

eCodal - Rules on Employees' Compensation

As amended

ECC Board Resolution No. 15-07-34, July 27, 2015

July 21, 1987

Statement of Authority

By virtue of the powers vested upon the Employees' Compensation Commission under the [Labor Code of the Philippines](#), the following Rules are hereby adopted to implement the provisions of Title II, Book IV of this Code.

RULE I Coverage

SECTION 1. *Nature.* — Coverage shall be compulsory.

SECTION 2. *Scope.* — (a) Every employer shall be covered.

(b) Every employee not over 60 years of age shall be covered.

(c) An employee over 60 years of age shall be covered if he had been paying contributions to the System prior to age 60 and has not been compulsorily retired.

(d) An employee who is coverable by both the GSIS and SSS shall be compulsorily covered by both Systems.

SECTION 3. *Employer.* — (a) The term shall mean any person, natural or juridical, domestic or foreign, who carries on in the Philippines any trade, business, industry, undertaking or activity of any kind and uses the services of another person who is under his orders as regards the employment.

(b) An employer shall belong to either:

(1) The public sector covered by the GSIS, comprising the National Government, including government-owned or controlled corporations, the Philippine Tuberculosis Society, the Philippine National Red Cross and the Philippine Veterans Bank; or

(2) The private sector covered by the SSS, comprising all employers other than those defined in the immediately preceding paragraph.

SECTION 4. *Employee.* — (a) The term shall mean any person who performs services for an employer as defined in Section 3 hereof.

(b) employee shall belong to either:

(1) The public sectors comprising the employed workers who are covered by the GSIS, including the members of the Armed Forces of the Philippines [1](#) elective officials who are receiving regular salary, and any person employed as casual, emergency, temporary, substitute or contractual.

(2) The private sector comprising the employed workers who are covered by the SSS.

SECTION 5. *Foreign Employment.* — (a) Filipinos working abroad in the service of an employer as defined in Section 3 hereof shall be covered by the System, and entitled to the same benefits as are provided for employees working in the Philippines.

(b) Medical services, including appliances and supplies for Filipinos employed abroad rendered or provided in such place of employment, shall be paid in accordance with, and subject to the limitations fixed in, these Rules; provided that the Rules on Accreditation shall not apply in these cases.

(c) The notice requirement under these Rules shall not be strictly applied.

(d) Medical certifications of physicians, and statement of accounts of hospitals, when duly authenticated, are acceptable as basis for payment, provided that the standard and rates payable by the System shall be those provided for under these Rules.

SECTION 6. *Effectivity.* — (a) Coverage of employers shall take effect on the first day of operation but not earlier than January 1, 1975.

(b) Coverage of employees shall take effect on the first day of employment. [2](#)

RULE II Registration

SECTION 1. *Requirement.* — (a) Every employer shall register with the System by accomplishing the prescribed forms.

(b) Every employee shall be registered with the System through his employer by accomplishing the prescribed forms. [3](#)

SECTION 2. *GSIS.* — The following guidelines shall apply to the public sector.

(1) Every employer operating before January 1, 1975 shall register not later than March 31, 1975;

(2) Every employer operating on or after January 1, 1975 shall register within one month from the first day of operation, and

(3) Every employee shall be registered through his employer within one month from the date of employment.

SECTION 3. SSS. — (a) The following guidelines shall apply to the private sector:

- (1) Every employer already registered need not register again, for he is automatically registered;
- (2) Every employer not yet registered shall register not later than the first day of operation;
- (3) Every employee already registered need not register again, for he is automatically registered.
- (4) Every employee not yet registered shall register not later than the date of employment; and
- (5) Only one registration is needed for SSS and Employees' Compensation.

(b) In case the employee has not yet been registered, he shall be reported by his employer according to the following guidelines:

- (1) Every employer already registered need not register again, for he is automatically registered.
- (2) Every newly hired employee shall be reported by his employer not later than 30 days from the date of employment; and
- (3) Every employee shall be deemed as having been duly reported for coverage if the System has received a written communication about him from his employer or an EC contribution paid in his name by his employer, before a compensable contingency occurs.

SECTION 4. *Penalty.* — Any violation under this Rule shall be penalized as follows:

- (1) In case of failure or refusal to register employees, the employer or responsible official who committed the violation shall be punished with a fine of not less than P1,000 nor more than P10,000 and/or imprisonment for the duration of the violation or non-compliance or until such time that rectification of the violation has been made, at the discretion of the Court.
- (2) In case a compensable contingency occurs after 30 days from employment and before the System receives any report for coverage about the employee or EC contribution on his behalf, his employer shall be liable to the System for the lump sum equivalent of the benefits to which he or his dependents may be entitled.

RULE III Compensability

SECTION 1. *Grounds.* — (a) For the injury and the resulting disability or death to be compensable, the injury must be the result of accident arising out of and in the course of the employment. (*ECC Resolution No. 2799, July 25, 1984*).

(b) For the sickness and the resulting disability or death to be compensable, the sickness must be the result of an occupational disease listed under Annex "A" of these Rules with the conditions set therein satisfied, otherwise, proof must be shown that the risk of contracting the disease is increased by the working conditions.

(c) Only injury or sickness that occurred on or after January 1, 1975 and the resulting disability or death shall be compensable under these Rules.

SECTION 2. Occupational Diseases. — (a) The diseases listed in Annex "A" of these Rules are occupational when the nature of employment is as described therein.

(b) The employer shall require pre-employment examination of all prospective employees; provide periodic medical examination to employees who are exposed to occupational diseases and take such other measures as may be necessary.

(c) The periodic medical examination for the early detection of occupational diseases shall be in accordance with the minimum standards prescribed in Annex "B" hereof.

SECTION 3. Authority of the Commission. — The Commission is hereby authorized to determine and approve additional occupational diseases and work-related illnesses with specific criteria based on peculiar hazards of employment.

RULE IV Liability

SECTION 1. Limitation. — No compensation shall be allowed to the employee or his dependents when the injury, sickness, disability or death was occasioned by any of the following:

- (1) his intoxication;
- (2) his willful intention to injure or kill himself or another; or
- (3) his notorious negligence.

SECTION 2. Extent of Liability. — (a) Unless otherwise provided, the liability of the State Insurance Fund, shall be exclusive and in place of all other liabilities of the employer to the employee or his dependents or anyone otherwise entitled to receive damages on behalf of the employee or his dependents.

(b) The payment of compensation under this Title shall not bar the recovery of benefits as provided for in Section 699 of the Revised Administrative Code, Commonwealth Act numbered 186, as amended, Republic Act numbered eleven hundred sixty one, as amended, Republic Act numbered six hundred ten, as amended, Republic Act numbered forty-eight hundred sixty-four, as amended, and other laws [4](#) whose benefits are administered by the System or by other agencies of the government. (*ECC Resolution No. 2799, July 25, 1984*).

SECTION 3. *Third Parties.* — When disability or death is caused by circumstances creating a legal liability against a third party, the disabled employee or the dependents in case of his death shall be paid benefit from the System under these Rules. In case benefit is claimed and allowed under these Rules, the System shall be subrogated to the rights of the disabled employee or the dependents in case of his death in accordance with existing laws.

SECTION 4. *Unauthorized Changes.* — The System shall not be liable for compensation for unauthorized changes in medical services, appliances, supplies, hospitals, rehabilitation services or physicians.

Should there be any reason for such changes, the employee or his dependents shall notify the System and secure its prior consent before the change may be effected.

SECTION 5. *Medical Reports.* — (a) An employee enjoying temporary total disability benefits shall submit to the System a monthly medical report on his disability certified by his attending physician, otherwise his benefit shall be suspended until such time that he complies with this requirement.

(b) Non-compliance of the employee to present himself for examination at least once a year upon notice by the System shall result in the postponement of granting of EC PTD benefits;

RULE V Employer's Contribution

SECTION 1. *Rate and Amount.* — Subject to the following conditions, contributions under this Rules shall be paid in their entirety by the employer and any contract or device for the deduction of any portion thereof from the wages or salary of the employees shall be null and void:

(1) For a covered employee in the public sector, his employer shall remit to the GSIS a monthly contribution equivalent to one percent of the basic salary or One hundred pesos (P100) per month per employee whichever is lower. (as provided under Board Resolution No. 02-04235, dated April 11, 2002).

(2) For a covered employee in the private sector, his employer shall remit to the SSS a monthly contribution equivalent to one percent of his monthly salary credit as of the last day of the month, in accordance with the following schedule:

(Approved under *B.R. No. 06-08 70* dated *31 August 2006*, as amended by *B.R. No. 14-10-33 s. 2014, October 8, 2014*)

(3) When a covered employee dies during employment, or is separated from employment, his employer's obligation to pay the monthly contribution arising from that employment shall cease on the last day of the month of contingency.

(4) When a covered employee becomes disabled during employment, his employer's obligation to pay the monthly contribution arising from that employment shall be suspended during such months that he is not receiving salary or wages.

(5) No refund of contribution shall be allowed under these Rules.

SECTION 2. *Remittance.* — Contributions shall start in January 1975 and every month thereafter for as long as the employee has earnings. The initial contribution for the month of January 1975 shall be remitted by the employer to the System in February 1975, unless some other arrangement has been agreed by the System and the employer.

SECTION 3. *Penalty.* — Any violation of the provisions on contribution under these Rules shall be penalized as follows:

(1) Any employer who is delinquent in his contributions shall be liable to the System for the benefits which may have been paid to his employees or their dependents, and any benefit and expenses to which such employer is liable shall constitute a preferred lien on all his property, real or personal, over any credit except taxes;

(2) The payment by the employer of the lump sum equivalent of such liability shall absolve him from the payment of the delinquent contributions due and payable during the calendar year of the contingency and penalty thereon with respect to the employee concerned, but said employer shall be subject to criminal liability;

(3) In case of such delinquency the employer or responsible official who committed the violation shall be punished with a fine of not less than P1,000 nor more than P10,000 and/or imprisonment for the duration of the violation or non-compliance or until such time that a rectification of the violation has been made, at the Court's discretion;

(4) If any contribution is not paid to the SSS as prescribed under these Rules, the employer shall pay besides the contribution a penalty thereon of 3 percent a month from the date of the contribution falls due until paid.

Note: Under ECC Resolution No. 1243 dated Jan. 18, 1979, the System shall pay the employee or his dependents all benefits due them under [PD 626](#), as amended, without prejudice on its part to proceed against the erring employer.

RULE VI Definitions Related to Credited Earnings

SECTION 1. *Quarter.* — A period of three consecutive calendar months ending on the last day of March, June, September and December.

SECTION 2. *Semester.* — A period of two consecutive quarters ending in the quarter of contingency.

SECTION 3. *Monthly Salary Credit.* — The wage base for contributions or the actual salary, as provided in Section 1 of Rule V hereof. If earnings are derived from more than

one employment, it shall be determined on the basis of the aggregate earnings from all employments, but not exceeding P1,000 in the case of SSS and P3,000 in the case of GSIS.

SECTION 4. *Wages or Salary.* — Insofar as they refer to the computation of benefits, means the monthly remuneration as defined in [Republic Act No. 1161](#), as amended, for SSS and [Presidential Decree No. 1146](#), as amended, for GSIS, respectively, except that part in excess of Three Thousand Pesos. (*ECC Resolution No. 3682, Dated July 21, 1987*).

SECTION 5. *Average Monthly Salary Credit.* — (a) In the case of the SSS, it is the result obtained by dividing the sum of the monthly salary credits in the 60-month period immediately preceding the semester of death, or permanent disability, injury or sickness, by the number of months of coverage in the same period, except:

(1) Where death or permanent disability falls within 18 months from the month of coverage, it is the result obtained by dividing the sum of all monthly salary credits paid prior to the month of death or permanent disability by the number of calendar months of coverage in the same period, and

(2) Where death or permanent disability falls within the month of coverage, it is the actual salary received during the calendar month or its corresponding monthly salary credit.

(b) The day of injury or sickness which caused the disability shall be vested as the reckoning date for the purpose of computing the average monthly salary credit.

(c) In the case of the GSIS, the average monthly salary credit is the quotient after dividing the aggregate compensations received by the member or employee for the last three years immediately preceding his death, permanent disability, injury or sickness, by the number of months he received said compensation, or three thousand pesos, whichever is smaller.

SECTION 6. *Average Daily Salary Credit.* — (a) In the case of the SSS, it is the result obtained by dividing the sum of the 6 highest monthly salary credits in the 12-month period immediately preceding the semester of sickness by 180, except for the following cases:

(1) Where the injury falls within 12 calendar months from the month of coverage, it is the result obtained by dividing the sum of all monthly salary credits by 30 and by the number of months of coverage, excluding the month of injury; and

(2) Where the injury falls within the month of coverage, it is the actual salary received during the calendar month or its corresponding monthly salary credit divided by 30.

(b) In the case of the GSIS, the average daily salary credit shall be determined as follows:

(1) If the salary or wage is based on an hourly rate, it is the hourly rate times the number of hours required to work during the month of contingency divided by 22.

(2) If the salary or wage is based on a daily rate, it is the daily rate times the number of days required to work per month divided by 22.

(3) If the salary or wage is based on a monthly rate, it is the monthly rate divided by 22.

(4) If the employee has worked for less than one month, his daily salary credit is the actual daily wage or salary of the monthly wage or salary divided by the actual number of days worked during the month of contingency.

SECTION 7. *Replacement Ratio.* — In the case of the SSS, it is the sum of the twenty percent and the quotient obtained by dividing three hundred by the sum of three hundred forty and the average monthly salary credit.

SECTION 8. *Credited Years of Service.* — For a member covered prior to January 1975, nineteen hundred seventy five minus the calendar year of coverage, plus the number of calendar years in which six or more contributions have been paid from January 1975 up to the calendar year containing the semester prior to the contingency. For a member covered in or after January 1975, the number of calendar years in which six or more contributions have been paid from the year of coverage up to the calendar year containing the semester prior to the contingency.

SECTION 9. *Monthly Income Benefit.* — (a) In the case of the SSS, it is the amount equivalent to one hundred fifteen percent of the sum of:

The average monthly salary credit multiplied by the replacement ratio and one and a half percent of the average monthly salary credit for each credited year of service in excess of ten years: *Provided*, That the monthly income benefit shall in no case be less than P250. *Provided, However*, That the monthly pension of surviving pensioners shall be increased automatically and simultaneously to the extent that 15% difference in monthly income benefit between EC and GSIS, be maintained. (LOI 1286) (ECC Resolution No. 2799, July 25, 1984).

(b) In the case of the GSIS, the monthly income benefit shall be the basic monthly pension as defined in [PD 1146](#) plus twenty percent thereof, but shall not be less than P250, nor more than the actual salary at the time of contingency. (ECC Resolution No. 2799, July 25, 1984).

RULE VII Benefits

SECTION 1. *Types of Benefits.* — The benefits under Employees Compensation are in the form of income or services, and consist of the following:

(1) Medical services, appliances and supplies;

(2) Rehabilitation services;

(3) Temporary total disability benefit;

(4) Permanent total disability benefit;

(5) Permanent partial disability benefit;

(6) Death benefit; and

(7) Funeral benefit.

(8) Carer's Allowance (as provided under BR No. 90-12-0090, dated Dec. 20, 1990 and under Executive Order (E.O.) No. 134 ["Granting of Carer's Allowance to EC PPD and PTD Pensioners in the Public Sector, date of effectivity: May 31, 2013])

SECTION 2. *Disability.* — (a) A total disability is temporary if as a result of the injury or sickness the employee is unable to perform any gainful occupation for a continuous period not exceeding 120 days, except as otherwise provided for in Rule X of these Rules.

(b) A disability is total and permanent if as a result of the injury or sickness the employee is unable to perform any gainful occupation for a continuous period exceeding 120 days, except as otherwise provided for in Rule X of these Rules.

(c) A disability is partial and permanent if as a result of the injury or sickness the employee suffers a permanent partial loss of the use of any part of his body.

SECTION 3. *Income Benefit.* — The disability or death resulting from the injury or sickness is compensable by cash payments, and not the injury or sickness itself, except in the case of permanent partial disability.

SECTION 3-A. *Income Benefit for Permanent Partial Disability.* — In the case where the period covered for payment of income benefit for permanent partial disability does not exceed twelve months, the System may pay in lump sum or in monthly pension, otherwise income benefit shall be paid in monthly pension.

SECTION 4. *Services.* — The injury or sickness is compensable by medical services, appliances, supplies and rehabilitation services.

SECTION 5. *Deprivation.* — No contract, regulation or device whatsoever shall operate to deprive the employee or his dependents of any part of the income benefits, and medical or related services, except as provided under these Rules. Existing medical services being provided by the employer shall be maintained and continued to be enjoyed by his employees.

SECTION 6. *Prescriptive Period.* — (a) No claim for compensation shall be given due course unless said claim is filed with the System within three years from the time the cause of action accrued. (as provided under ECC Resolution No. 2799, July 25, 1984).

(b) Reckoning Date of the Three-Year Prescriptive Period.

b.1. Sickness — from the time the employee lost his earning capacity (as amended by BR No. 11-04-10, April 28, 2011)

b.2. Injury — from the time it was sustained (as provided under BR No. 93-08-0068, August 5, 1993 which was reiterated in Circular No. 03-709, dated July 22, 2009)

b.3. Death — from the time of death of the covered employee. (as provided under BR No. 93-08-0068, August 5, 1993 which was reiterated in Circular No. 03-709, dated July 22, 2009)

(c) Period of Filing in case of Presumptive Death — The beneficiaries may file their claims for EC death with funeral benefits within the three-year prescriptive period from the time the missing person has been presumed dead after the lapse of four years from the occurrence of the incident. (as amended by BR No. 14-07-20, dated July 28, 2014)

(d) The three-year prescriptive period for filing of claim for EC Permanent Total Disability (PTD) benefits should be reckoned from the time the employee was terminated from his employment due to illness. (as amended by BR No. 11-04-10, April 28, 2011)

(e) The three-year prescriptive period on claims for Temporary Total Disability (TTD) benefits for multiple confinements for the same illness should be counted from the last confinement or from the last time the employee was unable to report for work due to the same illness, whichever is applicable. [5](#) (as amended by BR No. 14-03-09, Mar. 25, 2014)

(f) When a claimant filed a claim for disability or death benefits before the Systems either under the SSS law or the [GSIS law](#), the claim for the same benefits under the Employees' Compensation Law should be considered as filed. (as amended by BR No. 10-03-45, dated March 17, 2010)

(g) The filing of disability or death benefits either under the SSS law or the [GSIS law](#) within three years from the time the cause of action accrued would stop the running of the prescriptive period under [P.D. 626](#), as amended. (as amended by BR No. 10-03-45, dated March 17, 2010)

RULE VIII Medical Services, Appliances and Supplies

SECTION 1. Condition to Entitlement. — Any employee shall be entitled to such medical services, appliances and supplies as the nature of his disability and the progress of his recovery may require, subject to the expense limitation as contained in *Annex "C"* hereof, if all of the following conditions are satisfied:

- (1) He has been duly reported to the System;
- (2) He sustains an injury or contracts sickness; and
- (3) The System has been duly notified of the injury or sickness.

SECTION 2. *Period of Entitlement.* — The medical services, appliances and supplies shall be provided to the afflicted employee beginning on the first day of the injury or sickness, during the subsequent period of his disability, and as the progress of his recovery may require, subject to Section 5 of Rule IV.

SECTION 3. *Extent of Services.* — (a) The employee is entitled to the benefits only for the ward services of an accredited hospital and accredited physician. However, if the employee chooses accommodations better than ward services the excess of the total amount of expenses incurred over the benefits provided under *Annex "C"* hereof, shall be borne by the employee. For this purpose, "ward" means a hospital room that can accommodate 6 or more patients.

(b) The hospital shall provide all the medicines, drugs or supplies necessary for the treatment of the employee.

All reimbursements of medicines [6](#) under [P.D. 626](#), as amended, shall be in accordance with the amount that may be prescribed under [Republic Act No. 9502](#) and its Implementing Rules and Regulations. (*as provided under Board Resolution No. 09-09-134, September 25, 2009*)

(c) Payments shall be made directly to the providers of such services in such amount as are prevailing in the community for similar services or provided under the schedule set forth in Annex "C" of these Rules, whichever is less.

RULE IX [7](#) Rehabilitation Services

SECTION 1. *Definition of Terms.* — As used in this Rule unless otherwise indicated by the context, the following definitions of terms are hereby adopted.

a. *Person with Work-Related Disability (PWRD)* — means a worker who has suffered from a work-connected disease or injury adversely affecting the earning capacity.

b. *Rehabilitation* — the process by which there is provided a balanced program of remedial treatment, vocational assessment and preparation designed to meet the individual needs of each handicapped employee to restore him to suitable employment and to help each PWRD to develop his/her mental, vocational or social potential.

c. *Rehabilitation Facility* — An organized service offering one or more types of service for the rehabilitation of a person with disability.

SECTION 2. *Nature and Condition of Entitlement.* —

a. Coverage under this rule shall be voluntary.

b. Entitlement to rehabilitation services shall be upon approval of the EC claim for disability benefits by the Systems.

SECTION 3. *Period of Entitlement.* — Rehabilitation services shall be provided during the period of the disability as the nature and progress of the recovery of the PWRDs may require as determined by the rehabilitation experts.

Rehabilitation services shall be suspended or terminated upon refusal of the PWRD to continue rehabilitation.

SECTION 4. *Extent of Rehabilitation Services.* — Rehabilitation services may be in the form of any of the following:

- a. Medical-surgical management;
- b. Hospitalization;
- c. Necessary appliances and supplies;
- d. Physical restoration;
- e. Psychosocial counseling;
- f. Psychiatric evaluation;
- g. Skills training;
- h. Entrepreneurship training;
- i. Hearing impairment rehabilitation;
- j. Visual impairment rehabilitation.

SECTION 5. *Expenses for Skills Training of PWRD.* — The PWRD trainee shall be entitled to tuition fees, reimbursement of the cost of training materials, and meal and transportation allowance, [8](#) as applicable, within the amount prescribed by the Commission.

SECTION 6. *Program Partners.* — The Commission shall enter into an agreement with any government or private hospitals/institutions for purposes of utilizing their service facilities for rehabilitation.

SECTION 7. *Establishment of Rehabilitation Facility.* — The Commission may establish a rehabilitation facility, as may be necessary and appropriate, such facility being a part of an existing medical facility or in a separate site, offering one or more types of services for the rehabilitation of PWRDs.

SECTION 8. *Limitations of Liability.* — The System shall not be responsible for the payment of rehabilitation services when the injury, sickness, disability or death during the rehabilitation period of the PWRD is occasioned by any of the following:

- (1) Intoxication;

(2) Willful intent to injure oneself or another;

(3) Notorious negligence.

SECTION 9. *Monitoring of Activities and Progress of PWRDs.* — The Secretariat shall establish a mechanism to monitor the activities and progress of PWRDs. For this purpose, the Secretariat may conduct home visits for the successful implementation of the delivery of services/projects of the rehabilitation program of the Commission.

RULE X Temporary Total Disability

SECTION 1. *Condition to Entitlement.* — An employee shall be entitled to an income benefit for temporary total disability if all of the following conditions are satisfied:

(1) He has been duly reported to the System;

(2) He sustains the temporary total disability as a result of the injury or sickness, and

(3) The System has been duly notified of the injury or sickness which caused his disability.

His employer shall be liable for the benefit if such illness or injury occurred before the employee is duly reported for coverage to the System.

SECTION 2. *Period of Entitlement.* — (a) The income benefit shall be paid beginning on the first day of such disability. If caused by an injury or sickness it shall not be paid longer than 120 consecutive days except where such injury or sickness still requires medical attendance beyond 120 days but not to exceed 240 days from onset of disability in which case benefit for temporary total disability shall be paid. However, the System may declare the total and permanent status at any time after 120 days of continuous temporary total disability as may be warranted by the degree of actual loss or impairment of physical or mental functions as determined by the System.

(b) After an employee has fully recovered from an illness as duly certified to by the attending physician the period covered by any relapse he suffers, or recurrence of his illness, which results in disability and is determined to be compensable, shall be considered independent of, and separate from, the period covered by the original disability. Such a period shall not be added to the period covered by his original disability in the computation of his income benefit for temporary total disability (TTD). (*ECC Resolution No. 1029, August 10, 1978*).

SECTION 3. *Amount of Benefit.* — Any employee entitled to benefit for temporary total disability shall be paid an income benefit equivalent to 90 percent of his average daily salary credit, subject to the following conditions:

(1) The daily income benefit shall not be less than P10.00 or more than P200.00 [9](#) nor paid longer than 120 days for the same disability, unless the injury or sickness requires more extensive treatment that lasts beyond 120 days, but not to exceed 240 days from onset of

disability, in which case he shall be paid benefit for temporary total disability during the extended period.

RULE XI Permanent Total Disability

His employer shall be liable for the benefit if such injury or sickness occurred before the employee is duly reported for coverage to the System.

SECTION 1. *Condition to Entitlement.* — (a) An employee shall be entitled to an income benefit for permanent total disability if all of the following conditions are satisfied:

- (1) He has been duly reported to the System;
- (2) He sustains the permanent total disability as a result of injury or sickness; and
- (3) The System has been duly notified of the injury or sickness which caused his disability.

(b) The following total disabilities shall be considered permanent:

- (1) Temporary total disability lasting continuously for more than 120 days, except as otherwise provided for in Rule X hereof;
- (2) Complete loss of sight of both eyes;
- (3) Loss of two limbs at or above the ankle or wrist;
- (4) Permanent complete paralysis of two limbs;
- (5) Brain injury resulting in incurable imbecility and insanity; and
- (6) Such cases as determined by the System and approved by the Commission.

SECTION 2. *Period of Entitlement.* —

(a) The full monthly income benefit shall be paid for all compensable months of disability.

(b) After the benefit under the Employees' Compensation shall have ceased as provided under the preceding paragraph, and if the employee is otherwise qualified for benefit for the same disability under another law administered by the System, he shall be paid a benefit in accordance with the provisions of that law. This paragraph applies to contingencies which occurred prior to May 1, 1978.

(c) Except as otherwise provided for in other laws, decrees, orders or letters of instructions, the monthly income benefit shall be guaranteed for 5 years and shall be suspended under any of the following conditions:

- (1) Failure to present himself for examination at least once a year upon notice by the System:

1.1. Compliance with the said requirement shall lift the suspension and the obligation of the System to return the suspended EC PTD benefits automatically arises. (as provided under EC Board Resolution No. 10-02-03, dated Feb. 26, 2010)

(2) Failure to submit a quarterly medical report certified by his attending physician as required under Sec. 5 of Rule IV hereof;

(3) Complete or full recovery from his permanent disability; or

(4) Upon being gainfully employed.

SECTION 3. Amount of Benefit. [10](#) — (a) In the case of the SSS:

(1) Any employee entitled to permanent total disability benefit shall be paid by the System a monthly income benefit as defined in *Sec. 9 (a), Rule VI* of these Rules.

(b) The number of months of paid coverage shall be the number of monthly contributions remitted to the System including contributions other than for Employees' Compensation if paid before March 31, 1975. The full monthly income benefit shall be paid for all compensable months of disability.

(c) The first day preceding the semester of temporary total disability shall be considered for purposes of computing the monthly income benefit for permanent total disability.

SECTION 4. Amount of Benefit for Dependent Children. — (a) Each dependent child, but not exceeding five, counted from the youngest and without substitution, shall be entitled to 10 percent of the monthly income benefit of the employee. These Rules shall not apply to causes of action which accrued before May 1, 1978.

SECTION 5. Entitlement to the New Income Benefit Under [PD 1641](#). — (a) The new amount of the monthly income benefit computed under these amended Rules shall be applicable to all contingencies occurring on or after January 1, 1980. However, for contingencies which occurred before May 1, 1978, the limitation of P12,000 or 5 years, whichever comes first, shall be enforced.

In the case of the SSS, the present monthly income benefit of current pensioners shall be increased by 20 percent effective January 1, 1980.

In case of the GSIS, the monthly income benefit of current pensioners shall be adjusted and recomputed to reflect the 20 percent increase over the benefit under [PD 1146](#) effective January 1, 1980.

SECTION 6. Aggregate Monthly Benefit Payable. — Except the benefit to dependent children under Section 4 of this Rule, the aggregate monthly benefit payable, in the case of the GSIS, shall in no case exceed the monthly wage or salary actually received by the employee as of the date of his permanent total disability. (*ECC Resolution No. 2819, August 9, 1984*).

RULE XII Permanent Partial Disability

SECTION 1. *Condition to Entitlement.* — (a) An employee shall be entitled to an income benefit of permanent partial disability if all of the following conditions are satisfied:

- (1) He has been duly reported to the System;
- (2) He sustains the permanent partial disability as a result of the injury or sickness; and
- (3) The System has been duly notified of the injury or sickness which caused his disability.

His employer shall be liable for the benefit if such injury or sickness occurred before the employee is duly reported for coverage to the System.

(b) For purposes of entitlement to income benefits for permanent partial disability, a covered employee shall continue to receive the benefits provided thereunder even if he is gainfully employed and receiving his wages or salary.

SECTION 2. *Period of Entitlement.* — (a) The income benefit shall be paid beginning on the first month of such disability, but not longer than the designated number of months in the following schedule:

A worker who sustained work-related injuries that resulted to functional loss and/or physical loss of any part of his body shall be granted Temporary Total Disability (TTD) and Permanent Partial Disability (PPD) benefits successively.

Any earlier compensation for TTD that may have been paid to an injured worker shall not be deducted from the PPD benefit that may be later granted to him.*(as provided under Board Resolution No. 10-09-114, September 2, 2010)*

(b) A loss of a wrist shall be considered a loss of the hand, and a loss of an elbow shall be considered a loss of the arm; a loss of an ankle shall be considered a loss of the foot, and a loss of a knee shall be considered a loss of the leg, a loss of more than one joint shall be considered a loss of the whole finger or toe, and a loss of only the first joint shall be considered a loss of one-half of the whole finger or toe. Other permanent partial disabilities shall be determined by the Medical Officer of the System.

(c) The degree of permanent disability shall be equivalent to the ratio that the designated number of compensability bears to 75.

SECTION 3. *Amount of Benefit.* [11](#) — (a) Any employee entitled to permanent partial disability benefit shall be paid by the System a monthly income benefit for the number of months indicated in Section 2 hereof. If the indicated number of months exceed twelve, the income benefit shall be paid in monthly pension; otherwise, the System may pay income benefit in lump sum or in monthly pension.

(b) In case of permanent partial disability less than the total loss of the member, the same monthly income shall be paid for a portion of the period established for the total loss of the member in accordance with the proportion that the partial loss bears to the total loss. If the result is a decimal fraction, the same shall be rounded off to the next higher integer.

(c) In case of simultaneous loss of more than one member or a part thereof, the same monthly income shall be paid for a period equivalent to the sum of the periods established for the loss of the member or part thereof but not exceeding 75. If the result is a decimal fraction, the same shall be rounded off to the higher integer.

(d) The new amount of the monthly income benefit computed under these amended Rules shall be applicable to all contingencies occurring on or after January 1, 1980. However, for contingencies which occurred before May 1, 1978, the limitation of P12,000 or 5 years, whichever comes first, shall be enforced.

In the case of the SSS, the present monthly income benefit of current pensioners shall be increased by 20 percent effective January 1, 1980.

In the case of the GSIS, the monthly income benefits of current pensioners shall be adjusted and recomputed to reflect the 20 percent increase over the benefit under [PD 1146](#) effective January 1, 1980.

SECTION 4. *Unlisted Injuries and Illnesses.* —

(a) In cases of injuries or illnesses not listed in the schedule under Section 2 hereof, the benefit shall be an income benefit equivalent to the percentage of the permanent loss of the capacity for work. (Non-Scheduled Disabilities).

RULE XIII Death

SECTION 1. *Condition to Entitlement.* — (a) The beneficiaries of a deceased employee shall be entitled to an income benefit if all of the following conditions are satisfied:

- (1) The employee has been duly reported to the System;
 - (2) He died as a result of an injury or sickness; and
 - (3) The System has been duly notified of his death, as well as the injury or sickness which caused his death. His employer shall be liable for the benefit if such death occurred before the employee is duly reported for coverage to the System.
- (b) If the employee has been receiving monthly income benefit for permanent total disability at the time of his death, the surviving spouse must show that the marriage has been validly subsisting at the time of his disability.

In addition, the cause of death must be a complication or natural consequence of the compensated Permanent Total Disability. (as provided under Board Resolution No. 19-09-

SECTION 2. *Period of Entitlement.* —

A. For Primary Beneficiaries:

(a) The income benefit shall be paid beginning at the month of death and shall continue to be paid for as long as the beneficiaries are entitled thereto.

With respect to the surviving legitimate spouse, the qualification is that he/she has not remarried. For the dependent children, the qualifications are:

a. Unmarried;

b. Not gainfully employed; and

c. Over 21 years of age provided he/she is incapable of self-support due to a physical or mental defect which is congenital or acquired during minority. (as provided under Board Resolution No. 12-07-16, dated July 27, 2012)

(b) The monthly income benefit shall be guaranteed for five years which in no case shall be less than fifteen thousand pesos (P15,000.00). Thereafter, the beneficiaries shall be paid the monthly income benefit for as long as they are entitled thereto. (*ECC Resolution No. 2799, July 25, 1984*).

B. For Secondary Beneficiaries:

(a) The income benefit shall be sixty (60) times the monthly income benefit of a primary beneficiary which in no case be less than P15,000.00, which shall likewise be paid in monthly pension. (*ECC Resolution No. 2799, July 25, 1984*).

SECTION 3. *Amount of Benefit.* [12](#) — (a) In the case of primary beneficiaries, the monthly income benefit shall be equivalent to the monthly income benefit for permanent total disability, which shall be guaranteed for five years, increased by ten percent for each dependent child but not exceeding 5, beginning with the youngest and without substitution: *Provided That*, The aggregate monthly benefit payable in the case of the GSIS shall in no case exceed the monthly wage or salary actually received by the employee at the time of his death; and *Provided Further*, That the minimum income benefit shall not be less than Fifteen Thousand Pesos (P15,000.00). The death benefit shall be paid during the entire period for which they are entitled thereto.

If the employee has been receiving income benefits for permanent total disability at the time of his death, the primary beneficiaries shall be paid the monthly income benefit equivalent to eighty percent plus the dependent's pension equivalent to 10 percent thereof for every dependent child but not exceeding five counted from the youngest and without substitution.

(b) In the case of secondary beneficiaries, the income benefit is payable in monthly pension which shall not exceed the period of 60 months and the aggregate income benefit shall not be less than P15,000.00.

If the employee has been receiving monthly income benefit for permanent total disability at the time of his death, the secondary beneficiaries shall be paid the monthly pension, excluding the dependent's pension of the remaining balance of the five year guaranteed period. (*ECC Resolution No. 2799, July 25, 1984*).

SECTION 4. *Entitlement to the New Income Benefit Under [PD 1641](#)*. — The new amount of the monthly income benefit computed under these amended Rules shall be applicable to all contingencies occurring on or after January 1, 1980. However, for contingencies which occurred before May 1, 1978, the limitation of P12,000 or 5 years, whichever comes first, shall be enforced.

In the case of the SSS, the present monthly income benefit of current pensioners shall be increased by 20 percent effective January 1, 1980.

In the case of the GSIS, the monthly income benefit of the current pensioners shall be adjusted and recomputed to reflect the 20 percent increase over the benefit under [PD 1146](#) effective January 1, 1980.

SECTION 5. The new amount of lump sum benefit computed under these Amended Rules shall be applicable to all contingencies occurring on or after May 1, 1980, otherwise entitlement thereto shall be governed by the immediately preceding Section.

RULE XIV Funeral Benefit

SECTION 1. *Entitlement to Funeral Benefit*. — A funeral benefit of Twenty Thousand pesos (P20,000.00) [13](#) shall be paid upon the death of a covered employee or permanently totally disabled pensioner to one of the following:

(a) the surviving spouse; or

(b) the legitimate child who spent for the funeral services; or

(c) any other person who can show incontrovertible proof or proof of his having borne the funeral expenses. (*ECC Resolution No. 3682, July 21, 1987*).

SECTION 2. *Condition to Entitlement* — The EC funeral benefits shall be granted after the SSS or the GSIS has declared the following in the evaluation of claims for EC death benefits:

1. Death due to sickness — causal relationship between the death and the working conditions of the covered member.

2. Death due to injury — causal relationship between the death and the work-related accident.

3. Death of EC Permanent Partial Disability (PPD) or Permanent Total Disability (PTD) pensioner — the cause of death is a complication or natural consequence of previously compensated PPD or PTD.

(as provided under Board Resolution Nos. 14-06-29 and 14-0630, both dated June 6, 2014)

RULE XV Beneficiaries

SECTION 1. Definition. — (a) Beneficiaries shall be either primary or secondary, and determined at the time of employee's death.

(b) The following beneficiaries shall be considered primary:

(1) The legitimate spouse until he remarries. The surviving spouse found not to be living with the covered employee at the time the employee died should be entitled to employees' compensation benefits provided that the separation occurred owing to any of the following circumstances:

1. refusal of the covered employee to continue living with the surviving spouse; or the employee's abandonment of the said spouse, without justifiable or valid cause;
2. attempt of the covered employee against the life of the surviving spouse, common child/children of the spouse;
3. commission of an act of sexual abuse against the surviving spouse, common child/children or child/children of the spouse by the covered employee;
4. the covered employee's recurrent commission of physical violence, or grossly, abusive conduct, against the surviving spouse, common child/children or child/children of the spouse;
5. the covered employee's infliction of physical violence, or imposition of moral duress, to compel the surviving spouse, common child/children or child/children of the spouse to change their religious or political affiliation;
6. attempt of the covered employee to corrupt, or induce the surviving spouse, common child/children or child/children of the spouse to engage in prostitution, or to make them connive with the employee in such an act of corruption or inducement;
7. drug addiction or habitual alcoholism of the covered employee;
8. lesbianism or homosexuality of the covered employee;
9. contraction of bigamous marriages by the covered employee, whether in the Philippines or abroad;

10. sexual infidelity or perversion of the covered employee;

11. the covered employee's act of allowing the surviving spouse, common child/children or child/children of the spouse to be subjected to acts of lasciviousness; and

12. the covered employee's contraction of serious, sexually transmitted disease extra-maritally. (as provided under Board Resolution No. 97-09-0500, Sept. 4, 1997)

(2) Legitimate, legitimated, legally adopted or acknowledged natural children, who are unmarried, not gainfully employed, not over 21 years of age, or over 21 years of age provided that he is incapacitated and incapable of self-support due to physical or mental defect which is congenital or acquired during minority; *Provided, further,* that a dependent acknowledged natural child shall be considered as a primary beneficiary only when there are no other dependent children who are qualified and eligible for monthly income benefit; *provided finally,* that if there are two or more acknowledged natural children, they shall be counted from the youngest and without substitution, but not exceeding five. (ECC Resolution No. 2799, July 25, 1984).

(c) The following beneficiaries shall be considered secondary:

(1) The legitimate parents wholly dependent upon the employee for regular support;

(2) The legitimate descendants and illegitimate children who are unmarried, not gainfully employed, and not over 21 years of age, or over 21 years of age provided that he is incapacitated and incapable of self-support due to physical or mental defect which is congenital or acquired during minority.

SECTION 2. *Priority.* — (a) Primary beneficiaries shall have priority claim to death benefit over secondary beneficiaries. Whenever there are primary beneficiaries, no death benefit shall be paid to his secondary beneficiaries.

(b) If the deceased employee has no primary beneficiaries at the time of his death, the death benefit shall be paid to his secondary beneficiaries.

(c) If the deceased employee has no beneficiaries at the time of his death, the death benefit shall accrue to the Employees' Compensation fund.

SECTION 3. Primary beneficiaries shall be entitled to a monthly income benefit. In their absence, the secondary beneficiaries shall be entitled to a monthly income benefit not to exceed 60 months and the death benefit shall not be less than P15,000.00. (ECC Resolution No. 2799 dated July 25, 1984).

RULE XVI Employer's Records and Notices

SECTION 1. *Notice by Employee.* — The notice of sickness, injury or death shall be given to the employer by the employee, his dependents or anybody on his behalf, within 5 days from the occurrence of the contingency. Said notice is not necessary where the employer

or his representative already had knowledge thereof, or the contingency occurred during working hours at the workplace.

SECTION 2. *Employer's Logbook.* — Every employer shall keep a logbook to record chronologically the sickness, injury or death of his employees, within 5 days from due notice thereof. (see B.R. No. 09-08-107, page 21 of ECC Circulars and Board Resolutions on Employees' Compensation)

2.1 The mere absence of a logbook shall not result in the suspension of evaluation of the claim. In the event that a claim for disability or death has been declared as work-connected, the amount of claim shall be provided in full by the Systems which shall impose the penalty to the employer as provided under paragraph (c) of Art. 205 of [P.D. No. 626](#), as amended. (as provided under BR No. 14-12-44, Dec. 9, 2014)

SECTION 3. *Notice by Employer.* — The notice of sickness, injury or death for cases which the employer deems to be work-connected shall be submitted to the System by the employer within 5 days from due entry thereof in his logbook in a form prescribed by the System.

SECTION 4. *Visitorial Power.* — The employer's logbook shall be made available for inspection to any duly authorized representative of the System during working hours.

SECTION 5. *Penalty.* — Any employer who fails to record in his logbook the sickness, injury or death of any of his employees within 5 days from knowledge or receipt of due notice thereof as prescribed herein, gives false information or withholds material information already in his possession, shall be liable to 50 percent of the lump sum equivalent of the income benefit to which the employee may be found to be entitled and/or a fine of not less than P500 nor more than P5,000 and imprisonment for not less than 6 months or more than one year, at the discretion of the Court. The sum paid by the employer under this Section shall accrue to the Employees' Compensation fund of the System.

RULE XVII Accreditation

SECTION 1. *Accreditation.* — For purposes of processing of payment for medical services provided to ODWs, the following hospitals and physicians are automatically deemed accredited by the Commission:

- a. Government and Private hospitals duly licensed by the Department of Health (DOH) and accredited by the Philippine Health Insurance Corporation (PhilHealth); and
- b. Physicians duly licensed by the Professional Regulation Commission (PRC).

(as amended by Board Resolution No. 13-08-25, dated Aug. 7, 2013)

SECTION 2. *Conditions on accredited hospitals or rehabilitation facilities and physicians or rehabilitation specialists.* —

(a) An accredited hospital or rehabilitation facility binds itself:

(1) not to collect from the patient any amount for ward services;

(2) to provide adequate services on a non-discriminating basis;

(3) to limit charges for ward rates approved by the Commission, including, but not limited to, laboratory ward rates, laboratory facilities, x-rays, stools, drugs, medical attendance and the Relative Value Scale (RVS) for surgical procedures, etc.;

(4) to abide by these rules on accreditation;

(5) to have its house rules conform to the requirements of the Commission;

(6) to subject its facilities to inspection at any time by duly authorized representatives of the Commission or the System.

(b) An accredited physician binds himself:

(1) not to collect from the patient any amount for ward services,

(2) to provide adequate services on a non-discriminating basis; and

(3) to abide by these rules on accreditation.

SECTION 3. *Utilization Review.* — (a) Every hospital or rehabilitation facility shall have a Utilization Review Committee, composed of at least two physicians or rehabilitation specialists, to help assure the most effective use of rehabilitation facilities, hospitals and services by reviewing admissions each day on a sample basis and all long stay cases.

(b) The Committee shall decide in every specific case being reviewed, whether or not care in a hospital is medically necessary. In every case, the Committee shall discuss its findings with the patient's doctor before making a decision.

(c) The Committee shall advise in writing the patient, his doctor and the hospital of its decision only if it has been decided that care in a hospital is not medically necessary, in which case no payment for room and board shall be made by the System.

SECTION 4. *Payment of Medical Services.* — Payment for medical services provided to ODWs shall be granted to hospitals and physicians enumerated under Section 1 of this Rule.

(as amended by Board Resolution No. 13-08-25, dated Aug. 7, 2013)

SECTION 5. *Emergency Services.* — (a) Those services which are necessary to prevent the death or serious impairment of the health of the individual, and which necessitate the use

of the most accessible hospital available and equipped to furnish such services.

(b) An emergency no longer exists when it becomes safe from a medical standpoint to move the patient to an accredited hospital, or to discharge him whichever occurs first.

(c) The determination that the patient's condition requires emergency services or that an emergency has ended shall be based on the physician's evaluation and, when appropriate, on the patient's medical record and other additional data furnished by the hospital.

(d) Claims filed by non-accredited hospital and non-accredited physicians for payment of emergency services shall be accompanied by a physician's statement. (*deemed repealed by Sec. 4 of B.R. No. 13-08-25*)

(e) The physician's statement shall describe the nature of the emergency, furnish relevant clinical information about the condition of the patient, and state that the services rendered were necessary to prevent the death of the individual or the serious impairment of the health. A bare statement that an emergency existed is not sufficient.

(f) In addition, when in-patient services are involved, the statement shall include the date when, in the physician's judgment, the emergency ceased.

SECTION 6. Referral. — Immediately upon knowledge by the employer of his employee's injury or sickness at the workplace, he shall, in addition to the medical and dental facilities which the pertinent provisions of the Code and these Rules on Accreditation may require him to furnish, cause the employee to be brought by the fastest available means of transportation to the duly accredited physician or hospital nearest or most accessible to the employee's place of work.

SECTION 7. Violation of Conditions and Requirements, Penalties. — (a) An accredited hospital or physician shall be discredited for violation of any of the conditions and requirements under Section 1 and 2 hereof without prejudice to the imposition of penalties under *Rule XIX* if applicable or to any other penalty which the Commission may impose.

(b) The cancellation or invalidation of accreditation of a physician or hospital shall be effective on the date of notice of the discreditation.

(c) In case of discreditation, the physician or the hospital shall carry the disqualification wherever its physical identity is found. Mere change of legal personality shall not defeat the disqualification imposed.

(d) Discreditation shall be lifted only on application and upon showing of good cause and effective upon approval by the Commission. As soon as accreditation is duly restored, the hospital or physician concerned shall be allowed to participate in the *Employees' Compensation Program*. (*deemed repealed by Sec. 4 of B.R. No. 13-08-25; DOH and/or PhilHealth undertakes the licensing and regulations of physicians, clinics and hospitals*)

RULE XVIII Settlement of Claims

SECTION 1. *Services.* — (a) The claim for medical benefits shall be filed in a prescribed form by the accredited physician or accredited hospital directly with the System.

(b) The claim for emergency services shall be filed in a prescribed form by any physician or hospital.

SECTION 2. *Income Benefit.* — The claim for income benefit shall be filed in a prescribed form by the employee, his dependents or his employer, on his behalf, directly with the System. Failure to file the claim within three years from the time the cause of action accrued, shall forever bar the right to benefits granted under these Rules. (*ECC Resolution No. 2799, July 25, 1984*).

SECTION 3. *Adjudication.* — Upon the receipt of the claim, the System shall process the same and determine whether or not the injury, sickness, disability or death is compensable.

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 or injuries, such incidental findings shall be evaluated by the System. (*as provided under Board Resolution No. 10-05-65, April 28, 2010*)

SECTION 4. *Additional Requirements.* — If the supporting papers of the claim are insufficient to make proper determination, the System shall require the submission of additional proofs from the employee or his dependents, or from any office, entity or agency, public or private, or from any person, having knowledge of the contingency.

SECTION 5. *Period of Appeal.* — (a) The claimant shall file with the GSIS or the SSS, as the case may be, a notice of appeal within 30 calendar days from receipt of the decision.

SECTION 6. *Transmittal of the Record in Case of Appeal.* — Upon receipt of the notice of appeal, the GSIS or SSS shall transmit the entire records of the case to the Commission within five (5) working days from receipt thereof.

(*as provided under the Rules of Procedure for the Filing and Disposition of the Employees' Compensation Claims, dated July 13, 1995*)

RULE XIX Review by the Commission

SECTION 1. *Decision En Banc.* — Within 20 working days from receipt of an appealed case, the Commission shall review and decide said case. Four affirmative votes shall decide the case. However, if only a quorum of four members are present, 3 affirmative votes shall decide the case. No motion for reconsideration of the decision or resolution of the Commission *en banc* shall be entertained.

SECTION 2. *Payment of Awards.* — Decisions, orders, or resolutions of the Commission *en banc* awarding compensation shall be complied with by the System within 15 days from receipt of the notice thereof.

SECTION 3. *Other Decisions.* — In all other cases involving payments to be made by the employer, decisions, orders and resolutions of the Commission *en banc* which have become final and executory shall be enforced and executed in the same manner as decisions of the Court of First Instance, and the Commission shall have the power to issue to the City or Provincial Sheriff or to the Sheriff it may appoint, such writs of execution as may be necessary for the enforcement of such decisions, orders or resolutions.

SECTION 4. *Failure to Comply.* — Any person or persons who fail or refuse to comply with the writ of execution issued by the Commission shall be punished for contempt by the proper court. In the case of a corporation, trust, firm, partnership, association or any other entity, the manager or officer-in-charge when the offense was committed, shall be responsible.

RULE XX Penalties

SECTION 1. *Penalty for Failure to Install and Maintain Safety Devices, etc.* — The System shall determine for purposes of imposing the penalty provided in Art. 200 of the Code, whether the employee's sickness, injury or death was due to the failure of the employer to comply with any health and safety law, or failure to install and maintain safety devices in accordance with standards set by the Commission, or take other precautions for the prevention of the sickness, injury or death. The requisite standards shall be set by the Commission within 6 months after the effectivity of these Rules.

SECTION 2. *Penal Provisions.* — (a) The penal provisions of R.A. 1161, as amended, and C.A. 186, as amended, with regard to the funds as are thereunder being paid to, collected or disbursed by the System shall be applicable to the collection, administration and disbursement of Employees' Compensation fund of the System. The penal provisions on coverage shall also be applicable.

(b) Any person who, for the purposes of securing entitlement to any benefit or payment under these Rules or the issuance of any certificate or document for any purpose whether for him or for some other persons, commits fraud, collusion, falsification, misrepresentation of facts or any other kind of anomaly shall be punished with a fine of not less than P5,000 and imprisonment for not less than 6 months nor more than one year, at the discretion of the court.

(c) If the act penalized is committed by any person who has been or is employed by the Commission or System or a recidivist, the imprisonment shall not be less than one year; if committed by a lawyer, physician, or other professional, he shall in addition to the penalty prescribed herein be disqualified from the practice of his profession; and if committed by an official, employee or personnel of the Commission, System or any other government

agency, he shall in addition to the penalty prescribed herein, be dismissed with prejudice to re-employment in the government service.

RULE XXI Implementing Provision

SECTION 1. *Effectivity.* — These amended Rules and Regulations shall take effect June 1, 1987.

APPROVED: July 21, 1987

ANNEX A Occupational and Work-Related Diseases

(As amended by B.R. No. 11-05-13, s. 2011, approved on 26 May 2011)

For an occupational disease and the resulting disability or death to be compensable, all of the following conditions must be satisfied:

- (1) The employee's work and/or the working conditions must involve risk/s that caused the development of the illness;
- (2) The disease was contracted as a result of the employee's exposure to the described risks;
- (3) The disease was contracted within a period of exposure and under such other factors necessary to contract it;
- (4) There was no deliberate act on the part of the employee to disregard the safety measures or ignore established warning or precaution.

The employer shall require pre-employment examination of all prospective employees; provide periodic medical examination to employees who are exposed to occupational disease and take such other measures as may be necessary pursuant to Rule III, Section 2 (b) of the implementing Rules of [P.D. 626](#), as amended.

The employer shall provide data such as work environment measurement reports on health hazards and other information that may be deemed necessary by the Systems or Commission in the determination of causal relationship between the employee's work and his disability or death.

The employer in consultation with the union whenever applicable shall implement OSH and wellness programs such as physical fitness program, healthy nutrition program, stress management program and other programs required by existing legislation, guidelines and issuances to prevent occupational and work-related diseases. The employer shall include information and advocacy of [PD 626](#) in OHS programs and support the employee deserving of compensation and rehabilitation benefits.

The employer who has failed to provide adequate protection and safety devices shall be subject to the penalty imposed by *Article 200* of the Code. Where he has provided adequate protective and safety devices, there shall be a determination as to whether or not the employee has been notoriously negligent.

ANNEX B Prescribed Minimum Standards for Periodic Medical Examinations Designed for the Early Detection of Occupational Diseases

A. When the risk exists as to exposure to any of the occupational hazards enumerated in the "*List of Occupational Diseases*," employers shall require his employees to undergo:

(1) A periodic medical examination to be carried out at intervals, and in accordance with the conditions, outlined in 2 and 3 below;

(2) Periodic examinations at intervals of 3 months or less if workers are exposed to the following:

(a) Bensense (Benzol) or the nitro or amino-derivatives of benzene or its homologues.

(b) Ionizing radiations.

(c) Organic phosphorus insecticides, where the interval may be much shorter (as in spraying).

(3) Periodic examinations at intervals not exceeding 6 months in cases of exposure to the following:

(a) Lead or its toxic compounds

(b) Mercury or its toxic compounds

(c) Manganese or its toxic compounds

(d) Chromium or its toxic compounds

(e) Carbon disulfide

(4) Periodic examinations at intervals not exceeding one year in cases of all other exposure enumerated in the "*List of Occupational Diseases*" and not covered under 2 or 3 above.

(5) Under special circumstances medical examinations be repeated at intervals shorter than specified under 3 and 4 as recommended by the authorized medical officers.

B. The medical examination shall be as complete as possible, but shall primarily be directed towards the early detection of occupational diseases. This necessitates that certain aspects of the examination be stressed in certain types of exposures:

- (1) Examination of urine and urinary bladder in workers exposed to alphanaphtylamine, betanaphtylamine or benzidine or any of their salts, and suramine or magenta.
- (2) Examination of the skin and eyes in workers exposed to tar, pitch, bitumen, mineral oil, paraffin or soot or any compound, product or residue of any of these substances.
- (3) Examination of the eyes in workers exposed to infrared rays from molten metal, red hot metal or molten glass.
- (4) Examination of the skin in workers exposed to skin irritants and sensitizers.
- (5) Audiometric examinations in workers exposed to excessive noise, particularly in the higher frequencies.
- (6) Examination of the skin, eyes and blood in workers exposed to ionizing radiations.
- (7) Examination of the gastro-intestinal and nervous systems, blood, skin, mucous membranes and lungs in workers exposed to toxic compounds of arsenic.
- (8) Examination of the blood in workers exposed to benzene or the nitro or amino derivatives of benzene or its homologues.
- (9) Examination of the skin and lungs in cases of exposure to beryllium.
- (10) Examination of the skin and respiratory tract in workers exposed to nickel, chromium or their toxic compounds.
- (11) Examination of the nervous system, eyes, blood and skin in workers exposed to carbon disulfide.
- (12) Examination of the blood in workers exposed to carbon monoxide.
- (13) Examination of the eyes and respiratory tract in workers exposed to chlorine or sulfur dioxide.
- (14) Examination of the liver and kidney in workers exposed to dinitro phenol and its homologues.
- (15) Examination of the skin, liver, kidneys and gastro-intestinal and nervous systems in workers exposed in halogen derivates of aliphatic hydrocarbons.
- (16) Examination of the blood, urine, gastro-intestinal and neuro-muscular systems in workers exposed to lead or its toxic compounds.
- (17) Examination of the lungs and nervous system in workers exposed to manganese or its toxic compounds.
- (18) Examination of the nervous and gastro-intestinal systems, the kidneys and eyes in workers exposed to mercury and its toxic compounds.

(19) Examination of the bones, especially the lower jaw in workers exposed to phosphorus, and the choline-esterase activity in workers exposed to organic phosphate insecticides.

(20) Examination of the lungs in workers exposed to risk of tuberculosis infection, silica dust, asbestos and cotton dust.

(21) Examination of the presence of peripheral vascular disturbance in workers exposed to vibrating tools.

C. Results of medical examinations shall be reported in a prescribed form which indicates the dates of examinations, results and recommended action.

D. Cases of occupational diseases discovered shall be reported by the employer to the System in a prescribed form.

ANNEX C Medical Benefits

A. *Medical Services* — (a) An employee who sustains an injury or contracts sickness shall be entitled to:

(1) Ward services during confinement in an accredited hospital;

(2) The subsequent domiciliary care by an accredited physician; and

(3) Medicines.

(b) Ambulatory services in an accredited hospital shall be allowed only in case of injury.

B. *Ward Services* — (a) They cover all of the services an in-patient would ordinarily receive in a hospital such as:

(1) Bed in a ward (6 beds in a room);

(2) All meals, including special diets,

(3) Regular nursing services;

(4) Medicines furnished by the hospital;

(6) Radiology service such as X-rays;

(7) Medical supplies such as splints and casts,

(8) Use of appliances and equipment furnished by the hospital such as wheelchair, crutches and braces;

(9) Anesthetic services;

(10) Operating room charges,

(11) Surgery; and

(12) Doctor's services.

(b) Ward services do not include:

(1) The extra charge for more comfortable accommodations such as private and semi-private rooms;

(2) Personal comfort or convenience such as charges for the use of a telephone, radio or television;

(3) Private duty nurses;

(c) If a patient receives services more expensive than ward services, payment by the System shall be made only for the ward services. However, private or semi-private room accommodations when medically necessary because the contagious disease or his condition requires him to be isolated, or there is no available ward bed and the emergency nature of the injury or disease requires him to be immediately accommodated, shall be paid by the System after satisfying itself as to the reasonableness thereof, and at no cost whatsoever to the patient. The continued accommodation of the patient in a private or semi-private room when a ward bed is available and the emergency or contagion no longer exists shall be paid by the System as ward services.

(d) Only necessary and relevant services shall be paid by the System. Laboratory and/or radiology services and medicines shall be kept to a level considered by the physician reasonably necessary and relevant to the particular illness or injury.

C. Hospital Confinement — (a) The benefits for each day of confinement in an accredited hospital shall be only for *ward services*.

(b) The benefit in case of injury shall not exceed the actual cost of ward services in an accredited hospital.

(c) The benefit in case of sickness shall not exceed the actual cost of ward services in an accredited hospital equipped with facilities necessary for the treatment of the disease.

(d) Confinement shall be counted in units of a full day, with the day of admission counted as a full day but not the day of discharge.

D. Professional Fees — The professional fee for the first visit is One hundred pesos (P100.00) for the General Practitioner and One hundred Fifty pesos (P150.00) for the Specialist. For succeeding visits, the Professional fee is Eighty pesos (P80.00) for the General Practitioner and One hundred pesos (P100.00) for the Specialist. (as provided under Section 3 of Executive Order (EO) No.135, dated April 23, 2013)

E. Surgical Expense Benefit — (a) A qualified employee who has undergone a surgical procedure in an accredited hospital shall be entitled to a surgical expense benefit, which

shall consist of:

(1) A surgeon's fee according to the ECC Relative Value Study (*ECC Res. No. 94, dated April 14, 1976, as amended by Res. No. 1554 dated June 26, 1980, Res. No. 2113 dated July 15, 1982 and Res. No. 2656 dated March 15, 1984*).

(2) An anesthesiologist's fee ordinarily not exceeding one-third of the surgeon's fee.

(b) The surgeon's fee shall be paid to the surgeon who performed the operation, and the anesthesiologist's fee to the anesthesiologist, subject to the following conditions:

(1) Only one surgeon shall be paid for each operation;

(2) Only one anesthesiologist, if any shall be paid for each operation; and

(3) Local anesthesia, other than regional nerve block anesthesia, shall not be compensable.

(c) The operating room fee shall be paid by the System only for surgical procedure done in the operating-diagnostic therapy room complex of the accredited hospital.

ANNEX D Supplementary Rules (Board Resolution No. 90-03-0022)

I. Distribution of Monthly Income Benefits to Surviving Wives and Children Beneficiaries of Muslims

1. The basic monthly pension shall be divided equally among the surviving wives;

2. Upon the death or re-marriage of any of the wives, her basic monthly pension shall be equally re-distributed to the remaining surviving wives;

3. The qualified dependent children not exceeding five beginning with the youngest and without substitution, who are entitled to the dependent's pension, shall be counted from among the collective number of children of the wives of the Muslim and not counted from the children of each of the wives of the Muslim. (as provided under BR No. 14-07-34, series of 2014, dated July 28, 2014)

II. Benefits upon the Death of a Pensioner

1. Provisions of paragraph (b), Article 194 of [PD 442](#), as amended, shall apply to death occurring on or after January 1, 1980, regardless of the date of the onset of the permanent total disability.

2. Upon the death of a pensioner, as mentioned in paragraph (b) of Article 194, eighty percent (80%) of the monthly income benefit and the dependent's pension shall be paid to the primary beneficiaries in cases where the cause of death is a complication or natural consequence of his compensated Permanent Total Disability. (as amended by Board Resolution No. 10-09-116, Series of 2010, September 2, 2010)

3. This provision does not apply to cases where a member under permanent partial disability dies during the period where he is receiving monthly income benefits for permanent partial disability.

4. Upon the death of a pensioner who is survived by secondary beneficiaries, the latter are entitled only to the balance of the five-(5) year guarantee period, provided that the total amount of compensation benefits for the five-year period shall not be less than fifteen thousand (P15,000.00) pesos, but if the member under permanent total disability dies after the five-year guarantee period, secondary beneficiaries are no longer entitled to any benefits.

III. *Prescriptive Period* (see Sec. 6, Rule VII of the Amended Rules on Employees' Compensation)

IV. *Appeal from the Decisions of the Systems*

1. Within thirty (30) days from receipt of the letter of denial or the affirmation of denial, as the case may be, the claimant shall inform the System in writing of his desire to appeal, otherwise the decision of the System shall become final. Upon receipt of such appeal, the System shall within five (5) days forward the entire record of the case to the Commission for review.

However, when a judgment or order is entered through fraud, accident, mistake, excusable negligence or analogous circumstances, claimant may file a petition with the System praying that the judgment be set aside within the time and in the manner prescribed under Section 3, Rule 38 of the Revised Rules of Court.

V. *Repealing Clause and Effectivity*

1. All Rules or Regulations which are inconsistent with this Suppletory Rules are deemed repealed and superseded.

2. This Suppletory Rules shall take effect upon approval by the Commission.

APPROVED UNANIMOUSLY.

March 23, 1990

The foregoing Suppletory Rules were adopted by the Employees' Compensation Commission in its resolution 90-03-0022, passed during its 6th Regular Meeting, Series of 1990, held on March 23, 1990 at Fourth Floor, Employees' Compensation Commission Building, 355 Sen. Gil J. Puyat Avenue, Makati, Metro Manila.

ANNEX E Rules of Procedure for the Filing and Disposition

of the Employees' Compensation Claims

WHEREAS, the existing Rules of Procedure need updating and simplification to meet the need of claimants, dependents, and beneficiaries under existing and changing conditions;

WHEREAS, these simplified and updated Rules will achieve the objective of the Employees' Compensation Law, and will assist parties in obtaining prompt, expeditious and inexpensive settlement of their claims;

WHEREAS, these Rules will improve the administration and enforcement of the Employees' Compensation and State Insurance Fund Law;

NOW THEREFORE, the Commission hereby adopts and promulgates the following rules:

RULE 1 Title and Construction

SECTION 1. *Title.* — These rules shall be known and cited as the Rules of Procedure for the Adjudication of Employees' Compensation Claims.

SECTION 2. *Construction and Interpretation.* — These rules of procedure shall be liberally construed to promote the objective of the Law on Employees' Compensation and State Insurance Fund (hereinafter referred to as the Law), to assist the parties in obtaining just, prompt, expeditious and inexpensive settlement of their claims.

RULE 2 Jurisdiction

SECTION 1. *Jurisdiction.* — (a) *Original and Exclusive.* The Government Service Insurance System (hereinafter referred to as GSIS) in case of the public sector and the Social Security System (hereinafter referred to as SSS) in case of the private sector, shall have original and exclusive jurisdiction to settle any dispute arising from the Law and its Implementing Rules and Regulations with respect to coverage, entitlement to benefits, collection and payment of contributions and penalties thereon or any other matter related thereto.

(b) *Appellate.* The Employees' Compensation Commission (hereinafter referred to as the Commission) shall have appellate jurisdiction over all awards and decisions, orders or resolutions of the GSIS and SSS.

RULE 3 Filing of Claim

SECTION 1. *Who May File.* — The covered employee, his dependents or the beneficiaries defined by law or, in case of their absence or incapacity, their duly authorized representative may file an appropriate claim with the GSIS in case of the public sector or the SSS in case of the private sector.

SECTION 2. *What to File.* — Claims for benefits may be filed for any or a combination of the following:

- 1. Disability Benefit

- (a) Permanent Total Disability (PTD) Benefit
- (b) Permanent Partial Disability (PPD) Benefit
- (c) Temporary Total Disability (TTD) Benefit
- 2. Death Benefit
- 3. Funeral Benefit
- 4. Medical Services
- 5. Rehabilitation Services

SECTION 3. *Where to File.* — All EC claims may be filed by the claimant at his option in the Regional Office/Branch of the System nearest to the place of work or residence. *(as amended by Board Resolution No. 10-10-157, Series of 2010, October 20, 2010)*

SECTION 4. *Prescriptive Period.* *(see Section 6, Rule VII of the Amended Rules on Employees' Compensation)*

RULE 4 Procedure in the System

SECTION 1. *Form of Application.* — All claims shall be filed using the prescribed forms furnished by either the GSIS or the SSS, and endorsed by the employer or his duly authorized representative together with the following supporting documents:

- 1. Claim for disability benefits
 - (a) Sickness resulting to disability
 - (1) Updated service record;
 - (2) Statement of duties and responsibilities;
 - (3) Hospital record of confinement;
 - (4) Official receipts in payment of hospital bills, professional fees and medicines purchased from the drugstore.
 - (b) Injury resulting to disability
 - (1) Updated service record;
 - (2) Statement of duties and responsibilities;
 - (3) Police investigation report, employer's report of injury, death/casualty (for civilian employees) spot report, Investigation Report and/or report of proceedings before Line of Duty Board (for AFP members);
 - (4) Mission or Travel Order, when applicable;

(5) Hospital receipts in payment of hospital bills, professional fees and medicines purchased from drugstore.

2. Claim for Death Benefits

(1) Updated service record;

(2) Statement of duties and responsibilities;

(3) Police investigation report or employer's report of injury, death or casualty (for civilian employees) spot report and/or report of proceedings before Line of Duty Board (for AFP members), when applicable;

(4) Mission or Travel Order, when applicable;

(5) Hospital record of confinement;

(6) Official receipts in payment of hospital bills, professional fees and medicines purchased from a drugstore;

(7) Death certificate issued by the Local Civil Registrar or National Statistics Office (NSO); and

(8) Declaration of presumptive death by competent authority.

3. The GSIS or the SSS may require the submission of other supporting documents if the supporting papers of the claim are insufficient to make a proper adjudication of the claim.

SECTION 2. *Period of Evaluation.* — The GSIS and SSS shall evaluate an EC claim within the following period:

a. Claim for death benefits — within ten (10) working days

b. Claim for disability benefits —

b.1. Sickness — within five (5) working days

b.2. Injuries — within five (5) working days

In all cases, the counting of the prescribed period shall commence from the submission of all required documents. (as amended by Board Resolution No. 10-09-115, September 2, 2010)

SECTION 3. *Notice of Award or Decision.* — The claimant shall be notified in writing by the GSIS or the SSS of its award or decision on the action taken on his claim.

The award or decision of the GSIS or SSS shall include the following:

1. Facts of the case;

2. Issue or issues involved;
3. Applicable laws or rules; and
4. Conclusion(s) and reason(s) therefor.

SECTION 4. *Motion for Reconsideration.* — The claimant shall file with the GSIS or the SSS, as the case may be, only one motion for reconsideration within ten (10) calendar days from receipt of the decision.

When a motion for reconsideration is denied by the GSIS or the SSS, the claimant may appeal to the Commission within thirty (30) calendar days from the receipt of the decision or the notice of denial of the motion for reconsideration.

The Systems should direct their branches to elevate denied EC claims to their main offices for review purposes.

The Systems should indicate in the letter to the claimant on the denial of EC claims, the information that a Motion for Reconsideration (MR) may be submitted to the main office of the Systems while a case appeal after the denial of the MR may be submitted to the Secretariat. (as provided under Board Resolution under 13-04-12 dated April 8, 2013)

RULE 5 Appeal

SECTION 1. *Period of Appeal.* — The claimant shall file with the GSIS or the SSS, as the case may be, a notice of appeal within thirty (30) calendar days from receipt of the decision.

SECTION 2. *Grounds.* — The appeal may be entertained only on any of the following grounds:

- (a) if serious errors in the finding of facts are raised which, if not corrected, would cause grave irreparable damage or injury to the appellant,
- (b) if there is a *prima facie* evidence of abuse of discretion on the part of the System, and
- (c) if made purely on question of law.

SECTION 3. *Requisites for Perfection of Appeal.* — The appeal shall be filed within the reglementary period as provided in Section 1 of this Rule, stating the grounds relied upon and the arguments in support thereof, and the relief prayed for.

A mere notice of appeal without complying with the other requisite aforestated shall not stop the running of the period for perfecting an appeal.

SECTION 4. *Transmittal of the Record in Case of Appeal.* — Upon receipt of the notice of appeal, the GSIS or SSS shall transmit the entire records of the case to the Commission

within five (5) working days from receipt thereof. The transmittal letter must include the date of the:

- (a) Filing of the claimant's application,
- (b) Decision of GSIS or SSS,
- (c) Receipt by the claimant of the decision of the GSIS or the SSS,
- (d) Claimant's motion for reconsideration,
- (e) Decision of the GSIS or SSS on the motion for reconsideration,
- (f) Receipt by the claimant of the GSIS or SSS' decision on the motion for reconsideration,
- (g) Claimant's notice of appeal with the GSIS or SSS, and
- (h) Transmittal of the records to the ECC.

SECTION 5. *Docket and Assignment of Cases.* — Appealed cases from the GSIS and SSS duly received by the Commission shall be docketed and assigned to legal and medical officers, as the case may be, for evaluation and review.

SECTION 6. *Evaluation and Recommendation.* — Cases involving legal issues shall be assigned to the Legal Division for proper legal evaluation. Cases involving medical issues shall be assigned to the Medical Division for proper medical evaluation.

In either case, the evaluation shall be in a duly prescribed outline form and from which a draft decision shall be based.

SECTION 7. *Submission to the Technical Review Committee (TRC).* — The evaluation shall be submitted to the Technical Review Committee (TRC) for its consideration and recommendation.

SECTION 8. *Action of the TRC.* — The TRC shall review the evaluation and elevate the same to the Commission.

SECTION 9. *Action by the Commission.* — Upon submission of the draft decision, the Commission may approve, deny or modify the evaluation and recommendation of the TRC.

SECTION 10. *Content of Decisions, Resolutions and Orders.* — Decisions, resolutions, or orders issued by the Commission shall be clear and concise, and shall include a brief statement of:

- (a) The facts of the case,
- (b) The issue or issues involved,
- (c) The applicable laws or rules, and

(d) The conclusion(s) and/or reason(s) of the action taken, and

(e) The benefits granted, if any.

The Systems shall submit its proof of compliance with the decision of the Commission to grant EC benefits at the end of every month. (as provided under Board Resolution No. 13-04-13, dated April 8, 2013)

SECTION 11. *Form and Notice of Decision.* — All decisions, orders and resolutions shall be signed by the members of the Commission who participated in the deliberation. The Notice of Decision shall be signed and issued by the Executive Director or the duly authorized representative and shall bear the seal of this Commission. [As amended by B.R. No. 10-09-117, s. 2010, approved on 02 September 2010]

All parties concerned shall be given written notice of the decision rendered by the Commission.

No motion for reconsideration of the decision, resolution or order of the Commission shall be allowed.

Appeals to the Court of Appeals shall be filed within fifteen (15) days from receipt of the notice thereof, and shall be governed by the Rules of Court.

RULE 6 Final Provisions

SECTION 1. *Repealing Clause.* — Upon the effectivity of these Rules of Procedure for the Adjudication of Employees' Compensation Claims, all resolutions, orders, memoranda and circulars which are inconsistent with these rules are hereby repealed or modified accordingly.

SECTION 2. *Effectivity Clause.* — These rules shall take effect fifteen (15) days after the completion of its publication in a newspaper of general circulation.

Done in the City of Makati this 13th day of July 1995.

(Published on Sept. 6, 1995 and took effect on Sept. 21, 1995)

(Amended Rules on Employees' Compensation (Rev. 2014), [July 21, 1987])

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