



**ELENA F. CHUA,**  
*Appellant,*

**-versus-**

**ECC CASE No. GM-19521-0712-16**

**GOVERNMENT SERVICE  
INSURANCE SYSTEM (GSIS),**  
*Appellee.*

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## **D E C I S I O N**

This appeal seeks to review the decision of the Government Service Insurance System (GSIS), dated April 4, 2016, denying appellant's claim for disability benefits, under the Employees' Compensation Law (P.D. 626, as amended), for her Spondylolisthesis; Hypertension.

From April 27, 1981, to September 30, 1988, the appellant, Elena F. Chua (GSIS Policy No. 5703914), 56 years old at the time of the filing of the claim and a resident of Catbalogan City, Samar, was employed as Youth Development Officer at the then Ministry of Social Welfare and Development (MSSD [now Department of Social Welfare and Development]).

From January 2, 2003, to date, the appellant has been employed as Population Program Officer at the Provincial Social Welfare and Development Office, Catbalogan City, Samar, with the following duties and responsibilities:

1. Implements Population Program and related activities within the context of promoting Family Welfare/Responsible citizenship and Responsible Sexuality among adolescents and women;
2. Conducts trainings, meetings, and other development programs in response to the need of the community;
  - a. Conducts Adolescent Facility Symposium to Secondary Schools and Communities;
  - b. Conducts RFM-FP classes to the community;
  - c. Conducts Family Development Session (FDS) to the community.
3. Monitors and supervises Population Program Workers, Barangay Service Point Officers with their tasks and functions;
4. Operationalizes Population Development activities at the local level.

From July 6 until 14, 2009, the appellant was instructed to travel by motorboat to Talalora, Samar, and its barangays to conduct Responsible Parenting Movement-Natural Family Planning classes among married couples. Within that period and while in the course of the said activities, the appellant accidentally slipped on the pavement of the wet stairs of a seaport and plunged directly into the sea. Due to the injury that she sustained on her back, the appellant went on sick-leave for several weeks between March and April 2009.

On October 19, 2013, the appellant was admitted at the Divine Word Hospital, Tacloban City, due to lower back pain. She was diagnosed to be suffering from Spondylolisthesis L4-L5 with right lower extremity radiculopathy. After the onslaught of typhoon “Yolanda” in November 2013, the appellant was involved in the distribution of relief commodities for the typhoon victims in Samar until she was admitted at the Samar Provincial Hospital, Catbalogan City, on February 4, 2014, due to dizziness associated with headache and high fever. Her blood-pressure reading then was noted to be at 150/90 mmHg. Several months later, she underwent Electrocardiogram (ECG) examination which revealed findings of *sinus tachycardia* (an abnormal condition in which the heart wall contracts regularly but at a rate greater than 100 beats per minute [Signet/Mosby Medical Encyclopedia]) and left-axis deviation.

On February 3, 2015, the appellant filed a claim for EC disability benefits before the GSIS Catbalogan Branch Office (Branch) due to Spondylolisthesis. The GSIS-Legal Services Group, through its Memorandum dated March 19, 2015, recommended the denial of the claim reasoning that:

“...it appears that the incident in 2009 is the actual work-related contingency that is the cause of action for the instant claim.

“Unfortunately, while the injury sustained by Ms. Chua in 2009 was in the actual performance of duty, she filed her claim for EC benefits with the GSIS only 2015.

“Article 201, Chapter VIII of P.D. No. 626, as amended, explicitly states:

“Art. 201. Prescriptive period. No claim for compensation shall be given due course unless said claim is filed with the System within three (3) years from the time the cause of action accrued (as amended by Sec. 5, P.D. 1921).

“Further, Board Resolution 93-0068 of the Employees’ Compensation Commission (ECC) reiterates the above provision and states among others that as a general rule, no claim for compensation shall be given due course, unless said claim is filed with the System within three (3) years from the time the cause of action accrued. “Cause of Action” refers to a work-related contingency while the three year prescriptive period shall be reckoned from the date of contingency.

“In *Obra vs. SSS* (G.R. No. 147745, April 9, 2003), the Supreme Court pointed out that there are exceptions to the general rule, viz:

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“... The exceptions are found in Board Resolution 93-08-0068 and ECC Rules of Procedure for the Filing and Disposition of Employees’ Compensation Claims. Board Resolution 93-08-0068 issued on 5 August 1993, states:

“A claim for employees’ compensation must be filed with System (SSS/GSIS) within three (3) years from the time the cause of action accrued, provided however, that any claim filed within the System for any contingency that may be held compensable under the Employees’ Compensation Program (ECP) shall be considered as the EC claim itself. The three-year prescriptive period shall be reckoned from the onset or disability, or date of death...”

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“In the instant claim of Ms. Chua, however, records are bereft of any showing that some other benefit claim was filed within three years from the 2009 incident that would have been tantamount to “constructive filing” of her EC claim.

“In the light of the foregoing, we are constrained to recommend the denial of her claim due to prescription.”

On April 6, 2015, the Branch wrote a letter to the appellant informing her of the denial of the claim on the ground of prescription stating that the “injury occurred in 2009 while the claim was filed on February 3, 2015.”

On May 3, 2015, the appellant wrote a letter to the Branch requesting for reconsideration of the denial of the claim.

On June 17, 2016, the Secretariat received the records of the case from the GSIS-Office of the Senior Vice-President (GSIS-OSVP) Vis-Min Group for review purposes. The transmittal shows that the EC claim was denied on the ground on prescription.

On June 20, 2016, the TRC Secretariat wrote a letter to the appellant stating that:

“...The GSIS states that you sustained your injury in 2009 but the claim was filed only in 2015. Thus, the GSIS asserts that the claim has already prescribed.

“Records reveal, however, that in 2014, you were diagnosed to be suffering from Hypertension which is included in the List of Occupational Diseases. On the basis of Board Resolution (BR) No. 10-05-65 (‘Policy on Evaluation of Incidental Findings’, dated April 28, 2010), which provides that *when the disease or injury being claimed has been declared to be not work-connected but findings are also made that the employee has suffered or is suffering from other work-connected diseases such incidental findings shall also be evaluated*, the ECC-Technical Review Committee (TRC) Secretariat requests for the submission of the following:

1. “Medical Abstract of your confinement at the Samar Provincial Hospital;
2. “Photocopy of Daily Time Record from Jan. to Feb. 2014;
3. “Pre-employment medical examination results;

4. "Medical records showing the following:
  - a. "Date of initial diagnosis of Hypertension, if there were previous confinements/consultations due to the said illness;
  - b. "List of prescribed maintenance medicines;
  - c. "Past Medical or personal and social history."

In the said letter, the appellant was informed that the evaluation of her claim would commence upon receipt of the requested documents/information

On July 11, 2016, the Secretariat received, among others, from the appellant her Clinical Abstract, dated July 3, 2016, showing that on February 4, 2014, she was admitted in a hospital due to dizziness and headache. She was advised to take maintenance medications for her elevated blood pressure.

On July 15, 2016, this case was submitted to the Technical Review Committee (Committee) for initial deliberation. In the said meeting, two members recommended the grant of EC disability benefits due to Spondylolisthesis despite the lapse of the prescriptive period in the filing of EC claim. It was pointed out that the appellant might be unaware of the benefits under P.D. No. 626, as amended, when she met an accident in 2009. However, the Acting TRC Chairman mentioned that under the prevailing law and jurisprudence, ignorance or unawareness to assert one's right within the prescribed period is not yet an excuse on the issue of prescription. Further, the prevailing Rules on Employees' Compensation state that in cases of claim for disability due to injury, the reckoning date is from the time the injury was sustained. Thus, the Chairman pointed out that the Committee cannot skip or cannot go beyond the prevailing law and jurisprudence.

On the issue of the possible causal relationship between the appellant's Hypertension and her working conditions, the majority of the members of the Committee decided to recommend the grant of EC disability benefits to the appellant on the ground that there is a reasonable probability that the strenuous working conditions experienced by the appellant in her involvement, between November 2013 and February 2014, on the distribution of relief goods for the victims of typhoon "Yolanda" in Samar may have precipitated the elevation of her blood pressure.

***The appeal is partly meritorious.***

**First issue: Prescription**

The GSIS has comprehensively discussed the denial of the claim on the ground of prescription. It may be pointed out that the appellant might be unaware of the benefits under P.D. No. 626, as amended, when she met an accident in 2009. However, under the prevailing law and jurisprudence, ignorance or unawareness to assert one's right within the prescribed period is not yet an excuse on the issue of prescription.

In summary, the injury sustained by the appellant occurred in 2009 but she filed her claim for EC disability benefits only in 2015. Thus, the claim has already prescribed considering that the claim was filed beyond the three year prescriptive period.

**Second issue: Compensability of the Appellant's Hypertension**

Records reveal that in February, 2014, the appellant was diagnosed to be suffering from Hypertension. On the basis of Board Resolution (BR) No. 10-05-65 ("Policy on Evaluation of Incidental Findings," dated April 28, 2010), which provides that "*when the disease or injury being claimed has been declared to be not work-connected but findings are also made that the employee has suffered or is suffering from other work-connected diseases such incidental findings shall also be evaluated,*" this Commission now proceeds to rule on the compensability of the appellant's Hypertension.

Under Item No. 29 of Annex "A" of the Amended Rules on Employees' Compensation, "*Hypertension classified as primary or essential is considered compensable if it causes impairment of function of body organs like kidneys, heart, eyes and brain, resulting in any kind of disability subject to the submission of any of the following:*

- a. "Chest X-ray report;
- b. "ECG report;
- c. "Blood chemistry report;
- d. "Fundoscopy report;
- e. "Ophthalmological evaluation;
- f. "CT scan;
- g. "MRI;
- h. "MRA;
- i. "2-D echo;
- j. "Kidney ultrasound; and
- k. "BP monitoring report."

(approved under Board Resolution No. 92-07-0031, dated July 8, 1992, as amended by Board Resolution No. 11-05-13 dated May 26, 2011)

The classification of Hypertension, as an occupational disease, puts at rest as to any doubt on the compensability of the said ailment subject to the satisfaction of conditions for its compensability.

After the onslaught of typhoon “*Yolanda*” in November 2013, the appellant was assigned, among other social welfare officers, in the distribution of relief commodities for the typhoon victims in Samar until she was admitted at the Samar Provincial Hospital, Catbalogan City, on February 4, 2014, due to dizziness associated with headache and high fever. This Commission takes cognizance of the fact that the rigors of almost daily travel by land and water to reach the typhoon victims in the coastal municipalities and far flung areas of Samar may no longer be as easy for a 56 years old ailing female government employee. The performance of her tasks could have weakened her resistance and affected her physical condition until she experienced dizziness, headache and high fever which are symptoms of Hypertension. Stated differently, there is a reasonable probability that the numerous stressful tasks and duties that the appellant had to accomplish may have caused or contributed to the manifestation of her Hypertension.

Records reveal that at the time of her admission in a hospital in February 2014, the appellant’s blood-pressure reading then was noted to be at 150/90 mmHg. Several months later, she underwent Electrocardiogram (ECG) examination which revealed findings of *sinus tachycardia* (an abnormal condition in which the heart wall contracts regularly but at a rate greater than 100 beats per minute [Signet/Mosby Medical Encyclopedia]) and left-axis deviation. Thus, the following condition for the compensability of Hypertension has been satisfied:

*“Hypertension classified as primary or essential is considered compensable if it causes impairment of function of body organs like kidneys, heart...” (emphasis supplied)*

**WHEREFORE**, the appealed decision is hereby **MODIFIED** and the GSIS is ordered to **GRANT EC disability benefits** to the appellant plus reimbursement of medical expenses incurred for consultations, including maintenance medications, due to her **Hypertension**. However, the claim for EC disability benefits due to **Spondylolisthesis** is hereby **DENIED** on the ground of prescription.

**SO ORDERED.**

**CITY OF MAKATI,  
July 18, 2016.**