

JAIME LOOT, PETITIONER, VS. GOVERNMENT SERVICE INSURANCE SYSTEM (DEVELOPMENT BANK OF THE PHILIPPINES), RESPONDENTS.

G.R. No. 86994. June 30, 1993

Ponente: ROMERO, J.

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ROMERO, J.:

Petitioner, a lawyer, retired at age sixty-five (65) as Special Assistant in the Development Bank of the Philippines (DBP) on September 27, 1980. He started serving the government in 1939 as a clerk in the Bureau of Health and had a short stint as a military officer from 1941 to 1947, after which, he started working as a stenographer at the DBP.

Sometime in 1969, when he was branch manager of the DBP in Puerto Princesa, he began complaining of headache and chest pain. He consulted physicians at the DBP but he was referred to the St. Luke's Hospital where he was diagnosed as suffering from hypertensive cardiovascular disease.

One year after his retirement in 1980, petitioner filed with the Government Service Insurance System (GSIS) a claim for compensation benefits under Presidential Decree No. 626,[1] as amended. Attached to his claim was a certification from his attending physician at the United Doctors Medical Center, Dr. Antonio F. Guytingco, stating that petitioner was suffering from "arteriosclerotic hypertensive cardiovascular disease" and "left ventricular hypertrophy by voltage criteria" and that his degree of disability was "permanent total." [2]

Evaluating petitioner's medical records, the GSIS considered him to have only partial permanent disability (PPD), and awarded him medical benefits from September 1980 to March 1982 or for nineteen (19) months. Petitioner requested a reconsideration of the GSIS' evaluation which was, however, denied on the ground that, based on the Implementing Rules of Employees Compensation Program, the degree of his disability at the time of his separation from government service fell under the category of PPD only, and that any sickness, injury or death which might arise after retirement could not be considered work-related within the contemplation of law.

Still dissatisfied with the GSIS' explanation, petitioner persistently wrote letters claiming additional benefits, attaching thereto medical certificates issued by his attending physician. The GSIS re-evaluated his case but found no reason to alter or even amend its denial of petitioner's claims. The November 11, 1987 reply of Dr. Orlando C. Misa, Vice-President and Medical Director, Medical Services Center of the GSIS, reads in part:

"X X X X X X X X X X

We would like to reiterate our previous stand of denial on your request to convert your approved claim illness or Arteriosclerotic Heart Disease with Left Ventricular Hypertrophy and its resulting disability at the time you were separated or retired from the service from Permanent Partial Disability to Permanent Total Disability. We agree with Dr. A. Guytingco of UDMC that your approved claim illness is irreversible and incurable hence considered permanent but we believe that the same is not a total disability.

Probably, Dr. A. Guytingco is not aware of the System's (GSIS) and Commission's (ECC) criteria and basis of classifying the degree of disability of a particular illness or injury. Your disability may be likened to a person with an amputated arm or leg which you may view as permanent total but under our criteria and basis, it falls only under Permanent Partial (Permanent loss of an arm or leg but partial considering that the loss is only one arm or one leg as the case may be). The reason why you were barred from being employed or engaging in any gainful pursuit was probably due to your age since you reached the compulsory age of 65 years old when you retired from the service.

Considering your mental capabilities as evidenced by your letters to the System, we think you can still engage in a self-employed pursuit since your profession does not fall under laborer. Considering also that your approved claim illness did not result in a Neurologic deficit at the time you retired from the service, there is no deterrent for you to engage into a blue collar job.

The evaluation of a degree of disability is a medical specialization and should be done by knowledgeable physician trained on disability evaluation. If there is specialist in the different lines in medicine, the physicians involved in the field of evaluating the degree of disability can also be called a specialist on such field."^[3] (Underscoring supplied.)

Hence, petitioner elevated his case to the Employees Compensation Commission (ECC).

In a decision which was unanimously approved by the ECC on September 21, 1988 under Resolution No. 3986, the denial of petitioner's claims was affirmed. The ECC held:

"We have conducted a careful review of the case, including the additional evidences submitted. All the foregoing circumstances considered, appellant's claim does not merit a PTD award. Based on the ECC schedule of Compensation, it states, 'that patients with organic heart disease, whose ordinary physical activity is slightly limited, shall be awarded 25% NSD.' Appellant's arteriosclerotic heart disease with left Ventricular Hypotrophy falls under PPD only, and does not meet the criteria for a PTD. Moreover, appellant was already awarded the maximum benefits commensurate to the degree of his disability at the time he retired from government service."^[4]

Capitalizing on the concurrence of Dr. Misa of the GSIS with the findings of his attending physician that his ailment is incurable, irreversible and progressive, petitioner filed the instant petition raising these issues: "(1) Is the degree of Petitioner's disease, Arteriosclerotic Heart Disease with Left Ventricle Hypertrophy, a permanent total disability as interpreted by law? (2) Alternatively, assuming *arguendo* that Petitioner's disease is permanent partial disability only, is Petitioner entitled to the full benefit of 50 months provided by law for PPD?"

In view of the GSIS' stand that the law applicable in petitioner's case is the Workmen's Compensation Law or Act No. 3428, as amended, and not Presidential Decree No. 626, as amended, we shall first determine said issue. Art. 206 of the said Presidential Decree specifically provides that it shall apply "only to injury, sickness, disability or death occurring on or after January 1, 1975."^[5] The records indisputably show that petitioner became ill as early as 1969. Workmen's Compensation cases are governed by the law in force at the time the claimant contracted his illness.^[6] Therefore, petitioner's case is clearly excluded from the application of P.D. No. 626 and he can invoke the doctrine of compensability under the Workmen's Compensation Act.^[7]

Although it appears that the GSIS granted the petitioner's claim under P.D. No. 626 as shown by the fact that its counsel contends herein that the GSIS should be refunded by the DBP with whatever amount of the claim it had paid to petitioner because liability under the Workmen's Compensation Law is chargeable to the employer,^[8] it is not too late in the day to correct such erroneous application of the law.

Permanent total disability or "total and permanent disability" under Sec. 15 of the Workmen's Compensation Law means "disablement of an employee to earn wages in the same kind of work, or work of a similar nature that (s)he

was trained for, or accustomed to perform, or any kind of work which a person of her (his) mentality and attainment could do." [9] The Court further explained in the Gonzaga case that such disability "does not mean an absolute helplessness but rather an incapacity to perform gainful work which is expected to be permanent x x x. Total disability does not require that the employee be absolutely disabled, or totally paralyzed. What is necessary is that the injury must be such that she cannot pursue her usual work and earn therefrom x x x. It is not the injury which is compensated but the incapacity to work resulting in the impairment of one's earning capacity x x x."

Petitioner asserts that his ailment has prevented him from seeking employment, practicing his profession, or engaging in a gainful occupation or even pursuing a self-help project since his retirement without risking a sudden stroke and eventual death as he has been under his doctors' ministrations. He cites Dr. Guytingco's report to buttress his assertion.

While we do not question the competence of GSIS physicians in determining the extent of an employee's disability, yet we cannot close our eyes to the fact that these physicians place more reliance on reports rather than on personal examination of an employee, which is what happened in the instant case. It must be conceded that the findings of the medical staff of the GSIS should be given due weight. [10] However, a claimant may not just cite the findings of a physician in support of his claim in order to be entitled to a monetary benefit. As this Court said in *Marte v. Employees' Compensation Commission*, [11] "no physician in his right mind and who is aware of the far-reaching and serious effect that his statements would cause on a money claim filed with a government agency, would issue certifications indiscriminately without even minding his own interests and protection." In signing a medical report, a physician, especially a specialist, stakes his reputation. We, thus, accord greater weight to Dr. Guytingco's findings.

Moreover, the ECC's contention that petitioner suppressed evidence by his failure to present certifications of other physicians who attended to him during his hospitalization at the Philippine General Hospital cannot adversely affect petitioner's rights under the Workmen's Compensation Act. The respondents are estopped from claiming noncompensability in view of their agreement with the finding that petitioner deserves medical benefits although they disagree on the extent of his disability. In fact, respondents have failed to rebut substantially petitioner's claim for medical benefits as an employee who sustained permanent and total disability. Inasmuch as the case falls under the Workmen's Compensation Act, noncontroversion of a claim renders the presumption of compensability conclusive. [12]

The respondents' apprehension that petitioner's health may have been aggravated by his advanced age considering that he retired some thirteen years earlier and thus he must be seventy-eight (78) years old by now, deserves scant consideration. This Court said in *Bautista v. Workmen's Compensation Commission*, [13] that:

"While we do not discount the possibility that such ailments may be 'caused by the aging process' . . . nonetheless that fact alone will not be sufficient to remove the ailment from the periphery of compensable disabling diseases under the Workmen's Compensation Act. The law applies to the young as well as to the aged, and while advancing age may be a contributing factor to the occurrence of an injury, the constant physical and mental exertions, strain and tension in teaching children of tender age for a period of almost 37 years are equally contributing and aggravating causes which render the resulting disabling injury or ailment compensable under the law."

In the same manner, the strain and tension caused by managing a branch of a bank may have aggravated petitioner's ailment, such that aggravation persisted even after he had retired from the service. His longevity inspite of a debilitating ailment should not stand in the way of his availment of the benefits provided for by the Workmen's Compensation Act. Being a social legislation, said law should be liberally construed to attain its objective of amelioration of workmens' plight to prevent them from becoming objects of charity. [14] Worth

quoting is the portion of the decision in *Laginlin v. WCC*, wherein the Court said:

"The fact that petitioner received a retirement benefit from his employer does not bar him from being entitled to a disability compensation benefit under the Workmen's Compensation Act, having in mind that the purpose of the disability benefit is separate and distinct from the retirement benefit given to an employee upon reaching the age of retirement. The disability benefit under the Act is to compensate the worker for his actual loss, for his disablement to earn wages in the same kind of work which he is engaged in, or work of similar nature. On the other hand, the retirement benefit is intended to help the employee enjoy the remaining years of his life, lessening the burden of worrying for his financial support and as a form of reward for his loyalty and service to the employer." [15]

As to who shall be liable for the payment of the petitioner's medical benefits, Sec. 2 of the Workmen's Compensation Act explicitly provides that the employer shall be liable to pay compensation. Thus, we agree with respondent GSIS that DBP should reimburse it whatever amount it had paid petitioner.

WHEREFORE, the decision of the Employees' Compensation Commission is hereby REVERSED and SET ASIDE. The Development Bank of the Philippines shall PAY petitioner medical benefits as a permanently and totally disabled person under the Workmen's Compensation Act and the same bank shall reimburse the GSIS whatever amount the latter had paid petitioner in terms of medical benefits. No costs.

SO ORDERED.

Feliciano, (Chairman), Bidin, Davide, Jr., and Melo, JJ., concur.

[1] Further Amending Certain Articles of PD No. 442, Entitled "Labor Code of the Philippines."

[2] Rollo, p. 11.

[3] Ibid, pp. 9-10.

[4] Ibid, p. 16.

[5] Now Article 208 of the Labor Code.

[6] *Rosales v. Employees' Compensation Commission*, L-46443, June 28, 1988, 162 SCRA 726. In this case, the Court considered the claimant to have contracted his ailment after January 1, 1975 and applied the new law on Employees' Compensation in view of the absence of any allegations on when the claimant got sick.

[7] *Delgado v. Republic*, L-45351, August 15, 1988, 164 SCRA 347; *Tibulan v. Inciong*, L-48576, August 11, 1989, 176 SCRA 316.

[8] Comment, p. 9; Rollo, p. 82.

[9] *Gonzaga v. Employees' Compensation Commission*, G.R. No. 62287, January 31, 1984, 127 SCRA 443, 450-451.

[10] In *Villavieja v. Marinduque Mining and Industrial Corporation* (L-43349, October 23, 1984, 132 SCRA 622, 630), the Court said: "x x x as between the impartial finding or evaluation on the matter of disability of the Compensation Medical Rating Officer who had physically examined petitioner-claimant and the conclusion of the Associate Commissioner of the respondent Workmen's Compensation Commission based merely on his general observation of the case, we find the former more reliable."

[11] L-46362, March 31, 1980, 96 SCRA 884, 890.

[12] *Laginlin v. WCC*, L-45785, March 21, 1988, 159 SCRA 91.

[13] L-2855, November 23, 1977, 80 SCRA 319.

[14] L-45785, March 21, 1988, 159 SCRA at 97.

[15] *Ibid*, p. 99.

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