

MARANAN, Margaret
Re: Rehabilitation Leave
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RESOLUTION NO. 01-1532

Rodrigo Noel A. Gonzales, Service Chief, Human Resources Management Service (HRMS), Senate, Republic of the Philippines, requests opinion on whether the illness of aneurysm is a job-related illness falling within the coverage of Rehabilitation Leave benefit and whether the medical expenses incurred during the hospitalization of Margaret Maranan, a Secretary at the Legislative Budget Research and Monitoring Office, Senate, who succumbed to aneurysm could be reimbursed.

Pertinent portions of the letter-request are, as follows:

- "1. *Ms. Maranan collapsed inside the Senate premises while attending mass between 12 to 1 p.m. on October 1, 1999 and was rushed to the San Juan de Dios Hospital.*
- "2. *According to the attached clinical report of Dr. Leovegildo C. Isabela, Sr., attending neurosurgeon, Ms. Maranan underwent complete cerebral angiographic studies on October 6, 1999, which showed that there was an aneurysm of the internal carotid-posterior communicating artery.*

She underwent craniotomy on October 8, 1999 with clipping of the aneurysm. A week after the operation, she developed left-sided weakness, convulsion and high blood pressure. After a few days, Ms. Maranan's condition improved and physical rehabilitation was instituted. However, there was a sudden elevation of the blood pressure followed by convulsion and loss of consciousness. She went into a deep coma and passed away on November 11, 1999."

Records show that on October 1, 1999, Maranan was admitted at the San Juan de Dios Hospital after she collapsed inside the Senate premises while attending mass from 12:00 to 1:00 p.m. In a Certification Letter issued by Dr. Zenaida Bagabaldo, Neurologist, said hospital, she certified that Maranan was under her medical care from October 2, 1999 until her death on November 11, 1999. She also certified that Maranan needed medical care before and after the operation because of other accompanying medical conditions such as seizures, weakness of the left side of the body, headaches, vomiting, infection, and bleeding from the gastrointestinal tract. In another Certification Letter dated October 18, 2000, Dr. Carlos P.R. Esguerra, of San Juan de Dios Hospital, certified that Maranan was under his care from October 4, 1999 up to November 11, 1999.

In a letter dated November 15, 2000, addressed to the Service Chief, HRMS, Philippine Senate, Homer Maranan, husband of Margaret Maranan, reiterated his claim for reimbursement of medical expenses incurred during the period that his wife was hospitalized.

In his letter, Homer Maranan stated, as follows:

"With due respect to the opinion of the Medical and Dental Service, please allow me to submit my comment on the matter. A close perusal of the pertinent Civil Service rules would reveal that the rehabilitation leave must correspond to the period within which the subject employee is undergoing rehabilitation from an illness or injury. In the case at bar, it is an established fact that the illness of my wife was aneurysm. This illness clearly manifested itself when my wife collapsed within the Senate premises during office hours last October 1, 1999. It was subsequently confirmed by various examinations done at San Juan de Dios Hospital and through angiography at Makati Medical Center. Taking into account these incontrovertible facts in relation to the applicable Civil Service Rules, the rehabilitation being referred to in the case of my wife must be 'rehabilitation from aneurysm'. Within this context, all medical procedures and medication applied and given to my wife from October 1, 1999, right after she collapsed, until November 11, 1999, were all meant to restore, to the fullest extent possible, her normal health condition and rehabilitate her from the effects of aneurysm. One of these procedures, in fact the most critical and major procedure, was the surgical operation or craniotomy done on October 8, 1999.

"Going back to the opinion of the Medical and Dental Service, it would appear that it considers

rehabilitation, in the case at bar, to mean 'rehabilitation from the surgical operation (craniotomy) ' since it interpreted 'rehabilitation period' to cover only the post operation phase. If this opinion would be sustained, I respectfully submit that it is not consistent and could be contradictory to the pertinent Civil Service rules on rehabilitation leave."

Records further show that the professional fee for the total neurosurgical service rendered to Maranan inclusive of aneurysm clip, amounted to One Hundred Seventy Five Thousand Pesos (P 175,000.00).

Section 55, Rule XVI of CSC Memorandum Circular No. 41, series of 1998,^[1] provides, as follows:

"Sec. 55. Rehabilitation leave for job-related injuries. - Applications of officials and employees for leave of absence on account of wounds or injuries incurred in the performance of duty must be made on the prescribed form, supported by the proper medical certificate and evidence showing the wounds or injuries were incurred in the performance of duty. The head of department/agency concerned shall direct that absence of an employee during his period of disability thus occasioned shall be on full pay, but not to exceed six (6) months. He shall also authorize the payment of medical attendance, necessary transportation, subsistence and hospital fees of the injured person. Absence in the case contemplated shall not be charged against sick leave or vacation leave, if there are any."

Corollary thereto, the head of department/agency concerned shall direct that absence during any period of disability thus occasioned shall be on full pay, but not to exceed six months. He shall also authorize the payment of medical attendance, necessary transportation, subsistence and hospital fees of the injured persons.

Well entrenched is the precept that a social legislation like the rehabilitation leave, being remedial in character, should be liberally construed and administered in favor of the persons intended to be benefited thereby. The liberal approach aims to achieve humanitarian purposes of the law in order that the efficiency, security and well being of government employees may be enhanced.^[2] **It has been the intention of the Commission from the start that any sickness or illness, as long as it is service connected, is deemed included in the coverage of the rehabilitation leave contemplated under MC No. 41, s. 1998.**^[3] Thus, the rule on rehabilitation leave covers not only wounds and injuries but

service-related illnesses.

In this connection, the Commission ruled, as follows:

"It may be mentioned that this provision [Section 55 of CSC MC No. 41, s. 1998] was part of the Old Administrative Code (Republic Act No. 1232) and was precisely retained in Rule XVI Implementing Book V of the Administrative Code of 1987 pursuant to the commitment of the Commission to promote a more humanizing bureaucracy.

"The rationale of rehabilitation leave is that when a job-related accident happens, the first one that is expected to extend a helping hand is the agency-employer before any other agency of government can take over, such as, GSIS and/or Employee Compensation Commission.

"Under this provision, the agency-employer is expected to ensure that the employee is given adequate first aid treatment, especially so if the contingency took place in the premises of the agency. In line with this thinking, the transport of the employee-patient from the office or place of accident to the hospital or clinic as well as the medical expenses incurred during the period of such first aid treatment shall be borne by the agency-employer, without prejudice to the recovery of the employee from the Medicare and other government institutions. However, it is primordial for the purpose of reimbursement that expenses incurred are supported by documents.

"However, subsequent expense/s on medical attendance and transportation beyond the purpose of first aid treatment are not covered under this section." [\[4\]](#) (Emphasis supplied)

While the rehabilitation leave is a social legislation designed to give relief to employees, it is not the intention of the Commission to include in its coverage all injuries and illness which might be acquired by the employee in the course of the employment, but only those which are incurred in the performance of duty. Moreover, the claim for rehabilitation leave is over and above the rights of an employee to claim from other agencies such as GSIS and ECC. In evaluating the entitlement of an employee to rehabilitation leave, the Commission must not only decide from the sympathetic point of

view but must consider proven facts pertaining to the relation of the injury and the work of an employee. To be entitled to the same, there must be evidence to show that the illness was incurred in the performance of duty or that it is service or work connected.

At issue in this case is whether or not the illness of aneurysm may be considered as service or work related. Aneurysm is a localized abnormal dilation of a blood vessel (as an artery) filled with fluid or clotted blood, usually forming a pulsating tumor, and resulting from disease of the vessel wall. [\[5\]](#)

Squarely applicable to the issue is the ruling of the Supreme Court in **Carlita C. Trinidad vs. Workmen's Compensation Commission**, [\[6\]](#), where the employee suffered a cerebro-vascular accident which proved to be fatal. The fate suffered by the employee in the said case is similar to that of Margaret Maranan. Relevant portion of the decision states, as follows:

"Cerebro-vascular accident means the breaking of a blood vessel within or about the brain. It is also known as cerebral intracranial hemorrhage for which the science of medicine gives several causes among which are hypertensive vascular diseases and arterial aneurysms which are the gradual processes that worsen over the years if left unchecked."

In this connection, **Item 19, Occupational Diseases, as found in the Amended Rules on Employee's Compensation** [\[7\]](#) states, as follows:

- "19. **CEREBRO-VASCULAR ACCIDENTS.** Under the following conditions -
- 'a. *There must be a history, which should be proved, or trauma at work (to the head specially) due to unusual and extraordinary physical or mental strain or event, or undue exposure to noxious gases in the industry.*
 - 'b. *There must be a direct connection between the trauma or exertion in the course of the employment and the worker's collapse.*

'c. *If the trauma or exertion then and there caused a brain hemorrhage, the injury may be considered as arising from work.*

"This was approved under Resolution No. 432, July 20, 1977. Although not considered occupational diseases, they are nevertheless work-related and thus compensable, too." [8]

Based on the foregoing, the illness which resulted in the death of Margaret Maranan may be considered as a cerebro-vascular accident caused by arterial aneurysm. Cerebro-vascular accidents are recognized as work-related by no less than the Employee's Compensation Commission (ECC), which is expected to have higher standards when it comes to the determination of whether a certain illness is occupational, service or work related. However, there are certain conditions enumerated in the said resolution for a cerebro-vascular accident to be considered work-related. Particular to this case, there must be proof to show that the cerebro-vascular accident, especially to the head, was due to unusual physical or mental strain or trauma at work.

Thus, aneurysm as an illness, in general, may or may not be work-related. Whether a sickness is service or work-related will depend upon the peculiarities of each and every case. There can be no hard and fast rule in determining whether or not a sickness is work-related. It is up to the applicant for rehabilitation leave to show a reasonable work-connection in his illness and if there is no work-connection in the sickness, he must show proof that the risk of contracting the illness is increased by the working conditions. He who alleges a fact has the burden of proving it and a mere allegation is not evidence. [9] Finally, it must be reiterated that the head of agency shall determine whether or not the employee is entitled to rehabilitation leave. It is also the head of agency who will to determine if there is reasonable work-connection in the illness subject to proof by the employee. The head of agency shall then direct the payment of medical attendance, which shall be limited to first-aid treatment. Particular to this case, first-aid treatment shall refer to the expenses incurred before the operation of Maranan. The expenses incurred by Maranan after the first-aid treatment shall no longer be the liability of the concerned agency but must now be under the determination of the ECC. As to the rehabilitation leave of Maranan, the same shall cover the time from the occurrence of the illness (from the time Maranan collapsed inside the Senate premises) until her death.

WHEREFORE, the Commission rules that for purposes of the application of Rehabilitation Leave, Maranan shall be paid her salaries from the time she collapsed until her death. Medical expenses incurred during the first-aid treatment that are duly supported by documents shall be reimbursed by the concerned agency. First-aid treatment shall refer to the expenses incurred before

the operation of Margaret Maranan.

Quezon City, **September 13, 2001**

(SIGNED)

J. WALDEMAR V. VALMORES

Commissioner

(SIGNED)

KARINA CONSTANTINO-DAVID

Chairman

(ON LEAVE)

JOSE F. ERESTAIN, JR.

Commissioner

Attested by:

(SIGNED)

ARIEL G. RONQUILLO

Director III

FPG/KPZ/X3/X14/d9/jrl

O-01-0098

[1] Revised Omnibus Rules on Leave

[2] Ortiz v. COMELEC, 162 SCRA 812

[3] CSC Resolution No. 01-0280, dated January 30, 2001

[4] CSC Resolution No. 00-0735, dated March 22, 2000

[5] Webster's Third New International Dictionary, 1976 Edition, p. 82

[6] 81 SCRA 668

[7] Approved on July 21, 1987

[8] As cited in LABOR CODE, C.A. Azucena, Volume I, 1999 Revised Edition, p. 632

[9] Galanida vs. ECC, G.R. No. 70660, September 24, 1987