

BENEFITS

Covered employed members are entitled to a package of benefits under the SS and EC Programs in the event of sickness, maternity, disability, old age, and death. Self-employed and voluntary members also get the same benefits as covered employed members, except for the benefits under the EC program. Basically, the SSS provides for a **partial replacement of income** lost on account of the aforementioned contingencies.

SICKNESS



What is the Sickness Benefit?

The sickness benefit is a daily cash allowance paid for the number of days a member is unable to work due to sickness or injury.

How does an SSS member qualify for sickness benefit?

A member is qualified to avail of this benefit if:

1. He/She is unable to work due to sickness or injury and confined either in a hospital or at home for at least four (4) days;
2. He/She has paid at least three (3) months of contributions within the 12-month period immediately before the semester of sickness or injury;
3. He/She has used up all current company sick leaves with pay; and
4. He/She has notified the ER, or directly the SSS, if separated from employment, VM or SE regarding his/her sickness or injury.

How much sickness benefit is a member entitled to receive?

The amount of sickness benefit per day is equivalent to ninety percent (90%) of the member's average daily salary credit (ADSC).

How is the sickness benefit computed?

1. Exclude the semester of sickness.

A **semester** refers to two consecutive quarters ending in the quarter of sickness.

A **quarter** refers to three consecutive months ending March, June, September or December.

2. Count twelve (12) months backwards starting from the month immediately before the semester of sickness.

- Identify the six (6) highest MSCs within the 12-month period.

Monthly salary credit (MSC) means the compensation base for contributions and benefits related to the total earnings for the month. The maximum covered earnings or compensation is ₱16,000, effective January 1, 2014. Please refer to the following table:

Range of Compensation	MSC	Range of Compensation	MSC
P 1,000 – P 1,249.99	1,000	P 8,750 – P 9,249.99	9,000
P 1,250 – P 1,749.99	1,500	P 9,250 – P 9,749.99	9,500
P 1,750 – P 2,249.99	2,000	P 9,750 – P 10,249.99	10,000
P 2,250 – P 2,749.99	2,500	P 10,250 – P 10,749.99	10,500
P 2,750 – P 3,249.99	3,000	P 10,750 – P 11,249.99	11,000
P 3,250 – P 3,749.99	3,500	P 11,250 – P 11,749.99	11,500
P 3,750 – P 4,249.99	4,000	P 11,750 – P 12,249.99	12,000
P 4,250 – P 4,749.99	4,500	P 12,250 – P 12,749.99	12,500
P 4,750 – P 5,249.99	5,000	P 12,750 – P 13,249.99	13,000
P 5,250 – P 5,749.99	5,500	P 13,250 – P 13,749.99	13,500
P 5,750 – P 6,249.99	6,000	P 13,750 – P 14,249.99	14,000
P 6,250 – P 6,749.99	6,500	P 14,250 – P 14,749.99	14,500
P 6,750 – P 7,249.99	7,000	P 14,750 – P 15,249.99	15,000
P 7,250 – P 7,749.99	7,500	P 15,250 – P 15,749.99	15,500
P 7,750 – P 8,249.99	8,000	P 15,750 and over	16,000
P 8,250 – P 8,749.99	8,500		

- Add the six (6) highest MSCs to get the total MSC.
- Divide the total MSC by 180 days to get the ADSC.
- Multiply the ADSC by ninety percent (90%) to get the daily sickness allowance.
- Multiply the daily sickness allowance by the approved number of days to arrive at the amount of benefit due.

For example, an SSS member got sick or was injured in October 2015 for 20 days:

- The semester of sickness would be from July 2015 to December 2015.
- The 12-month period would be from July 2014 to June 2015, within which the six (6) highest MSC will be chosen.
- Let us assume that the six (6) highest MSC are ₱15,000 each. The total MSC would then be ₱90,000 (₱15,000 x 6).
- Divide the total MSC by 180 to get the ADSC, or ₱500 (₱90,000 ÷ 180).
- The daily sickness allowance is 90 percent (90%) of the ADSC (₱500 x 90%), or ₱450.

- f) Multiply the daily sickness allowance by the number of sick days (₱450 x 20 days), resulting in a sickness benefit due of ₱9,000.

How many days in a year can a member avail of the sickness benefit?

A member can be granted sickness benefit for a maximum of 120 days in one (1) calendar year. Any unused portion of the allowable 120 days sickness benefit cannot be carried forward nor added to the total number of allowed compensable days for the following year.

The sickness benefit shall be paid for not more than 240 days on account of the same illness. If the sickness or injury still persists after 240 days, the claim will be considered a disability claim.

Who should an EE notify regarding the sickness or injury?

An EE should notify the ER within five (5) calendar days after the start of sickness or injury. The ER, in turn, must notify the SSS of the confinement within (5) calendar days after receipt of the notification from the EE.

Notification to the ER shall be made within one (1) year from start of confinement if the member's confinement is in a hospital. If the member got sick or was injured while working or while he/she was within the company premises, sickness notification shall be made within ten (10) days from the start of confinement. In this case, the ER must notify the SSS within ten (10) calendar days from the start of the EE's sickness or injury while he/she was working or while within the company premises.

What is the procedure on notification for a member separated from employment, and for SE and VM?

Members separated from employment, SE, or VM should notify the SSS **directly** within five (5) calendar days after the start of confinement, unless such confinement is in a hospital, in which case, notification should be made within one (1) year from start of confinement.

Starting 18 August 2015, Overseas Filipino Workers (OFWs) are given a 30-day grace period beyond the five-day prescriptive period in filing sickness benefit applications. This is to address their concern that due to the distance between their place of work/residence and the nearest SSS office, their sickness benefit applications are often penalized for late filing.

The additional 30-day grace period shall apply only to cases that do not require hospital confinement.

What if the last day for filing of sickness notification or for filing for sickness benefit reimbursement falls on a Saturday, Sunday or holiday?

Effective November 9, 2016, whenever the last day to either: 1) notify the employer or SSS of an employee's/member's sickness or injury, or 2) file a claim for reimbursement for

sickness benefit falls on a Saturday, Sunday or holiday, the sickness notification or claim for reimbursement **may be filed on the immediately succeeding working day**, without the penalty of delay, under the following guidelines:

1. "Holiday" shall mean legal, regular, or special non-working day declared by the national government or local government units.
2. The five (5)-calendar-day notification period of the employee to the employer and the employer to SSS, respectively, may be done on the next working day if the last day of filing the sickness notification falls on Saturday, Sunday or holiday.
3. The determination of the compensable period shall exclude the Saturday, Sunday or holiday in which the deadline falls, as in the following cases:
 - a. 10-calendar day period immediately before the date of notification to the SSS by the employer;
 - b. one-year period immediately before the date the claim for benefit or reimbursement is received by the SSS; and
 - c. one-year period from the last day of confinement in a hospital.
4. Should the member or the employer fail to notify or file the reimbursement claim on the immediately succeeding or next working day, the usual procedure shall be applied in the evaluation based on the actual date the notification or reimbursement was received by SSS.
5. Members who are Overseas Filipino Workers (OFWs) shall continue to have a 30-day grace period beyond the existing five-day prescriptive period in the initial filing of sickness benefit application for cases that do not require hospital confinement.
6. For hospital confinement, if the deadline of the one-year prescriptive period falls on a Saturday, Sunday or holiday, the claim may be filed on the immediately succeeding working day, without the penalty of delay.

What are the effects of failure or delay in notification?

1. If the EE notifies the ER, or the SSS (in the case of a member separated from employment, SE or VM), beyond the prescribed five-day period, the confinement shall be deemed to have started not earlier than the fifth day immediately preceding the date of notification.

For example:

- a) Member is employed. Home confinement period was from March 1 to 31, 2014 (31 days).

Notifications made:

EE to ER – March 8, 2014 (must be within March 2 to 6)

ER to SSS – March 13, 2014 (must be within March 9 to 13)

Compensable period: March 3 to March 31, 2014 only (29 days)

- b) SE/VM/Member separated from employment. Home confinement period was from March 1 to March 31, 2014 (31 days).

Notifications made:

Member to SSS – March 8, 2014 (must be within March 2 to 6)

Compensable period: March 3 to 31, 2014 only (29 days)

2. If the ER notifies the SSS beyond five (5) calendar days after receipt of the notification from the EE, the ER shall be reimbursed only for each day of confinement starting from the 10th calendar day immediately preceding the date of notification to SSS.

For example:

Member is employed. Home confinement period was from March 1 to 31, 2014 (31 days).

Notifications made:

EE to ER – March 5, 2014 (must be within March 2 to 6)

ER to SSS – March 15, 2014 (must be within March 7 to 11)

Compensable period: March 5 to March 31, 2014 only (31 days applied by ER will be reduced to only 27 days for the ER's reimbursement)

3. If the EE has given the required notification to the ER, but the latter fails to notify the SSS of the confinement within the prescribed period resulting in the reduction of the benefit or denial of the claim, the ER shall have no right to recover the daily sickness allowance advanced to the EE.

How would an employed member be paid sickness benefit?

The payment of the daily sickness allowance is advanced by the ER every regular payday. The SSS will then reimburse the ER of the amount legally advanced upon receipt of satisfactory proof of such payment and legality thereof.

For this purpose, **all ERs are required to enroll in the “Sickness and Maternity Benefits Payment thru-the-Bank Program”** (SMB-PTB), wherein SSS reimbursements will be deposited directly to the existing savings/current account of the ER in an SSS-accredited bank. The Payment Advice containing the payment details of the Sickness-Maternity reimbursement will be sent to the ER thru his/her My.SSS account in the SSS website.

The SSS will reimburse the ER only for confinements within the one-year period immediately preceding the date the claim for benefit or reimbursement is received by the SSS, except for confinements in hospital.

For example, the SSS received the ER's reimbursement claim on October 3, 2015 for the EE's sickness period of September 23 to October 14, 2014. The ER will be reimbursed for the period October 3 to 14, 2014 only, as September 23 to October 2, 2014 already falls outside the prescribed one-year period for reimbursement claim.

How about the member separated from employment, the SE or VM?

The sickness benefit will be paid directly by the SSS to the member separated from employment, SE and VM through their single savings/current/cash card/prepaid account in SSS-accredited banks under the SMB-PTB.

For this purpose, the member, whose approved benefit amount is more than ₱1,000 and whose address is within thirty (30) kilometers to the nearest SSS-accredited bank, is required to open a single savings or current account, or to use his/her existing one with an SSS-accredited bank, to which the benefit payment will be remitted.

If the member does not have an existing bank account, the SSS shall issue a Letter of Introduction (LOI) form that must be presented to the SSS-accredited bank chosen by the member for the purposes of opening a single savings account or cash card account.

The member shall then be notified by SSS via e-mail or text of their benefit payment.

What is the prescribed period in filing a claim for sickness benefit of a member confined in a hospital?

For hospital confinement, the claim for benefit must be filed within one (1) year from the date of discharge. For home confinement, the sickness benefit claim must be filed within one (1) year from the start of illness. Failure to file the claim within the prescribed period will result in the reduction of the benefit or the denial of the claim.

What forms and documents are needed in filing for sickness benefit?

In filing for Sickness Notification (for Employed Members)

1. If filed personally by member:

- a) Sickness Notification (SN) Form**
- b) ID card/s and/or document/s
- c) Medical documents, if any

In case of work-related claims, **all** the above-listed documents, **plus** the following:

- a) Accident/Sickness Report from ER, if work-connected; and
- b) Police Report (for vehicular accident with third party involvement), if work-related;
and
- c) Photocopy of ER's logbook

In case of prolonged confinements or sickness, original/certified true copy of the following:

- a) Laboratory, X-ray, ECG and other diagnostic results
- b) Operating room/clinical records that will support diagnosis

In case of sickness that occurred while on strike/shutdown, original/certified true copy of the following:

- a) Certificate of Notice of Strike issued by DOLE
- b) Certificate of Foreclosure
- c) Certification from the DOLE that the employee or employer has a pending labor case
- d) Certificate of Non-advancement of Payment from Employer

Note:

- A Medical Specialist shall determine other required medical documents based on a separate checklist.
- For sickness or injury acquired abroad, documents issued by the foreign country should be in English translation and must be authenticated by the Philippine Embassy or Consulate Office, or duly notarized by a notary public from the host country.

2. If filed through Company Representative:

- a) System-generated Transmittal List (TL) or System-generated Acknowledgment Letter, if filed through Electronic Notification; or Employer TL
- b) **SN Form**
- c) Member's ID card/s and/or document/s (photocopy)
- d) Medical documents, if any

In case of work-related claims, **all** the above-listed documents, **plus** the following:

- a) Accident/Sickness Report from ER, if work-connected; and
- b) Police Report (for vehicular accident with third party involvement), if work-related; **and**
- c) Photocopy of ER's logbook

In case of prolonged confinements or sickness, original/certified true copy of the following:

- a) Laboratory, X-ray, ECG and other diagnostic results
- b) Operating room/clinical records that will support diagnosis

In case of sickness that occurred while on strike/shutdown, original/certified true copy of the following:

- a) Certificate of Notice of Strike issued by DOLE
- b) Certificate of Foreclosure
- c) Certification from the DOLE that the EE or ER has a pending labor case
- d) Certificate of Non-advancement of Payment from ER

Note:

- A Medical Specialist shall determine other required medical documents based on a separate checklist.
- For sickness or injury acquired abroad, documents issued by the foreign country should be in English translation and must be authenticated by the Philippine Embassy or Consulate Office, or duly notarized by a notary public from the host country.

In filing for Sickness Benefit Reimbursement Application (For Employed Members)

1. **Sickness Benefit Reimbursement Application (SBRA) Form**
2. Approved **SN Form** or Certificate of Medical Approval issued by the SSS Medical Evaluation Section

3. Copy of page of ER's Logbook (manual logbook or electronic filing) for approved EC claim
4. Member or Filer's SS card or other valid ID cards/documents as listed below:

A. Primary ID Cards/Documents

- SS card
- UMID card
- Passport
- PRC card
- Seaman's Book (Seafarer's Identification & Record Book)

B. Secondary ID Cards/Documents

- Alien Certificate of Registration
- ATM card (with cardholder's name)
- Bank Account Passbook
- Company or School ID card
- Certificate of Confirmation issued by National Commission on Indigenous People
- Certificate of Licensure/Qualification Documents from MARINA
- Certificate of Naturalization
- Credit Card
- Court Order granting petition for change of name or date of birth
- Driver's License
- Firearm License card issued by PNP
- Fishworker's License card issued by BFAR
- GSIS card/Member's Record/Certificate of Membership
- Health or Medical card
- ID card issued by LGUs (e.g. Barangay/Municipality/City)
- ID card issued by professional association recognized by PRC
- Life Insurance Policy of member
- Marriage Contract/Marriage Certificate
- NBI Clearance
- OWWA card
- Pag-IBIG Transaction Card/Member's Data Form
- PhilHealth ID card/Member's Data Record
- Police Clearance
- Postal ID card
- Seafarer's Registration Certificate issued by POEA
- Senior Citizen card
- Student Permit issued by LTO
- TIN card
- Transcript of Records
- Voter's Identification card or Voter's Affidavit / Certificate of Registration

1. If filed by ER or HR

Present the original of any one (1) of the ER's/HR's **primary** ID cards/documents or two (2) **secondary** ID cards/documents, both with signature and at least one (1) with photo (as listed in Page 45).

2. If filed by Company Representative

Present the Authorized Company Representative (ACR) Card, or if without ACR Card (not available at the time of filing) present the following:

- Letter of Authorization (LOA) issued by the ER's authorized signatory reflected in the Specimen Signature Card (SS Form L-501); and
- Original company ID of company representative.

3. If filed by ER Representative

- LOA issued by the ER's authorized signatory as reflected in the SS Form L-501
- Original company ID of ER representative.

Note: If member is entitled to SS and EC Sickness Benefit, fill out Part IIB of the SBRA for the computation of both benefits.

In filing for Sickness Benefit Application (For SE/VM/Member Separated from Employment)

1. Sickness Benefit Application (SBA) Form

2. Copy of page of ER's Logbook (manual logbook or electronic filing) for approved EC claim
3. If filed by Member, present original of any one (1) of the **primary** ID cards/documents or two (2) **secondary** ID cards/documents, both with signature and at least one (1) with photo (*as listed in Page 45*).
4. If filed by Member's Representative, present the following:
 - Original of any one (1) of the Authorized Representative's **primary** ID cards/documents or two (2) **secondary** ID cards/documents, both with signature and at least one with photo (*as listed in Page 45*); **and**
 - Original of any one (1) of the Member's **primary** ID cards/documents or two (2) **secondary** ID cards/documents, both with signature and at least one (1) with photo (*as listed in Page 45*).
5. In case of prolonged confinements or sickness, original/certified true copy of the following:
 - a) Laboratory, X-ray, ECG and other diagnostic results
 - b) Operating room/clinical records that will support diagnosis
6. Present the original/certified true copy and submit the photocopy of the following additional required documents, whichever is applicable:

For SE and VM (previously employed)

If confinement period applied for is within the period of employment or prior to date of separation

- Certificate of separation from employment with effective date of separation and that no advance payment was granted (signed by the ER's authorized signatory reflected in SS Form L-501)

For Member Separated from Employment

If confinement period applied for is within the period of employment or prior to date of separation

- Certificate of separation from employment with effective date of separation and that no advance payment was granted (signed by the ER's authorized signatory as reflected in SS Form L-501)

If confinement period applied for is after the date of separation

- Certificate of separation from employment with effective date of separation (signed by the ER's authorized signatory as reflected in SS Form L-501)

Note: Certificate of separation is **not required** for SE/VM (previously employed) or member separated from employment under any of the following conditions in which supporting document/s shall be required to be submitted, as enumerated below:

If company is on strike

- Notice of strike duly acknowledged by the DOLE; and
- Duly notarized Affidavit of Undertaking issued by the member that no advance payment was granted and with indicated effected date of separation.

If company has been dissolved or has ceased operation

- Duly notarized Affidavit of Undertaking issued by the member that no advance payment was granted and with indicated effected date of separation.

If there is a case pending before a court regarding separation of member

- Certification from DOLE; and
- Duly notarized Affidavit of Undertaking issued by the member that no advance payment was granted and with indicated effected date of separation.

If separated from employment due to Absence without Leave (AWOL) or with strained relations with the ER

- Duly notarized Affidavit of Undertaking issued by the member that no advance payment was granted and with indicated effected date of separation.

Where can the member file the claim for sickness benefit?

Sickness Benefit Reimbursement Application (for Employed members) and Sickness Benefit Application (for SE/VM/Member Separated from Employment) can be filed in any SSS branch that is most convenient to ER or member.