atau mental untuk bekerja; atau
- (ii) ahli Kumpulan Wang itu perlu dirujuk kepada Lembaga Perubatan; dan

(b) apa-apa dokumen lain yang ditentukan oleh Lembaga.

(3) Apabila notis pengeluaran di bawah subkaedah (2) diterima, Lembaga boleh merujuk ahli Kumpulan Wang itu kepada Lembaga Perubatan yang terdiri daripada tidak kurang daripada dua orang pengamal perubatan berdaftar yang dilantik oleh Lembaga dan Lembaga Perubatan itu hendaklah memeriksa ahli Kumpulan Wang itu dan mengemukakan kepada Lembaga, perakuan dan pandangannya tentang ketidakupayaan ahli Kumpulan Wang itu untuk bekerja mengikut apa-apa cara yang ditentukan oleh Lembaga dan menurut garis panduan bagi pengeluaran atas sebab hilang upaya yang dikeluarkan oleh Lembaga.

(4) Lembaga Perubatan boleh meminta ahli Kumpulan Wang itu untuk mengemukakan laporan atau dokumen tambahan dan melakukan pemeriksaan susulan sebelum Lembaga Perubatan mengemukakan perakuan dan pandangan berhubung dengan ketidakupayaan ahli Kumpulan Wang itu untuk bekerja.

(5) Jika ahli Kumpulan Wang tidak berpuas hati dengan perakuan dan pandangan Lembaga Perubatan di bawah subkaedah (3), ahli Kumpulan Wang itu boleh memohon secara bertulis kepada Lembaga untuk dikaji semula perakuan dan pandangan Lembaga Perubatan itu dan apa-apa keputusan yang dibuat oleh Lembaga adalah muktamad.

(6) Permohonan di bawah subkaedah (5) hendaklah dibuat tidak lewat daripada tiga puluh hari dari tarikh ahli Kumpulan Wang itu

diberitahu mengenai perakuan dan pandangan Lembaga Perubatan itu mengikut apa-apa cara yang ditentukan oleh Lembaga.”; dan

(b) dengan memasukkan selepas subkaedah (6) subkaedah yang berikut:

“(6A) Jika Lembaga tidak berpuas hati dengan perakuan dan pandangan Lembaga Perubatan di bawah subkaedah (3), Lembaga boleh merujuk kepada Lembaga Perubatan Khas untuk dikaji semula perakuan dan pandangan Lembaga Perubatan itu dan Lembaga Perubatan Khas hendaklah mengemukakan kepada Lembaga, perakuan dan pandangannya tentang ketidakupayaan ahli Kumpulan Wang itu untuk bekerja mengikut apa-apa cara yang ditentukan oleh Lembaga.

(6B) Lembaga boleh mengecualikan pemakaian subkaedah (3) dan (4) dan menggunakan laporan perubatan yang dikemukakan di bawah perenggan (2)(a) bagi maksud pengeluaran di bawah perenggan 53B(2)(c), 54(1)(c) atau 70C(b) Akta jika Lembaga berpuas hati bahawa ahli Kumpulan Wang tidak berupaya dari segi fizikal atau mental untuk menghadiri diri untuk pemeriksaan oleh Lembaga Perubatan.”.

Dibuat 13 September 2017

[9/1/GUB(U)-7 Vol. 4.; KK/SID/(S)/9/419/379/23/1 Jld.39; PN(PU2)498/X]

TAN SRI SAMSUDIN BIN OSMAN

Pengerusi

Lembaga Kumpulan Wang Simpanan Pekerja

EMPLOYEES PROVIDENT FUND ACT 1991

EMPLOYEES PROVIDENT FUND (AMENDMENT) RULES 2017

IN exercise of the powers conferred by section 73 of the Employees Provident Fund Act 1991 [Act 452], the Board makes the following rules:

Citation

1. These rules may be cited as the **Employees Provident Fund (Amendment) Rules 2017**.

Amendment of rule 2

2. The Employees Provident Fund Rules 1991 [*P.U. (A) 493/1991*], which are referred to as the “principal Rules” in these Rules, are amended in rule 2 by inserting after the definition of “identity card” the following definition:

‘ “registered medical practitioner” means medical practitioner who is fully registered under section 14 of the Medical Act 1971 [*Act 50*];’.

Amendment of rule 41

3. The principal Rules are amended in rule 41—

(a) by substituting for subrules (2), (3), (4), (5) and (6) the following subrules—

“(2) Where the notice of withdrawal is made on the ground that the member of the Fund is physically or mentally incapacitated from engaging in an employment, the member of the Fund or the applicant shall give a withdrawal notice to the Board in any manner as may be determined by the Board together with—

(a) a medical report from any registered medical practitioner which states that—

- (i) the member of the Fund is physically or mentally incapacitated from engaging in an employment; or
- (ii) the member of the Fund has to be referred to the Medical Board; and

(b) any other documents as may be determined by the Board.

(3) When the withdrawal notice under subrule (2) is received, the Board may refer the member of the Fund to the Medical Board comprising of not less than two registered medical practitioners appointed by the Board and the Medical Board shall examine the member of the Fund and submit to the Board, its certifications and recommendations on the inability of the member of the Fund from engaging in an employment in any manner as may be determined by the Board and in accordance with the guidelines for incapacitation withdrawal issued by the Board.

(4) The Medical Board may request the member of the Fund to submit report or additional documents and do follow-up examinations before the Medical Board gives certifications and recommendations on the inability of the member of the Fund from engaging in an employment.

(5) Where the member of the Fund is dissatisfied with the Medical Board's certifications and recommendations under subrule (3), the member of the Fund may apply in writing to the Board for the Medical Board's certifications and recommendations to be reviewed and any decisions made by the Board are final.

(6) The application under subrule (5) shall be made not later than thirty days from the date the member of the Fund is informed of the Medical Board's certifications and recommendations in any manner as may be determined by the Board.”; and

(b) by inserting after subrule (6) the following subrules—

“(6A) Where the Board is dissatisfied with the Medical Board’s certifications and recommendations under subrule (3), the Board may refer to the Special Medical Board for the Medical Board’s certifications and recommendations to be reviewed and the Special Medical Board shall submit to the Board, its certifications and recommendations on the inability of the member of the Fund from engaging in an employment in any manner as may be determined by the Board.

(6B) The Board may exclude the application of subrules (3) and (4) and use the medical report submitted under paragraph (2)(a) for the purposes of withdrawal under paragraph 53B(2)(c), 54(1)(c) or 70C(b) of the Act if the Board is satisfied that the member of the Fund is physically or mentally incapacitated to present himself for examination by the Medical Board.”.

Made 13 September 2017

[9/1/GUB(U)-7 Vol. 4.; KK/SID/(S)/9/419/379/23/1 Jld.39; PN(PU2)498/X]

TAN SRI SAMSUDIN BIN OSMAN
Chairman
Employees Provident Fund Board