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**THE NATIONAL SOCIAL SECURITY FUND (CLAIMS AND  
PAYMENTS FOR THE PENSIONS FUND BENEFITS) REGULATIONS**

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Kenya

National Social Security Fund Act

## The National Social Security Fund (Claims and Payments for the Pensions Fund Benefits) Regulations

Legal Notice 84 of 2014

Legislation as at 31 December 2022

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The National Social Security Fund (Claims and Payments for the Pensions Fund Benefits) Regulations  
(Legal Notice 84 of 2014)

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**NATIONAL SOCIAL SECURITY FUND ACT**  
**THE NATIONAL SOCIAL SECURITY FUND**  
**(CLAIMS AND PAYMENTS FOR THE**  
**PENSIONS FUND BENEFITS) REGULATIONS**  
**LEGAL NOTICE 84 OF 2014**

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**1. Citation**

These Regulations may be cited as the National Social Security Fund (Claims and Payments for the Pension Fund Benefits) Regulations.

**2. Application**

These Regulations shall apply to the members of the Pension Fund.

**3. Interpretation**

In these Regulations, unless the context otherwise requires—

"approved form" means such forms as the Managing Trustee may, from time to time, approve for the purposes of making application for the payment of benefits under these Regulations;

"medical board" means medical boards established under the County Government for purposes of examining persons who have claims to any benefit under the Act;

"medical doctor" means any person registered as a medical practitioner under the Medical Practitioners and Dentists Act ([Cap. 253](#)) and appointed by the Board for the purposes of examining persons who have claims to any benefits under the Act.

**Part II – PENSION CLAIM APPLICATION**

**4. Form of claims**

A claim for the payment of a benefit shall be made in writing to the Managing Trustee in the approved form, which shall be supplied free of charge by the Board.

**5. Eligibility for making pension benefit claims**

A claim for a Pension Fund Benefit shall be made

- (1) In the case of an invalidity pension within three months of the date the member was declared invalid by the medical board;
- (2) In case of a retirement pension upon attaining the pensionable age;
- (3) In case of a survivor's benefit upon the death of the member; and

- (4) In the event that a member dies without nominating dependants the processing of the survivor benefit claims shall be deferred for sixty days after death of member to allow all potential beneficiaries for time to lodge their claim.

## **6. Effect of the claims**

Where a claim for invalidity pension, is made after the lapse of the application window provided in regulation 5(1), as the case may be, the claimant shall be required to seek fresh re-examination by the medical board and a new certificate of invalidity issued.

## **7. General information to be furnished by claimant**

A person who makes a claim for the payment of a benefit shall, for the purpose of determining the claim furnish certificates, documents, information and evidence as may be required by the Managing Trustee including a statutory declaration as to the truth of any statement of fact made by the claimant in the claim or in any evidence submitted by the claimant.

## **8. Information and documents to accompany retirement pension claim**

A claim for a retirement pension shall be accompanied by retirement, termination or dismissal letter from the last employer.

## **9. information and documents to accompany a survivor's pension claim**

- (1) A claim for a survivor's pension shall be accompanied by—
  - (a) an original death certificate;
  - (b) a copy of deceased identity document;
  - (c) evidence of the claimant's own identity and relationship to the deceased member;
  - (d) information about other relatives of the deceased, and
  - (e) confirmation from county administration.
- (2) Where a member dies abroad the beneficiary shall be required to—
  - (a) provide a death certificate of the member who died abroad;
  - (b) provide an authenticated death certificate, where the member was buried abroad.
- (3) Where a member is presumed dead, a claim for a survivor's pension shall be accompanied by an original decree of court presuming the member dead not less than seven years from the date the member was reported lost, evidence of the claimant's own identity and relationship to the deceased member, information about other relatives of the deceased and confirmation from county administration.

## **10. Information and documents to accompany an invalidity pension claim**

A claim for invalidity pension shall be supported by, treatment records, comprehensive doctors report, certificate of invalidity by the medical board, evidence of retirement on medical grounds, identity document and where a doctor, an employer or medical institution holds such medical records, in respect of the employee, the holder shall furnish those records to the medical board.

## **11. Review by medical board**

A member who receives invalidity pension shall avail himself before the same medical board for review every six months.

## **12. Information and documents to accompany an emigration benefit**

A claim for an emigration benefit for Pension Fund members shall be accompanied by retirement, termination or dismissal letter from the last employer, identity document and evidence that the claimant is emigrating to a country which does not have a reciprocal agreement with Kenya and that the claimant has no present intention of returning to reside in Kenya.

## **13. Citizens of East African Community**

Regulation 12 will not apply to members who are citizens of East Africa Community partner states.

## **14. Funeral grant**

A claim for funeral grant shall be made in an approved form and shall be accompanied by a death certificate or burial permit of the deceased person and the, claimant's identity documents.

## **15. Exportability of contributions and benefits**

Members who are citizens of East African Community partner states shall apply in a prescribed form for the contributions or benefits to be exported to the social security scheme of the country of migration.

## **16. Co-ordination with other social security schemes**

The Managing Trustee shall co-ordinate with the social security schemes or similar schemes of other states to ensure the exportability of the totalized contributions and benefits of Kenyan citizens in those countries and actual physical transmission of the funds to the Fund for crediting to the appropriate member account.

## **17. Additional information**

The claimant or the employer shall furnish the Board with such other particulars as the Board may, from time to time require.

## **18. Medical certificate**

- (1) Where, under these Regulations, a claim is to be supported by a medical certificate issued by a medical board for the purpose of establishing the claimant's or beneficiary's incapacity to work, the certificate shall be in such form as the Board may, from time to time, determine and shall include—
  - (a) in the case of invalidity pension, the condition causing such incapacity for work giving an indication of the disease, disability or injury by which the claimant is, in the opinion of the medical board rendered permanently and totally incapable of further employment;
  - (b) the date of the medical examination on which the certificate is based;
  - (c) the signatures of the members of the medical board with their names and addresses.
- (2) A medical certificate shall be issued on the date of the examination on which it is based and no further certificate based on the same examination shall be issued other than a duplicate certificate to replace the original certificate which has been lost, in which case such certificate shall be clearly marked "duplicate"

## **19. Defective medical certificate**

The Board may, in its discretion, reject any medical certificate which does not comply with these Regulations and may suspend the determination of a claim until a proper medical certificate is submitted.

## **20. Appointment of Medical Boards**

For the purpose of the Act, the District or County medical boards composed under the Public Health Act ([Cap. 242](#)) shall be deemed to have been appointed under the Act.

## **21. Medical Board Chairperson**

The Medical Boards shall appoint a chairperson for each county.

## **22. Determination of claim by Medical Board**

The Medical Board shall have the power to determine—

- (a) whether there is medical evidence to support the claims of a claimant; and
- (b) the date of onset of any medical condition claimed by the claimant.

## **23. Referral of cases to medical Board**

The Medical Board shall consider all cases referred to it by the Board.

## **24. Status of claimant**

The members of the Medical Board shall in each case determine the medical status of a claimant.

## **25. Powers of Medical Board**

The Medical Board shall have powers to—

- (a) hold hearings;
- (b) order medical and non medical examinations;
- (c) request medical records; and
- (d) interview or examine the claimant.

## **26. Mode of determination of claim by medical Board**

The Medical Board shall determine each case by a majority of members.

## **27. Conflict of interest in a member of the medical Board**

The determination of a claim in any case where that member—

- (i) has or may have a material interest therein; or
- (ii) has or had any professional responsibility in respect to the condition out of which the claim has arisen.

## **28. Evidence of age**

In the absence of evidence to the contrary the date of birth of a member of the Fund entered in the records of the Fund shall be conclusive and where no date of birth is recorded for a member or his dependants or is disputed, the Managing Trustee may require such further evidence of age including medical evidence as may be obtainable.



### **29. Amendment of claim**

A claimant may, by notice in writing addressed to the Board, amend the type of claim at any time before a decision is given and any claim so amended shall be treated as if it had been duly made in the first instance.

### **30. Simultaneous entitlement to benefits**

Where a person is at the same time entitled to more than one benefit and receipt of one disqualifies the person from receipt of the other, the person shall be entitled to choose the benefit to claim and the benefit so chosen shall be paid to the person.

### **31. Alternative benefit**

Where it appears that a claimant is entitled to a benefit other than the one claimed, the Board may treat the claim as an alternative to that other benefit if the necessary particulars and documents are attached.

### **32. Defective claim**

If a pension benefit claim form is defective at the date of its receipt, the Board may refer it back to the claimant, and the Board may treat the claim as if it had been duly made in the first instance, if the form is returned to the Board properly completed within twenty one days from the date on which it was so referred.

## **Part III – PAYMENT OF PENSION BENEFIT CLAIMS**

### **33. Place and manner of payment of benefits**

- (1) A benefit payable by the Fund may be paid at any designated office of the Fund or at such other place as the Board may decide.
- (2) Any sum payable by way of benefit shall, unless the Board otherwise directs, be paid through appropriate modes of payment as may be determined by the Managing Trustee from time to time.
- (3) Where payments have been effected through payment modes in paragraph (2), the payments shall unless the contrary is proved, be deemed to have been effected at the time at which the transfer was successfully done:

Provided that where the Managing Trustee is satisfied that transfer of funds has failed or bounced the Managing Trustee may on receipt of a duly executed indemnity issue an approval for resumption of transaction.

- (4) Where there is more than one person having an equal claim to survivor's benefit such benefit shall be apportioned equally among such persons, unless in a particular case the Managing Trustee is satisfied that a different apportionment would be appropriate.

### **34. Payment of lumpsum**

- (1) Where a person is entitled to a benefit, but the benefit amount claimed is trivial, a lumpsum payment shall be made.
- (2) Benefits payable under paragraph (1), having regard to the interests of a beneficiary or any other relevant circumstances, be paid in such manner as the Board may determine.

### **35. Obligation of person receiving benefit**

- (1) The Board may require a beneficiary to submit to a medical examination by a medical board.

- (2) The Board may through the paying insurer require a beneficiary to furnish, from time to time, documented evidence that the beneficiary is alive and if such evidence is not given to the Board within the time specified, the Board may suspend the payment of the benefit until the date on which the evidence is given.
- (3) Before payment of a benefit is made a beneficiary shall, at the request of the Board, produce evidence of entitlement to the benefit and his identity.

### **36. Revision of benefits**

- (1) The Board may at any time, after notice to the beneficiary and having given the beneficiary opportunity to be heard review the benefit granted on any of the following grounds—
  - (a) that the beneficiary has not submitted to a medical examination when required to do so;
  - (b) that the incapacity for employment which gave rise to the award has ceased to operate, or is operational only because of the unreasonable refusal or willful neglect of the beneficiary to submit to a medical examination;
  - (c) that the beneficiary deliberately avoided being served notice or that the beneficiaries whereabouts are unknown; or
  - (d) that the beneficiary no longer satisfies the conditions for entitlement to the benefit, and may make an order confirming, discontinuing, suspending, reducing or increasing the benefit.
- (2) Where a person is required under these Regulations to submit to a medical treatment the person shall not be disqualified to any benefit by refusal to undergo a surgical operation which might, in the opinion of the medical doctor, be dangerous to his life.

### **37. Re-calculation of survivor's pension**

When a beneficiary of a survivor's pension is deceased or otherwise disqualified from receiving the benefit, the Board shall as part of the conditions for securing an annuity or drawdown plan from the insurer re-calculate the survivor's pension and share the pension between the survivor's beneficiaries, equally or in such proportions as the Board in its discretion, may determine.

### **38. Cessation of benefit**

Any unpaid benefit shall be distributed in accordance with these Regulations among the dependants of the deceased beneficiary, if any, in such proportions as the Board, in its discretion, may determine.

### **39. Persons unable to act**

- (1) Where a beneficiary is a child or a person who is otherwise unable to act at the time, and has no representative authorized or duly appointed under the law to act on behalf, the Board may, upon written application, appoint a person to exercise on behalf of that child or other person any right to which that child or person may be entitled under these Regulations:

Provided that—

- (a) any such appointment by the Board shall terminate immediately on the date the Board is notified that a person or an authority has been duly appointed to act for that child or person;
- (b) a person who has not attained the age of eighteen years may not act or be appointed to act under this sub regulation;
- (c) the Board may at any time in its discretion revoke the appointment;
- (d) any person appointed under this paragraph may terminate this appointment on giving one month's notice in writing to the Board;

- (e) any such appointment shall terminate immediately upon that child attaining the age of eighteen years;
  - (f) in case a person in paragraph (1) becomes able to act for himself, or has a representative authorized or duly appointed under the law to act for him;
  - (g) the person receiving the benefit on behalf of the minor or a person who is otherwise unable under paragraph (1) shall be required to open an account in the name of the beneficiary and shall apply the funds exclusively for the education, medication and upkeep of the beneficiary.
- (2) Anything required by the provisions of paragraph (1) to be done by any person who is a child or person who is otherwise unable to act may be done by any person appointed under the regulation and the receipt of any sum paid in respect of any benefit shall be a proper discharge by the Board of its obligations.
- (3) Where any sum has been authorized to be paid to a beneficiary out of the Fund by way of benefit and the person has not obtained such payment within six months after the date of authorization, such sum shall be credited back to the original account of the member.
- (4) Where such sums are credited back to the members account, such sums shall not qualify for interest for the six months when the payments had been authorised and beneficiary shall be required to make an application, for resumption of the funds.

#### **40. Payment of benefit to legal representative**

The receipt of a member of the Fund or his legal representative or of a person authorized to receive the benefit on his behalf shall be a full and sufficient discharge to the Fund for the sum specified.

#### **41. Payment of benefit due to incapacitated person**

Where the Managing Trustee is satisfied that the beneficiary is of unsound mind or for any reason is unfit to manage his own affairs he may pay the benefit, or any part thereof, due to that beneficiary to any other person who, in the opinion of the Managing Trustee is the rightful person to receive the sum on the beneficiary's behalf and will apply the sum for the maintenance and benefit of the beneficiary; and any receipt given to such person shall be a good and sufficient discharge to the Fund for the sum paid.

#### **42. Transfer and receipts of Pension Funds Credit**

A member shall apply in a prescribed manner for transfer of their Pension Fund Credit and protected rights from a contracted out scheme to the Fund and vice-versa.

#### **43. Mis-representation of facts**

A person who receives a benefit through misrepresentation of any material fact, non disclosure or fraudulently shall be required to repay such benefits within twenty one days failure to which the Fund shall take appropriate legal action.

#### **44. Biometrics**

Beneficiaries or claimants shall be required to append their fingerprints or be available for any other means of identification as prescribed.

#### **45. Insurers list**

The Managing Trustee shall regularly update the list of registered and approved insurers for the members of the Fund.

**46. Transmission of notices and documents**

Except as otherwise prescribed, any notice or document required or authorized to be given to any person by the Board under these regulations, shall be deemed to have been given or sent if it was sent by post or electronic mail to that person at the last known address of that person.