



Republic of the Philippines SUPREME COURT Manila

CERTIFIED TRUE COPY REDO Division Clerk of Court **Third Division**

JUL 1 2 2017

THIRD DIVISION

GOVERNMENT SERVICE INSURANCE SYSTEM, Petitioner,

G.R. No. 182297

Present:

- versus -

FE L. ESTEVES,

Respondent.

VELASCO, JR., J., Chairperson, BERSAMIN, REYES. JARDELEZA, and TIJAM, JJ.

Promulgated:

June 21, 2017

DECISION

VELASCO, JR., J.:

This is a Petition for Review on Certiorari under Rule 45 filed by petitioner Government Service Insurance System (GSIS), assailing the Court of Appeals (CA) Decision dated December 13, 2007¹ and Resolution dated March 26, 2008.² The CA Decision reversed the ruling of the Employees' Compensation Commission (ECC) in its Decision dated April 20, 2005, denying Death Benefits to respondent Fe L. Esteves for the demise of her husband, Antonio Esteves, Sr. The ECC ruling affirmed petitioner's denial of respondent's claim.

The Facts

The facts of the case, as found by the CA, are as follows:

Antonio Esteves, Sr. was employed as a utility worker at the Gubat District Hospital (GDH), Gubat, Sorsogon, from December 1978 until the time of his death on August 5, 2000. Antonio's duties at the GDH consisted of the following: 1) prepares beds and distributes bedpans; 2) mops, scrubs, polishes furniture, and removes dust in the wards; 3) carries patients, distributes clean clothes and linens, and collects soiled ones; 4)

¹ Rollo, pp. 42-49. Penned by Associate Justice Ramon M. Bato, Jr. and concurred in by Associate Justices Andres B. Reyes, Jr. and Jose C. Mendoza (now a member of this Court). ² Id. at 50-51.

renders personal services to patients and runs errands for nurses and doctors.

On August 5, 2000, Antonio Estevez, Sr. was rushed to the hospital due to body weakness, headache and vomiting. At the hospital, his blood pressure ranged from 170-200 mmHg to 70-200 mmHg. His blood sugar level based on the two tests conducted, ranged from 10.44 mmol/l to 21.95 mmol/l, way above the normal range of 3.85 to 5.77 mmol/l.

A few hours after he was rushed to the hospital, Antonio Esteves, Sr. died. His death certificate states that the following were the causes of his death:

"Immediate cause: a. CVA, HEMORRHAGIC Antecedent cause: b. HYPERTENSION, STAGE III Underlying cause: c. NIDDM"

Believing that the death of her husband was work-related and compensable under P.D. No. 626, [respondent] filed a claim for death benefits with the Government Service Insurance System (GSIS).³

Petitioner GSIS, however, denied respondent's claim on the ground that Antonio's underlying cause of death, Non-Insulin Dependent Diabetes Mellitus, is not considered as work-related.

Aggrieved, respondent appealed to the ECC, which rendered the assailed decision, the dispositive portion of which reads:

WHEREFORE, the appealed decision is AFFIRMED and the claim is dismissed for lack of merit.⁴

In affirming the rejection of the claim, the ECC explained this way:

This Commission finds and holds that the deceased's Stroke was caused by his Diabetus Mellitus. Medical science has already established that 'in most diabetics, regardless of the type of diabetes, morphologic changes are likely to be found in:

'Arteries-Atherosclerosis (hardening of the inner lining of the arteries) begins to appear in most diabetics, whatever their age, within a few years of onset. xxxx this may result to arterial narrowings or occlusions and ischemic injury to organs that induce aneurismal dilatation, seen most often in the aorta, with the grave potential of rupture. This large vessel disease accounts for the myocardial infarction and cerebral stroke...'(Robbins' Pathologic Basis of Disease, 6th, Ed.)

Medical records revealed that Antonio Esteves, Sr. had no records of consultation for Hypertension and Diabetes Mellitus. It was only at the time of his death that he was documented to have elevation in blood pressure and blood sugar. Hence, this Commission holds that Diabetes is the more significant factor of which Hypertension and Stroke are the

 $^{^{3}}$ Id. at 42-43.

⁴ Id. at 43.

complications. Neither can it be said that the risk of contracting the Stroke was increased by the deceased's working conditions for irrespective of those conditions, the complications could have set in.

This Commission also holds that the deceased's underlying ailment, Diabetes Mellitus, is not work-connected. The said ailment is caused by genetic factors, obesity, and overeating which are not related to the deceased's employment and working conditions. Hence, irrespective of the type of work that he had been engaged in, he could have contracted Diabetes.⁵

Unsatisfied, respondent filed an appeal with the CA which was granted in the assailed Decision dated December 13, 2007, the dispositive portion of which reads:

WHEREFORE, the petition is hereby GRANTED. The assailed Decision of the Employees' Compensation Commission (ECC) is REVERSED and SET ASIDE. The GSIS is directed to promptly pay petitioner Fe L. Esteves compensation arising from the death of her husband, Antonio Esteves, Sr., pursuant to P.D. No. 626, as amended.

SO ORDERED.⁶

Petitioner filed a motion for reconsideration of the above Decision but was denied in the assailed Resolution dated March 26, 2008.

Hence, the instant petition.

The Issues

Petitioner raises the following issues in the instant petition:

1. Whether the Honorable Court of Appeals committed a reversible error in overturning the Decision of the ECC, which denied the claim for death benefits under P.D. No. 626, as amended, of respondent Fe Esteves due to the death of her husband, the late Antonio Esteves, Sr.

2. Whether the underlying cause of death of the late Antonio Esteves, Sr., which was Diabetes Mellitus as indicated in his death certificate, and his other ailments as merely complications of his Diabetes, may be considered compensable under P.D. No. 626, as amended.⁷

Ruling of the Court

The instant petition must be granted.

Article 194 of Presidential Decree No. 626, as amended, provides:

ART. 194. Death. (a) Under such regulations as the Commission may approve, the System shall pay to the primary beneficiaries upon the

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⁵ Id. at 43-44.

⁶ Id. at 48-49.

⁷ Id. at 21.

death of the covered employee under this Title an amount equivalent to his monthly income benefit, plus ten percent thereof for each dependent child, but not exceeding five, beginning with the youngest and without substitution, except as provided for in paragraph (j) of Article 167 hereof: Provided, However, That the monthly income benefit shall be guaranteed for five years: Provided, Further, That if he has no primary beneficiary, the System shall pay to his secondary beneficiaries the monthly income benefit but not to exceed sixty months: Provided, Finally, That the minimum death benefit shall not be less than fifteen thousand pesos. (As amended by Sec. 4, P.D. 1921).

Under Section 1, Rule III of the Amended Rules on Employees' Compensation, the above provision was clarified as follows:

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.

Thus, petitioner argues that the CA erred in granting death benefits to respondent considering that the deceased employee died because of complications from his Diabetes, viz:

The established fact that the deceased was diabetic, where hypertension and cerebrovascular diseases are scientifically proven to be its chronic complications, must not be completely disregarded and nullified by respondent's mere allegation that her husband had a very stressful job. As evidence would prove, it was Antonio's diabetes that had directly and proximately caused his cerebrovascular disease and hypertension that led to his death.⁸ (emphasis supplied)

Petitioner argues that Diabetes Mellitus not being listed as an occupational disease under Annex "A" of the Amended Rules, the death of the deceased, thus, was not compensable and respondent not entitled to death benefits.

We disagree.

Contrary to petitioner's stance, it was not an established fact that the deceased was diabetic. While Emilio's blood sugar was elevated at the time of his death, this does not necessarily mean that he was diabetic.

The CA aptly pointed out that:

x x x First, Antonio Esteves, Sr. had no medical history of having Diabetes Mellitus prior to his confinement. It was on one single occasion, only around the time of his death, that his blood sugar was found to be elevated. Second, per certification of the Municipal Health Officer of the Municipality of Gubat, Sorsogon, the deceased's elevated random blood sugar could have been attributed to the stress condition, and possibly the high concentrate dextrose fluids infused on him.⁹ x x x

Also, respondent was able to present evidence to establish that the diagnosis that the deceased had Diabetes Mellitus was erroneous, to wit:

x x x She further insists that while the death certificate of her husband shows that the underlying cause of death was Non-Insulin Dependent Diabetes Mellitus (NIDD), the following certifications belie the said averment:

"1) Per certification of Dr. Encinas-Carino, Chief of the Gubat Hospital, the deceased has no medical records of having Diabetes Mellitus prior to his confinement. $x \times x$

2) Dr. Garcia, the attending physician of the deceased at the time of his death and the one who signed the death certificate stated that the findings of Diabetes Mellitus prior to the death was only incidental and was probably a complication of Cerebrovascular Accident. $x \times x$

3) Dr. Dorion, the Officer in Charge of Gubat District Hospital issued the following statements, to wit:

Certification dated May 19, 2003 x x x

'This is to certify that ANTONIO ESTEVES y FLESTADO, a deceased employee of the Gubat District Hospital did not have in his medical records, both OPD and In-Patient, any consultation referable to Diabetes Mellitus. It was on one single occasion, only around the time of his death, that his blood sugar was found to be elevated. Furthermore, this is to certify that the deceased also had one episode of PTB, in 1989, in the years that he served in this institution.'

Certification dated August 11, 2003 x x x

'This is to certify that the underlying cause of death of Antonio Esteves, Sr. y Flestado, written on the Death Certificate is without sound medical basis. The certifying officer, Dr. Edgar F. Garcia, Jr., has stated such in his certification dated January 7, 2002.

A diagnosis of Diabetes Mellitus Type II (NIDDM) can only be made with 3 separate occasions of elevated blood measurements. This does not apply to the deceased. Furthermore, Dr. Garcia, the certifying officer, did not in any way manage/handle this case, which may have inadvertently caused his diagnosis of Diabetes.'

3) Certification by the Municipal Health Officer of Municipality of Juban, Sorsogon dated September 20, 2004 x x x, to wit:

'This is to certify that Mr. Antonio F. Estevez, a deceased employee of Gubat District Hospital has no medical records of having Diabetes Mellitus in the out patient as well as in the In-patient department. Although his hospital record, at the time of his death, showed an elevated Random Blood Sugar but this could be attributed to the stress condition, and possibly the high concentrate Dextrose fluids infused. The negative maternal and paternal Diabetic history should also be taken into consideration. I believe that from the written statements of all the attesting physicians, Diabetes Mellitus should be excluded as the primary disease that causes (sic) his death.' x x xⁿ¹⁰ (emphasis supplied)

Nevertheless, respondent failed to present sufficient evidence to establish that the death of the deceased was compensable. It is not sufficient that the fact of cerebrovascular accident (CVA) or hypertension is proven; in order to become compensable, certain conditions must be complied with. The Court explained in *Government Service Insurance System v. Calumpiano*¹¹ in this wise:

However, although cerebro-vascular accident and essential hypertension are listed occupational diseases, their compensability requires compliance with all the conditions set forth in the Rules. In short, both are qualified occupational diseases. For cerebro-vascular accident, the claimant must prove the following: (1) there must be a history, which should be proved, of trauma at work (to the head specifically) due to unusual and extraordinary physical or mental strain or event, or undue exposure to noxious gases in industry; (2) there must be a direct connection between the trauma or exertion in the course of the employment and the cerebro-vascular attack; and (3) the trauma or exertion then and there caused a brain hemorrhage. On the other hand, essential hypertension is compensable only if it causes impairment of function of body organs like kidneys, heart, eyes and brain, resulting in permanent disability, provided that, the following documents substantiate it: (a) chest X-ray report; (b) ECG report; (c) blood chemistry report; (d) funduscopy report; and (e) C-T scan.

In the instant case, the records are bereft of any evidence to establish the above conditions in order for the death as a result of a CVA to be compensable.

The CA stated that:

x x x In the instant case, the death certificate and the affidavits of the various physicians who studied the medical records of the deceased sufficiently support petitioner's claim for death benefits. The numerous stressful tasks and physical activities that the deceased had to perform as a utility worker at the GDH contributed to the development of his illness.¹²

We disagree.

¹⁰ Id. at 45-46.

¹¹ G.R. No. 196102, November 26, 2014, 743 SCRA 92, 101.

¹² *Rollo*, p. 48.

Decision

Notably, the CA does not point out the specific observations or statements in the specific certification that would establish the conditions set forth in the Amended Rules.

Nevertheless, in the very first condition provided in Annex "A" of the Amended Rules, evidence must be presented to show a history of any trauma to the head at work. There was never any evidence of this. There was never any mention of any head trauma that the deceased suffered. There being no evidence of trauma, the connection to the brain hemorrhage cannot be established.

As to his hypertension, the ECC found that he did not have any history and that it caused impairment of the function of body organs like kidneys, heart, eyes and brain. None of the medical reports had established the same.

Evidently, the death of Emilio cannot be concluded as compensable.

WHEREFORE, the instant petition is GRANTED. The Court of Appeals Decision dated December 13, 2007 and Resolution dated March 26, 2008 are hereby **REVERSED** and **SET ASIDE**. The Employees' Compensation Commission Decision dated April 20, 2005 is hereby **REINSTATED**.

SO ORDERED.

PRESBITERO J. VELASCO, JR. Associate Justice Decision

WE CONCUR:

ssociate Justice

(BIENVENIDO L. REYES Associate Justice

RDELEZA FRANCIS Associate Justice

NOE TIJAM Associate Justice

ΑΤΤΕ SΤΑΤΙΟΝ

I attest that the conclusions in the above Decision had been reached in consultation before the case was assigned to the writer of the opinion of the Court's Division.

PRESBITERÓ J. VELASCO, JR. Associate Justice Chairperson

CERTIFICATION

Pursuant to Section 13, Article VIII of the Constitution and the Division Chairperson's Attestation, I certify that the conclusions in the above Decision had been reached in consultation before the case was assigned to the writer of the opinion of the Court's Division.

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MARIA LOURDES P. A. SERENO Chief Justice

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